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Abstract

This paper explores the actions and attitudes of humanitarian aid workers in relation to dead bodies, with a focus on cadaver management after disasters. Semi-structured interviews were conducted with disaster relief workers in Yogyakarta, Indonesia. The study analyses their views of rights and responsibilities, use of humanitarian standards, priorities, and roles in dead body management. A conceptual framework evaluates theories of human rights of the dead and responsibilities towards the dead, while a literature review pulls together relevant studies from disaster management, public health, and human rights.

The study finds culture, religion, and family shape humanitarian approaches to the dead. The right of survivors to mourn is of particular importance after disaster. The government plays a central role, while humanitarian standards exert influence over dealing with the living but not with the dead. Identification is both a responsibility to the survivors and a priority within dead body management. This study aims to fill a gap in literature and encourage other researchers to look at the effects of the dead on humanitarian crises situations.

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Content

List of Acronyms

ADPC	Asian Disaster Preparedness Center
BPBD	Badan Penanggulangan Bencana Daeral/local office of government-run disaster management agency
FISIPOL	Faculty of Social and Political Science at Universitas Gadjah Mada
ICRC	International Committee of the Red Cross
NGO	Non-governmental organisation
NOHA	Network on Humanitarian Assistance
PAHO	Pan-American Health Organization
PMI	Palang Merah Indonesia/Indonesian Red Cross
POHA	Project on Humanitarian Affairs
SAR	Search and Rescue
SOP	Standard Operation Procedure
UDHR	Universal Declaration of Human Rights
UGM	Universitas Gadjah Mada
UN	United Nations
WHO	World Health Organization

1. Introduction

“Newly dead bodies cannot be made live again, nor can they be made to vanish forever in a puff of smoke.” – Joel Feinberg, Sentiment and Sentimentality in Practical Ethics.

1.1. Introduction

In November 2013, Typhoon Haiyan devastated parts of the Philippines, including the city of Tacloban. Media attention in the following days and weeks reported rising death tolls, but also took notice of what was happening to the dead. The BBC followed Red Cross teams recovering bodies and reported the construction of new cemeteries attempting to accommodate the victims. American news outlet NBC News described simple burials at a church in Palo, with graves for the identified marked by cardboard headstones and common graves for the unidentified. CNN reported body collectors had come from other parts of the Philippines and that residents of Tacloban were exposed to the stench of bodies, which were lined by the streets. CNN also documented residents’ worries over how exposure to the bodies might harm their health, though CNN did indicate that these fears were most likely exaggerated. This coverage is notable for its attention to an often quantified - typically by a numerical death toll - but little explored dimension of disaster relief: dead body management.

Humanitarian action aims to alleviate human suffering caused by natural or human events. It aims to be impartial and assist those in need without discrimination. Macrae explained, “The concept of humanitarianism suggests that human life and dignity are essentially valuable and should be protected irrespective of gender, race, creed, or political affiliation” (1998, 309). This value for all human life has translated into humanitarian actors working to deliver basic needs and services to survivors of crises, such as armed conflicts and natural disasters. Such work can save lives, improve the health of individuals and communities, and provide support for affected populations to regain the strength and capacity to resume their pre-crises ways of life.

However, the reality of humanitarian crises is that not everyone survives. People die - from violence stemming from armed conflict, from blunt trauma sustained during an earthquake, and from infectious diseases spread from living in a crowded camp setting. In these unfortunate but not unusual situations, families lose a loved one, communities lose a member - and a body is left behind.

Humanitarian actors working in the immediate aftermath of crisis situations may be confronted with dead bodies, both directly and indirectly through the effects death has on survivors. In such situations, materials and time are often scarce. Both local and external actors must prioritise on how to use their resources. An assessment of which of the affected community’s needs take precedence must be done as quickly as possible, and amidst a number of other problems. “Extreme events present unforeseen conditions and problems, requiring a need for adaptation, creativity, and improvisation while demanding efficient and rapid delivery of services under extreme conditions" (Harrald 2006, 257). This situation presents several dilemmas. How important can the management of dead bodies be when there are survivors in need? Humanitarian action often emphasises non-discrimination, but surely the needs of the living must come first? Why should humanitarian actors be concerned with those who have already passed away when living people are suffering?

This study examines the actions, attitudes, and viewpoints of humanitarian actors in relation to dealing with dead bodies. While it is not within its scope or aim to provide a full, neat solution the questions posed above, the study serves as a starting point for understanding the perceptions of humanitarian actors confronted by death.

The guiding research question is, how do humanitarian aid workers deal with the management of dead bodies in disaster situations and what are their perceptions towards dealing with the dead? While dead body management may be a consideration for humanitarian actors working in conflict zones, this study focuses on disaster situations. Torry defined disasters as "events that cause physical damage to a community, or communities, so severe that most or all major public and private facilities no longer provide essential social and economic services without extensive replacement or repair" (1978, 302). Disasters are the focus for several reasons. First, disaster situations may not carry the same degree of political complexity as can be found in conflict situations. This can translate into smoother access for a researcher to meet with organisations and speak to humanitarian workers about their experiences.[1] Second, the chosen study site of Yogyakarta, Indonesia is susceptible to disasters, including an earthquake in 2006 and a volcanic eruption in 2010. More information on Yogyakarta and its selection as the study site is presented later in this chapter.

Several sub-questions are also explored. The first is, to what extent do ideas of rights and responsibilities influence the actions and attitudes of humanitarian actors in relation to dead bodies? These ideas of rights and responsibilities are discussed further in the following chapter. Other sub questions considered are: How do international and national humanitarian standards affect the management of dead bodies? To what extent are the roles of humanitarian actors defined in dead body management? What influence, if any, do dead bodies have on priorities after a disaster? Some analysis of these questions can be found in Chapters 4, 5, and 6.

There is little academic work exploring the effects and dilemmas that the dead can create for humanitarian actors. This study is an attempt to fill a gap in knowledge, and encourage larger scholarship of the issue. Like humanitarian studies itself, the management of dead bodies is an interdisciplinary field that

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[1] Of course, this is not to say disaster management is free of politics or social influences. Rather, the point is that gaining access to less politically-charged or biased information regarding conflicts can be more difficult, especially within a relatively short time frame.

includes facets of variety of faculties such as anthropology, public health, religion, and law. The research presented in this thesis was approached from a qualitative social science and humanitarian studies perspective. It is the author's hope that further studies will be conducted to put together a more comprehensive picture of how dead bodies can impact humanitarian actors and their relief efforts. On a practical level, such research has the potential to better prepare relief workers for the unexpected challenges they may face in disasters and to facilitate humanitarian actors in reflecting on their own practices, standards, and experiences with cadavers.

1.2. Research setting and thesis overview

This fieldwork for this study was conducted over a three-month period in the summer of 2013 in Yogyakarta, Indonesia.[2] The study site was chosen for three main reasons: first, Indonesia is a country that is familiar with humanitarian crises. Many of these crises come in the form of natural disasters. One of the largest was the 2004 Indian Ocean earthquake and tsunami, which affected the province of Aceh in northern Sumatra. In 2005, BBC News reported an estimated 166,000 people in Indonesia alone had died as a result of the disaster.

Yogyakarta is located on the island of Java, and was not affected by the 2004 earthquake and tsunami. The region is still prone to disasters. Mount Merapi, an active volcano to the north of the city of Yogyakarta, erupted on a large scale in 2010. Over 300 people died, including the spiritual "keeper" of the volcano. In 2006, an earthquake southwest of the city measuring 6.3 on the Richter scale resulted in over 5,500 deaths.

The second reason for choosing Yogyakarta as the study site was the strong presence of civil society groups (Kilby and Williamson 2011, 339). Civil society organisations include religious groups, international non-governmental organisations (NGOs), and grassroots local groups. Different kinds of civil society groups in the city, as well as government actors, are involved in disaster management. Finally, this study was conducted within the Network on Humanitarian Assistance's (NOHA) partnership with Universitas Gadjah Mada (UGM) in Yogyakarta. The academic staff from the Faculty of Social and Political Sciences (FISIPOL) and the staff at the newly-created Project on Humanitarian Affairs (POHA) office provided valuable support and guidance.

Yogyakarta's religious landscape is worth noting. 86% of the Indonesian population is Muslim (Seo 2013, 5). The majority of people living in the Special Region of Yogyakarta are followers of Islam. In fact, Yogyakarta is the only one of Indonesia's thirty-three provinces that is ruled by a Muslim sultan (Seo 2013, 13). Other religions are present in Yogyakarta, such as Buddhism and various denominations of Christianity, but Muslim burial traditions were the most

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[2] „Yogyakarta" can refer to both Yogyakarta City and the Special Region of Yogyakarta, a larger area that has the city as its capital. Unless noted, "Yogyakarta" refers to the city and its immediate surroundings in the context of this thesis. In this paper, the spelling "Yogyakarta" is used, but some sources may use alternate spellings such as "Jogjakarta" or abbreviations such as "Yogya" and "Jogja."

commonly referenced in this study. Riad explained the typical procedure following the death of a Muslim individual:

> *Upon death, the eye lids are to be closed, the body should be covered, and preparation for burial takes place as soon as possible. The whole body is washed and wrapped in a shroud. Muslims gather and a prayer is performed for the dead. The body is to [be] buried soon after the prayer (1995, 3).*

This brief explanation intends to introduce readers unfamiliar with Muslim burials to a few common practices.

The next chapter contains a literature review, and outlines some of the theories and concepts used to build the framework for the study. The following chapter charts the study's methodology. The fourth, fifth, and sixth chapters analyse the findings of the study. A final chapter presents conclusions and recommendations.

2. Literature Review and Conceptual Framework

2.1. Introduction

Humanitarian studies is a relatively new field of academic scholarship. Hilhorst, Dijkzeul, and Herman defined humanitarian studies as examining "how humanitarian crises evolve, how they affect people, institutions and societies, and the responses they trigger" (2010, 127). This definition recognises the breadth of humanitarian studies, and hints towards its inclusion of a variety of more traditional faculties such as medicine and anthropology.

This chapter is divided into two sections: a literature review and a conceptual framework. The first section examines existing literature that is pertinent to dead body management and includes works from the fields of disaster management, public health, and human rights. The second section explores theories that consider rights and responsibilities as they relate to the dead. These theories are presented to show different schools of thought and what implications these schools may have for humanitarian studies. In later chapters, these theories will also be referenced and compared with the study data.

2.2. Literature review

Literature for this study was gathered by searching through academic databases, consulting relevant journals, and reviewing available texts at the UGM POHA library. This study appears to be the first to explore the relationship between dead bodies and humanitarian actors. Nonetheless, past scholarship has produced work relevant to the scope of this thesis. There are three main subjects of academic literature that were found to be useful: disaster management, public health, and human rights.

2.2.1. Disaster management

The relevant disaster management literature can generally be split into two categories: disaster response and disaster preparedness. The former is more pertinent to the study of dead body management, but the latter should not be ignored. Such literature contains insight into how humanitarian actors do or should prepare for casualties.

Lindell, Perry, and Prater defined emergency preparedness as "preimpact activities that establish a state of readiness to respond to extreme events that could affect the community," and state these activities should have a goal of protecting "the health and safety of individuals" (2006, 244). By this definition, preparing to deal with dead bodies is within the scope of disaster preparedness because death affects the community. While Lindell, et al. do not specifically mention how consideration towards the dead can be integrated into disaster preparedness, several of their ideas translate to cadaver management. For example, they stated that "the organizational structure used to respond to everyday emergencies will form the basis of an expanded structure to deal with disasters" (2006, 258). An example of an "everyday emergency" is a death. Communities have their own arrangements and plans for dealing with non-disaster related deaths. These plans may be formal, with the integration of legal avenues and the involvement of official actors, or they may be more informal and reliant on tradition. In either case, understanding how the affected communities typically handle death can help humanitarian actors prepare for crises with large numbers of casualties.

The Pan-American Health Organization (PAHO) and World Health Organization (WHO) put together what may be the most comprehensive resource on dead body management, "Management of Dead Bodies in Disaster Situations". The handbook includes a section on how to best prepare a plan for mass deaths. This section stresses some key information. First, the handbook reminds humanitarian actors that the state is responsible for disaster response, including the management of cadavers. Second, the text addresses the dilemma of priorities. "It is important to clarify that the priority is to assist disaster survivors and to maintain basic services, but we cannot overlook the recovery of dead bodies" (2004, 1). Finally, the handbook emphasises that the treatment of the dead can affect the living. Activities related to the recovery of the dead that have the potential to influence the well-being of the living include body identification, disposal procedures, and dissemination of information regarding casualties to the media. Other sections of the handbook explore medical, legal, and cultural considerations in dead body management. The information is presented in the form of case studies, general abstract ideas - for example "Observe common rules of courtesy and respect" (119) - and more specific guidelines on technical matters, such as the recommended temperature for preserving human remains (4° C). The handbook can be classified as an example of humanitarian standards.

Humanitarian standards are becoming an increasingly useful tool in humanitarian action, including disaster response. The "Humanitarian Charter and Minimum Standards in Humanitarian Response" is one the most widely-used examples of humanitarian standards and were created "in response to concerns about the quality and impact of humanitarian assistance" (Griekspoor and Collins 2001, 740). The text, also known more commonly as the Sphere standards, is comprehensive in nature and contains baseline goals for humanitarian needs ranging from nutrition to hygiene. It includes several mentions of dealing with the dead. First, as in the PAHO/WHO handbook, Sphere reminds humanitarian actors that government authorities are the primary party responsible for dead body management (2011, 120). Second, Sphere upholds that any work that involves the dead should be conducted with dignity and respect to local culture (297). Finally, the standards warn against resorting to mass graves for reasons of public health, a topic discussed further on in this literature review (300). The standards do not say dead body management is automatically a priority, but suggest it can be "in the event that the appropriate and dignified disposal of dead bodies is a priority need, coordinate with responsible agencies and authorities dealing with it." (2011, 118). The Sphere standards direct humanitarians to the PAHO/WHO handbook for further, more in-depth information.

The Indonesian Ministry of Health released their own set of national standards, titled "Technical Guidelines for Health Crisis Responses on Disaster." As their title suggests, the guidelines centre on health after disaster, and contain a fair amount of information about the management of dead bodies. The guidelines divide mass disaster response into four phases: communication and coordination (1), rescue operation (2), management of surviving victims (3), and management of dead victims (4). Identification is a large part of this final phase, with its own chapter within the book. The "Technical Guidelines" touch on priorities but have a different view from the PAHO/WHO and Sphere standards: "The initial priority during the emergency response period is management of medical emergency towards the injured victims and identification of the dead victims at the health facilities" (2007, 5). Unlike the other two, this set of standards places cadaver management, albeit a specific aspect, as a top priority. The "Technical Guidelines" agrees with the other standards in that the government is the responsible party for disaster management (2007, 5). These three sets of standards are more thoroughly examined in Chapter 5, while Chapter 6 takes a look at priorities.

In addition to handbooks on standards, there are some academic studies on dead body management after disasters. Some of this literature discusses the consequences or challenges that deaths can bring to different stakeholders. Kelman, Spence, Palmer, Petal, and Saito examined the perceptions and experiences of foreign tourists that survived the 2004 Indian Ocean tsunami. Several survivors who were in the area as tourists reported feeling guilt for surviving, and one study participant said they wished they had known more about how to handle dead bodies (2008, 108-109). This study allowed researchers insight into the concerns and feelings of survivors after a disaster and demonstrates how all survivors, including those who are not members of the local community, can be affected by disaster-related deaths.

Sumathipala, Siribaddana, and Perera studied the psychosocial component of management of bodies after a disaster, looking specifically at the case of Sri Lanka after the 2004 Indian Ocean tsunami. They found several obstacles to effective care for those traumatized by death. First, many affected countries did not have mental health policies at the time of the tsunami. Second, relief coming from abroad was often not in accordance with the local culture. Third, many people were missing without a body for the family to claim, or bodies that were found were not identified. Sumathipala, et al. argued, "Even though identifying a cadaver of a close person may be distressing, it will help the surviving family members and other loved ones to go through the process of grief" (2006, 252). Their study acknowledged the realities of dead body management, for example by discussing mass graves and how to best mitigate their harmful effects if they are found to be unavoidable. The study also highlighted some of the inequalities in identification, pointing out that most Asian victims were not identified. In contrast, foreign governments put more emphasis and resources into the identification of their deceased nationals (249). Sumathipala, et al. also linked their findings to public health concerns and to a larger human rights framework, both of which are discussed in the following sub-sections.

2.2.2. Public health

One common myth of disaster management is that dead bodies are inherently harmful to the health of survivors because they foster the spread of disease. Healing, Hoffman, and Young concluded that human cadavers do carry a limited risk of infection, but that this hazard is relatively small, can be mitigated through proper handling, and is less than the risk of infection by a living person carrying a disease (1995). Morgan examined infectious disease risks from human cadavers, specifically following a natural disaster. He found that while there is a small risk of dead bodies spreading certain diseases, most people perish in a disaster due to "trauma, burns, or drowning, and they are no more likely than the local population to have acute infections (meningitis and septicaemia) or rare diseases" (2004, 308). Morgan also warned against using the risk of disease as a justification for mass graves. Both Morgan and Healing, et al. acknowledge that there is a small risk of certain diseases being spread in specific circumstances, but that these risks are extremely low in the aftermath of a disaster. Morgan summarised, "There is no evidence that, following a natural disaster, dead bodies pose a risk of epidemics" (2004, 310).

Humanitarian actors are also working to ensure this myth is not spread and does not justify potentially harmful decisions. The Asian Disaster Preparedness Center (ADPC) released a fact sheet on the disposal of cadavers in emergencies. The resource, which is accessible online and much shorter than the PAHO/WHO handbook, compresses information about handling dead bodies into an easy-to-read format. Like the PAHO/WHO text, the fact sheet relates the proper management of dead bodies back to the needs of the surviving population, and addresses the physical and mental health risks cadavers may bring. The physical health risk is addressed in quite a blunt manner: "The widespread belief that corpses pose a risk of communicable disease is wrong" (2007, 1). This fact sheet is an excellent example of academic and practical information condensed into an accessible resource.

De Ville de Goyet published an article in 2000 entitled "Stop propagating disaster myths." He argued that the myths surrounding cadavers and health can result in severe harm to affected populations, in the form of "precipitous and unceremonious disposal of corpses" (762). His article demonstrated that this issue is not limited to any single geographic area, as he cited examples from Nicaragua, Mozambique, and Turkey. De Ville de Goyet went beyond issues of public health and linked the improper treatment of corpses to human rights violations. He argued that mass graves and other improper disposal techniques deprive survivors of their right to honour the dead. While several of the literature examples named above associated the management of dead bodies and the well-being of the survivors, de Ville de Goyet's link to human rights is more abstract and rooted in ideas that are more contested. The next sub-section takes a closer look at relevant human rights literature.

Of course, there is more to public health than communicable diseases. Parkes chronicled some of the physical and mental effects of bereavement. He contended that while "losses are not necessarily harmful" (1998, 856), they can have negative health effects. Examples include depression, anxiety, increased risk of heart disease, and impairment of the immune system. Parkes also cited research stating that one third of people suffering from the loss of a loved one, exhibit negative effects to their physical or mental health (856). Parkes's study did not focus on disaster, but emphasised that disasters increase risk of harm after bereavement (858). In a similar vein, The PAHO/WHO handbook states that mass fatalities coupled with material losses pose a high psychosocial risk and notes that these risks extend to both members of the affected community and humanitarian workers (2004, 110 & 123-125).

2.2.3. Human rights

The examination of human rights literature is presented both in this literature review, and then in the conceptual framework. The conceptual framework focuses on specific topics in human rights, mainly how they relate to the dead and to the surviving family of the dead. This section probes into the role of human rights in disaster management and significant mentions of human rights in relation to public health.

Macrae found that humanitarian action is shifting towards an approach rooted in human rights (2002, 16). Slim argued this shift could result in a more empowering, egalitarian humanitarianism. He also recognised that further imbuing human rights into humanitarianism brings complexity, "But the moment one uses rights-talk, one becomes explicit in a demand for responsible politics and justice" (2002, 8). While Slim's point is valid, this study does not have the space or scope to delve into the legal responsibilities involved in human rights. Instead, human rights are seen more from the perspective of Brown, who wrote, "If, in the last fifty years, human rights have become the international moral currency by which some human suffering can be stemmed, then they are a good thing" (2004, 452). Humanitarian action aims to reduce human suffering, and human rights are a moral tool being used more and more in this endeavour.

ActionAid, an international NGO that has worked in Indonesia, advocates the idea of humanitarianism seen through "rights-based glasses". This notion acknowledges and incorporates the rise of human rights in humanitarian action, while not forcing humanitarianism to become solely driven and maneuvered by rights.

ActionAid demonstrated their commitment to this idea by releasing a report evaluating the human rights of the 2004 Indian Ocean tsunami response. The report found that despite all the affected countries having ratified international human rights instruments, violations of human rights were still found in the disaster response. Like the standards surveyed in the previous subsection, the ActionAid report emphasised the role of the government. "Though communities and NGOs are undoubtedly important actors, it is governments who control the lion's share of relief and rehabilitation funds and who are ultimately responsible for protecting human rights" (2006, 7). While there was no specific mention of human rights and corpses, the report did link some rights violations to the loss of a family member. For example, one widow reported being unable to claim compensation after her husband's death because his body was never found, while orphaned girls and widowed women experienced further marginalisation (43).

2.2.4. Literature review conclusion

Despite a lack of comprehensive studies and information regarding dead bodies and humanitarian action, the three disciplines of disaster management, public health, and human rights proved to hold valuable and relevant material. Disaster management literature showed some consideration to the issue, with the PAHO/WHO handbook "Management of Dead Bodies in Disaster Situations" serving as the most well-rounded text to date. Academics have also contributed to the field in two main ways. One is through general research on disaster preparedness and response that can be transferred to dead body management. The second is through more specific studies such as those by Kelman, et al. (2008), and Sumathipala, et al. (2006). These works all seem to agree that dead body management is an area that has room for reflection and improvement.

Relevant public health literature included studies that examine the risk of infection from corpses, and the likelihood of that risk causing harm to the health and well-being of survivors. Morgan found that bodies killed during a disaster are no more likely to be harbouring an infectious disease than any living member of the population (2004). A fact sheet compiled by the ADPC provides humanitarian actors with basic information about dead body management, including debunking the myth that cadavers are automatically dangerous to the health of survivors (2007). These public health studies have an important impact on this research. Having strong evidence as to how dead bodies affect the health of survivors in reality is a useful tool in analysing the data gathered from humanitarian workers.

The third group of literature is human rights based. Several authors found that humanitarianism has increasingly embraced human rights. One NGO coined the term "rights-based glasses," which exemplifies how humanitarian action incorporates ideas of rights. This growing inclusion of human rights by humanitarian actors is discussed further and in more detail in the following section.

2.3. Conceptual framework

After reviewing the literature and gaining an understanding of the current thoughts, studies, and ideas relevant to the management of dead bodies, a conceptual framework can now be constructed. This framework presents theories and ideas that shaped the design and content of this study, and provides a backdrop for the analysis of the findings. Three different core ideas are explored. First, the notion that the dead themselves are holders of human rights is examined. Next, the idea of responsibilities toward the dead is analysed. Finally, the conceptual framework considers the human rights of the surviving family.

2.3.1. Human rights of the dead

The idea of the dead as holders of human rights can shape dead body management by restructuring how humanitarians think of those affected by their actions. If it can be established that humanitarian actors can and should think of the dead as rights-holders, then mass graves, improper burials, and unidentified corpses take on a new significance and meaning. But does humanitarianism's shift into donning "rights-based glasses"' have such a far reach?

Rosenblatt stated that he found no evidence of organizations involved in humanitarian action discussing the human rights of the dead as a factor in their work. He also explained that human rights of the dead is not an idea that is new or singular to any one culture - references to rights of the dead are present in Egyptian and Greek history (2010, 925). Despite this background, the theory of human rights of the dead is contested, scrutinised, and argued - as are other philosophies of human rights.

Several authors explored the relationship between the dead, their interests, and human rights. Wilkinson stated that the dead can have interests, arguing that "if you think the interests of the living should be protected in such-and-such a way in [a] case, then you should think that the similar interests of the dead should be treated that way too" (2002, 39). Interests of the dead relate to their potential human rights. Rabe Smolenksy (2004) argued that the dead can be rights-holders by employing Interest Theory, which claims that just because a person is unable to make choices or express their interests does not mean they do not or cannot have any interests (764). Rabe Smolensky distinguished only interests which are known after death can survive (771-772). Feinberg agreed, "We can think of certain of the deceased's interests, however, (including especially those enshrined in wills and protected by contracts and promises) as surviving their owner's death, and constituting claims against us that persist beyond the life of the claimant" (1974, 52). According to this logic, a person that declared their desire for a certain type of burial, for example in writing or by prescribing to a set of religious beliefs, has the right to that burial because those interests survive their death.

These authors agreed that just as the living possess interests, so can the dead. According to Smolensky, the dead possess interests and thus human rights. So, the ability to hold interests is the qualifier for possessing human rights. This logic could be expanded to say that those who die as the result of a natural disaster can be presumed to have had an interest in being buried or otherwise laid to rest, properly and with respect. Therefore actions like mass graves cannot only be deemed morally wrong and culturally disrespectful, but actually in violation of the rights of the buried.

This is a powerful idea, but there are several holes in this logic. First, claiming interests as validation enough for being a rights holder is not strong reasoning because it is convincingly contested. Partridge concurred that interests are needed to hold rights, but predicated that the dead are not eligible to be seen as interest-holders because they cannot detect when their interests have been ignored or wronged (1981). This is at odds with Feinberg's assertion that interests can survive and make claims beyond the lifetime of a person. Feinberg defined rights-holding as "to have a claim to something and against someone the recognition of which is called for by legal (or other institutional) rules, or in the case of moral rights, by the principles of an enlightened conscience" (1974, 43). The rights-holder must therefore be able to bring their claim of abuse before either the law or common human decency. The dead are incapable of making such pleas on their own. They do not have a way to bring claims forward, and they do not have a recognisable way of knowing when their rights have been abused. Their relatives may allege a violation, but the deceased themselves have no way of bringing a human rights offense to light and then fighting for its justice. De Baets stated the dead cannot claim rights because "they are incapable of having needs, interests, or duties, or of making choices or claims, either now or in the future" (2004, 135). Interests are joined with other factors: the ability to make choices and act in the present or future. Those that argued that the dead hold human rights because they possess interests do not address these other capabilities which the dead are lacking.

A counter to Interest Theory is Will Theory, which interprets rights as making their holders "small scale sovereign[s]" (Hart 1982, 183). Graham explained, "Will theory states that having a right involves being in the position to control the performance of a duty" (1996, 260). Will Theory therefore would interpret the dead as not holding rights, since they are not able to exercise power over the fulfilment of their rights. Even if the deceased leaves a will, it is up to survivors to see to its execution. When one dies, their "sovereignty" as rights holders can be seen as dying with them. Critics of Will Theory may point out that such an interpretation of rights denies groups such as children or the mentally ill the ability to be rights holders. While this is an interesting criticism, this paper focuses on the rights of the dead. Unlike the aforementioned groups, there is no doubt that the dead will ever gain their capacity to control their rights or that their condition will ever change.

In its preamble, the Universal Declaration of Human Rights (UDHR) refers to the "human family," but does not give much clarity as to what this term means and if the dead are included. Callahan suggested "that the reasons that all arguments for harm and wrong to the dead must fail is that there simply is no subject to suffer the harm or the wrong" (1987, 347). De Baets rejected the ideas that the dead should be viewed as physical bodies, persons, or human beings. Instead, he claimed that they are "former humans" and while former humans possess their own kind of dignity, they cannot be the subject of human rights (2004, 134-135). De Baet's view of dead as former humans is useful in the context of humanitarian action and human rights, because it is a reminder that the deceased once held rights and that those rights may have been violated in the past.

The concept of human rights of the dead is certainly interesting and thought-provoking. However, it is too contested and abstract to hold any strong weight. The dead have no way of claiming their rights, and have no way of independently turning any posthumous interests into action. Therefore, this study hypothesises that the human rights of the dead do not hold much importance in the management of dead bodies after disasters. This is not to say that it is permissible to disrespect the dead, or that there are no human rights involved in the death of an individual. The next section addresses responsibilities the living have towards the dead. Arguments about human rights of living follow.

2.3.2. Responsibilities towards the dead

The dead are not definitively holders of human rights, but the living still do not have free reign to do whatever they want with a body. The notion of responsibility towards the dead acknowledges that there are some guidelines and considerations for the living in regards to how they treat the deceased, but is not as strict and limiting as an application of human rights. There are two main reasons the living have a responsibility toward the dead: the dead possess dignity and the dead deserve respect.

Dignity is a concept often found in humanitarian studies and human rights literature that is notoriously difficult to define. Rosenblatt interpreted dignity as "a 'supreme value' that people have as moral subjects" (2010, 939-940), while de Baets characterised human dignity as "an appeal to respect the actual humanity of the living" (2004, 136). In these two complementary ideas, dignity is recognition of the value of life, and the value that people have by virtue of being human. De Baets further differentiated between the dignity of the living in the aforementioned definition, and the dignity of the dead. This posthumous dignity differs because it is not an appeal to respect the current humanity of a person, but to respect the previous humanity of the deceased. De Baets took a steadfast position in his argument, stating, “Neglecting the view that the dead possess dignity offends the sensibilities of humanity at large” (2004, 137).

While dividing dignity into two separate definitions may seem unwieldy, it is useful in humanitarian action because it asks survivors to bestow dignity onto a dead body without discrimination. If dignity is a product of the value of all human life, posthumous dignity is the value of all human life that once was. Framing dignity in these terms remembers the humanity of those who have died, which may be difficult in disaster circumstances where large numbers of bodies are damaged, disfigured, or even missing, while still recognising that the dead are different from the living.

De Baets tied respect into his ideas about dignity, “Why do the living have responsibilities to the dead? I argue that this is so because the dead deserve respect, and they deserve respect because they possess dignity” (2004, 136). He cited the often costly and resource-heavy efforts poured into finding the remains of soldiers killed in battle or disaster victims as evidence of dignity and respect (2007, 82). Respect of the dead is also not bound to any one religion or culture, and allows for different interpretations of what is the best treatment of a body while still adhering the global human notion of respect.

Establishing that the dead possess their own kind of dignity and are worthy of commanding respect justifies having responsibilities towards the dead. The living have certain responsibilities to the dead because the living need a way to honour this dignity and respect. De Baets outlined ten responsibilities the living have towards the dead, labelling them as a “Declaration of the Responsibilities of Present Generations toward Past Generations.” These responsibilities are related to body, funeral, burial, will, identity, image, speech, heritage, memory, and history. Articles 1-3 and 5 are particularly relevant to this study:

Art. 1 (Body): ‘The responsibility to preserve their physical integrity.’

Art. 2 (Funeral): ‘The responsibility to honour them with last rites.’

Art. 3 (Burial): ‘The responsibility to bury or cremate them decently and not to disturb their rest.’

Art. 5 (Identity): ‘The responsibility to identify their body; record their death; and preserve their name, dates of birth and death, and nationality’ (2004, 143).

By rooting the treatment of the dead in responsibility rather than rights, de Baets did not require the dead to be able to claim abuses against them. Instead, the action is on the side of the living. Rather than requiring the dead to act as rights-claimers, an impossible situation, de Baets asked the living to act as responsibility-bearers, something they are indeed capable of. The term “responsibility” is also not as rigid as “right” - a right implies a need for justice in case of violation. Here, if a responsibility is not followed through, the result is a lack of respect towards the dead and towards their dignity. While some may say this is not a strong enough reason for the living to uphold these responsibilities, it is worth remembering that there are indeed laws that protect the dead from extreme behaviour such as necrophilia or mutilation. The living are also motivated to uphold these responsibilities for selfish reasons. Proper treatment of the dead can benefit the living by allowing the process of grieving to continue, provide a venue for people to console one another, and present the living with an opportunity to reassign important roles once held by the deceased (Dundes Renteln 2001, 1015 and Sumathipala et al. 2006, 250).

What role does morality play in framing these responsibilities to the dead? Feinberg said, “There may be morally relevant properties of foetuses other than rights and personhood that have a bearing on how we ought to treat them” (1982, 19). While Feinberg wrote specifically about foetuses here, this idea of a moral reasoning can be applied to the dead. Partridge agreed, “I have concluded that, even though a person’s interests do not survive his death, we may nonetheless affirm that, in a community of moral personalities and just institutions, we are not only permitted to give the dead their due, we are morally required to do so” (1981, section VI). While using morality as a guide as to how to treat the dead is not inherently harmful, it is not as useful as the ideas of dignity and respect. While dignity and respect are also abstract ideas that are difficult to define, morality is even more ambiguous in the context of the dead. For example, one culture may believe it is morally wrong to cremate bodies, while another believes it is morally right. Still, both cultures are respecting the bodies in the way they deem fit.

De Baets contended that the dead possess posthumous dignity and therefore must be respected. These two factors result in a set of responsibilities the living have towards the dead. De Baets’s ideas are particularly valuable and applicable to humanitarian action because they allow for a variety of customs and beliefs to fit within them, and also place the action on the side of the living. It is more plausible that humanitarian actors search for victims after disasters not to uphold the deceased’s human rights, but out of a sense of responsibility to those who have died. Human rights may still play a role through the rights of surviving family members. These rights and their implications for humanitarian action are explored in the next subsection.

2.3.3. Rights of the living

Articles 9 (Memory) and 10 (History) of de Baets’s “Declaration of the Responsibilities of Present Generations toward Past Generations” are, respectively, “The right to mourn, to hold funerals, to bury and cremate, and to commemorate” and “The right to know the truth about past human rights abuses” (2004, 143). The previous section established that viewing the living as having responsibilities to the dead is more useful than saying the dead have human rights. Yet here, de Baets is inserting rights into his Declaration. The key difference is that the holders of the rights laid out in Articles 9 and 10 are not the deceased, but the living. It is the survivors that hold the right to honour the dead and the right to know the truth about previous violations of human rights. The survivors are capable of claiming these rights in a way the deceased is not.

De Ville de Goyet wrote, "The survivors of disasters have the right to proper identification and burial of their relatives and to sustained support for a prompt return to 'normality'" (2000, 762). Framing identification and burial as a right of the relatives, and not merely a kind gesture, makes them stronger and claimable. Bestowing human rights on the living rather than on the dead is a more productive way to channel rights because the subjects of the rights are present and tangible. Callahan said ideas of harming or wronging the dead really "involve other values like the rights and interests of persons and other sentient beings" (1987, 351). During a humanitarian crisis, this is particularly important because of limited resources and competing urgencies. The abstract violation of the potential rights of the dead would be silent. The pain and harm caused by a human rights violation to the living are visible.

2.3.4. Conceptual framework conclusion

The human rights of the dead is an interesting concept that involves examining the capacity of the dead to be harmed and/or hold interests. However, there is no way for the dead to realise that they are being harmed or to claim a violation of their rights. Human rights of the dead are too abstract and disputed to hold strong value in dead body management.

More appropriate are the human rights of living survivors in relation to the dead. By regarding certain aspects of death management, such as proper burial and memorial services, as claimable rights, humanitarians have a direct subject to work with. The living can assert the upholding of their rights. The relationship of the duties that the living have towards the dead are better described as responsibilities rather than rights. De Baets summed these ideas up into a "Declaration of the Responsibilities of Present Generations toward Past Generations." The idea of responsibilities recognises the posthumous dignity of the deceased, while distinguishing that they are not claimable subjects of rights.

These points were considered throughout the design of this study. The final framework is based on rights of the living survivors and the responsibilities the living have towards the dead. These ideas are examined in relation to the data in Chapter 4. The next chapter presents and justifies the methodology used to construct and carry out the study.

3. Methodology

3.1. Choice of methodology

Methodology is extremely important in any study, as "methodology and procedures determine the nature of the findings of research" (Sikes 2004, 17). This study's central research question focuses on attitudes, hence the goal is to draw out and understand different perceptions from a group of actors with similar characteristics. With this objective in mind, the most appropriate methodology was determined to be qualitative in nature. One of the advantages of qualitative research is that it assists researchers in understanding the perspectives, viewpoints, and interpretations of their participants (Hennink, Hutter, and Bailey 2011, 9).

Data was collected by conducting semi-structured interviews with individuals who are currently working or who have previously worked in positions that involve responding to humanitarian needs in the immediate aftermath of disasters. Interviews were chosen to best have an opportunity to gain an understanding of the perceptions and experiences of the participant. Semi-structured interviews were chosen over informal interviews because having a loose structure and interview guide provided the researcher with a chance "to ensure that the same general areas of information are collected from each interviewee; this provides more focus than the conversational approach, but still allows a degree of freedom and adaptability in getting information from the interview" (McNamara, Types of Interviews paragraph 1). Semi-structured interviews thus provided a "best of both worlds" scenario, where the researcher maintained some control and consistency while allowing for different participants to respond in their own manner.

Other qualitative methods, such as focus groups or participant observation, were considered but could not provide the same advantages as semi-structured interviews. These methods did not offer the same balance of coherence between information gathered from participants and flexibility. Semi-structured interviews gave participants the opportunity to explain their experiences and ideas in an open setting, while still allowing for the researcher to pose questions in an attempt to unearth the most relevant information. The interview setup was also chosen to encourage participants to feel comfortable discussing a topic that may be viewed as uncomfortable or morbid. In practice, participants all seemed at ease discussing death and its impact on their work. Focus groups may not have provided the same level of comfort, especially amongst individuals of varying religious beliefs and backgrounds. Turner explained that semi-structured interviews cultivate a personal rapport between researcher and participant (2010, 755). In this study, speaking one-to-one fostered an open and understanding atmosphere. Participants had ample room for explaining their own answers at their own pace, without having to "compete" to speak with other participants. In fact, several participants expanded upon previous questions later on in their interviews. Some brought up topics on their own and some chose to revisit an earlier discussion when asked by the researcher if they had anything to add.

For this study, direct observation was not a compelling option. Observing humanitarian actors in the aftermath of a disaster with a focus on how dead body management may or may not affect their work would certainly make for an interesting study, but in this case was not feasible. In terms of practicability, there was no disaster crisis in Yogyakarta during the study period. Additionally, there are ethical considerations with participant observation in such a context. In this case, the researcher does not have an appropriate background or sufficient knowledge of psychosocial issues that engaging with a disaster-stricken population during a time of crisis requires. Such an endeavour would need more time, a higher degree of consistent and constant coordination with the participant humanitarian actors, and a greater acceptance of the researcher by the wider community. More on the ethics of this study is presented later in this chapter.

3.2. Participants and interview structure

Participants were selected based on two pieces of criteria. Firstly, they needed experience working in responding to humanitarian needs in the immediate aftermath of a disaster. Secondly, all participants were required to have at least some of their disaster relief experience come from working with an organisation in the Special Region of Yogyakarta. The organisation did not need to be exclusive to Yogyakarta, so those who worked in the Yogyakarta office of a larger national or international organisation were included in the target group. These two pieces of criteria ensured some level of commonality between the study participants. The first piece of criteria was especially important, as the study aimed to learn about the perceptions and experiences gained from working in post-disaster situations. The second piece of criteria gave participants a kind of geographical "lowest common denominator." Furthermore, it also limited the study to avoid chasing potential contacts all over Indonesia with no cohesion or association. Limiting participants to those working in organisations in the Special Region of Yogyakarta and not just Yogyakarta City was also practical. The city of Yogyakarta is of small physical size, and the two most recent large disasters, the 2006 earthquake and 2010 volcanic eruption, both occurred outside city limits. In the case of national or regional bodies with several offices within the Special Region of Yogyakarta, for example the Indonesian Red Cross (PMI) and the local branch of the government disaster management agency (BPBD), participants hailed from the city of Yogyakarta branch. This choice was made for both consistency and increased chance of access.

Participants were found through contacts provided by UGM and POHA, through e-mails and phone numbers found on various organisations' websites, from suggestions and contacts from other participants, and by visiting organisations in person for a brief introduction. All potential participants received an interview information sheet in English and Bahasa Indonesian by e-mail before the interview. This allowed time for them to read through the material and ask any questions before agreeing to an interview. Participants were also given hard copies at their interview. All participants agreed to sign an informed consent form. Interpreters signed confidentiality forms before the start of the interview, in the presence of the researcher and the participant. In accordance with Indonesian practice, the researcher gave participants a name card with contact information valid both during and after the study period. Participants were encouraged to get in contact with any concerns or questions at any point before, during, and after the interview.

Six participants were interviewed, each from a different organisation. Four participants had dealt with bodies in disasters and two had not directly dealt with cadavers in their disaster response work. The latter were included within the scope of the study to provide a clearer insight into the whole picture of disaster response in Yogyakarta, to be studied in comparison with those who had dead body management experience, and to gain insight into any perceived indirect effects that dead bodies can bring after a disaster. Two participants worked for governmental agencies, two for religious NGOs, one for the PMI, and one had experience as a disaster response volunteer through the Faculty of Geography at UGM. Four individuals requested an interpreter be present while two were comfortable and capable of speaking entirely in English.

Participants were given the opportunity to suggest a location for their interview, all of which lasted no longer than one hour. All six participants wished to be interviewed at their place of work, during their working hours. Participants chose the setting for their interview to allow them the opportunity to select a place where they felt comfortable. Before beginning the interview, the researcher went through the interview information sheet with the participant and the participant had a chance to ask questions. Many participants asked about the background of the researcher, as well as the researcher's experiences with Indonesian culture. These conversations were a good way to start building rapport and establish an open interview dynamic. The researcher used an interview guide with different types of questions to help gently keep the conversation on track. Not all questions from the interview guide were asked in every interview, and participants were not given a copy of the interview guide.

The interview guide structure followed the method described by Hennink, Hutter, and Bailey (2001, Chapter 6). Following their recommendations and guidelines, the interview guide comprised of four broad categories of questions. Firstly, introductory questions began building rapport with the participants. These questions were relatively simple, tended to focus on the background and previous experiences of the participant, and did not go into the specific topic of cadaver management. Next, opening questions continued creating a safe, comfortable atmosphere but these questions started to close in on the topic. The third type included key questions. These questions were the central questions at the heart of the study, and generally took up the most time. This was also the section where interviews began to become more distinct from each one another, as participants gave more detailed responses about their viewpoints and experiences. Finally, closing questions phased out of rapport to appropriately end the interview. These questions were broader in nature than the key questions, and tended to focus on the future. The final question in all interviews was, "Do you have anything to add?" This gave participants the opportunity to bring up anything that had not come up during the interview that they felt was important, or revisit any previously discussed topics. The researcher anticipated that some participants may also ask their own questions. In practice very few participants had questions for the researcher at the end, perhaps because all participants took advantage of opportunities to ask questions before the start of the interview. Those who did ask questions at the end usually inquired about the next steps of the study.

To test the utility and suitability of the interview guide, the researcher ran the first interview as a pilot interview. In addition to gaining data from the conversation and engaging with the participant, this interview also served as a test run for the questions on the interview guide. The researcher noted the flow and the responses garnered from different questions. After this interview, the interview guide was revised to rearrange and eliminate questions, as well as clarify wording. Running a pilot interview was also useful for the researcher to reflect on and evaluate their own comportment. The researcher ruminated and made steps to improve the interviews throughout every stage of the study, but the pilot interview was specifically marked as important in this aspect.

For accuracy, a digital recorder documented all interviews. These recordings were then transcribed. All participants consented to the recording in writing, and agreed to deletion of the recordings upon completion of the thesis. The researcher was capable of transcribing only the English portions of interviews, but all transcriptions made note of exchanges in Bahasa Indonesian. Quotations from participants in the text are printed including grammatical errors but excluding speech disfluencies such as "um" and "ah." After transcription, all interviews were coded using the Saturate web-based software. Coding and data analysis is explored later in this chapter.

3.3. Ethics

Ethical considerations were extremely weighty to this study, as "it is only by getting the ethics right that research excellence can be achieved" (Potočnik 2007, 5). As a guideline, the researcher used the three core principles of the Belmont Report, an oft-cited source for ethical principles and guidelines in research involving human participants. These principles are respect of persons, benefice, and justice. Each of these principles translates into an application. They are, respectively, informed consent, assessment of risks and benefits, and selection of subjects (The National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research, 1979).

Respect of persons and informed consent were recognised by acknowledging the self-determination and autonomy of each participant via the informed consent form. All potential participants obtained an information sheet with details about the study. The information sheet spelled out the voluntary nature of participation and the freedom for participants to withdraw consent at any time. Confidentiality and anonymity were also addressed. Participants were assured their personal information would not be included in the thesis and that all audio recordings would be destroyed. Before signing the informed consent form, participants had the opportunity to again read through the information sheet and ask the researcher any questions. All forms, including the interview information sheet, the informed consent form, and the interpreter confidentiality form, were available to participants in both English and Bahasa

Indonesian. These steps were taken to establish that all participants involved in the study made an informed, autonomous decision.

Benefice is understood in the Belmont Report not as an act of charity, but as an obligation with two general rules: "do not harm" and "maximize possible benefits and minimize possible harms" (1979, Part B, Point 2). In this study, the researcher believed the greatest possibility for harm lay in the subject matter. Dealing with death can be traumatic. To mitigate this potential for harm, all participants were well-informed of the subject matter beforehand, as well as their right to bow out of the study at any time and/or refrain from responding to any question they did not wish to answer. The researcher posed questions in a sensitive manner, and followed cues from participants' receptiveness and responses. Another potential source of harm was the study's focus on humanitarian relief workers and how their responses may affect their employment. A hypothetical example is that a participant is asked a question about standards, and they reply that their organisation officially follows standards but that they personally do not give them much thought when working in the field. Should the participant's organisation find out that they said this, there could be a negative consequence for the participant. To ensure such a scenario did not happen, three steps were taken. Firstly, personal information of participants, such as name and professional title, was removed from the data. Secondly, the researcher did not pose questions that had a high probability of creating conflict between the participant and their place of work. Finally, as has been mentioned before, all participants were made aware that they were by no means obligated to answer any question. Thus the potential for harm was reduced to a very low risk.

Benefits for participating in this study can be evaluated from two perspectives: the benefits for the individual participants, and the benefit for the community as a whole. Overall, this study was relatively low-resource and short in duration. These limitations mean a high value of benefit for the wider community was difficult to achieve. The benefits to the community can be interpreted as being channeled through the benefits to the participants. By partaking in the study, participants gave a small time and energy commitment but gained the chance to talk about a rarely-discussed facet of disaster relief. Within the actual interview, participants did a good amount of self-reflection on their own experiences and perceptions. Several participants also expressed their desire to be more connected to academic studies and/or international research, so this study presented such an opportunity. Participants are also entitled to a copy of the final thesis, as well as a study summary.

The third principle and application of the Belmont Report are justice and selection of subjects. The Report explains that an "injustice occurs when some benefit to which a person is entitled is denied without good reason or when some burden is imposed unduly" (1979, Part B, Point 3). As benefits from this study were mainly personal, including self-reflection and involvement in international research, the researcher cannot "take" them from participants. Selection of subjects was handled in a just manner - that is to say, participants who were perceived to be "good" for the study by giving answers in line with the researcher's ideas were not sought out over those with experiences that may have challenged the researcher's concepts. The only criteria given to selecting participants was that they fit in the target group of individuals who have worked in disaster relief with an organisation based in Yogyakarta. All participants within the target group that consented to an interview were included in the study.

3.4. Data analysis

After transcription, interviews began the process of being coded. For this study, coding was done by the researcher and not by a third-party as suggested by some academics. Third-party coding is suggested to avoid carrying over any biases the researcher may possess, and to better determine the quality of codes (Turner 2010, 759), but was eliminated as an option for this study mainly due to resources and time. However, the researcher maintained an awareness of their own possible biases, reviewed examples of potential bias or strong assumptions with other NOHA researchers, and left ample time between the interview and the coding to allow for a fresh analytical mindset.

Coding identified both topics prompted by the participant, or inductive codes, and those topics brought up by the researcher, deductive codes. This follows the grounded theory of Strauss and Glaser, as presented by Hennink, Hutter, and Bailey (2011, Chapter 9). Grounded theory sees data analysis as the interplay between inductive and deductive reasoning. This approach was chosen because it recognises which codes and topics were prompted by the researcher and therefore perceived by the researcher as important, in comparison to codes brought up by the participants because of their perceived significance. Making a distinction between the two types of codes ensured that data analysis recognised any biases or assumptions from either researcher or participant, while working through the data to find appropriate, effective, and robust codes. Deductive codes were found by examining the questions posed by the researcher during interviews and also by looking at the interview materials, including the interview guide and interview information sheet. Inductive codes were identified from the responses of interviewees. Some coding techniques used to find inductive codes included looking only at responses and ignoring the prompting question, identifying repetition, and examining the overall content of an interview. All interviews went through the coding process at least twice, with several weeks in between each attempt at coding. This was done to examine if codes found in other interviews were present in previously coded interviews, while being mindful not to overanalyse or insert codes forcefully.

Data was coded using the original version of the web-based Saturate coding software. Saturate was chosen due to its ease of use, coding capacities, and easy accessibility. As a web-based coder, Saturate was available for use by the researcher from any computer with an internet connection and a web browser. Accessing the data required a specific username and password. However in the interest of privacy and control over the data in the long-term future, the uploaded data will be removed from the Saturate database following the completion of this thesis.

After all data was coded, the codes were examined independently and with other relevant codes. The codes of participants with similarities, for example participants who did not have direct experiences working with dead bodies, were also analysed together. Analysis consisted of reviewing the information presented in different codes against the literature and conceptual framework, and identifying connections and divergences within the data.

An important aspect of the data analysis process was bracketing. Bracketing is the "means by which researchers endeavor not to allow their assumptions to shape the data collection process and the persistent effort not to impose their own understanding and constructions on the data" (Ahern 1999, 407). While it is impossible to claim that a research study is completely objective, because humans by nature cannot be one-hundred percent objective, steps can be taken to ensure the highest level of awareness and rectification of researcher biases. Bracketing is often described as a "reflexive" process, because it requires a researcher to examine their own behavior, attitudes, and motives.

Even before data analysis began, bracketing was important in the creation of the interview materials. Questions for the interview guide were scrutinised to identify interviewer assumptions. For example, the question "How have international humanitarian standards influenced your disaster response work?" assumed that the participant is familiar with international humanitarian standards and that these standards have indeed exerted some kind of influence. To improve the presence of biases and assumptions in this particular question, it was split in two. "Have you encountered humanitarian standards in your work? If so, which ones?" was included in the introductory questions. "How do you believe humanitarian standards have or have not influenced your work in disaster relief?" was put with the opening questions.

Within data analysis, bracketing was used to moderate in several different areas of the study. First, bracketing was a helpful tool in determining whether codes were inductive or deductive. If upon reflection information was found to be prompted by the researcher, it was deemed deductive. Second, bracketing was used to examine how codes were grouped. The researcher examined the different topics and groups created, and identified any underlying assumptions brought in to their creation. Finally, bracketing helped to ensure data findings and results were not "wished" and therefore "true." This is to say that findings were actually derived from the data extracted during the study, and not simply constructed because they fit the researcher's needs and preconceived ideas. This involved not only thinking about assumptions reflexively, but also about incentives. Ahern explained, "Insight often occurs when you are able to make connections between your behavior and your underlying motives" (1999, 410). The full results of the data analysis are presented in the next three chapters.

3.5. Limitations and challenges

Recognising limitations is important because they can have an effect on the data collected, as well as on its analysis. Perhaps the largest and most obvious limitation in the study was that the researcher is not a native Indonesian, and does not speak Bahasa Indonesian. Being a foreigner presented two main challenges. The first was in participant recruitment. As an outsider to the community, the researcher did not possess a strong knowledge of specific organisations and their work in practice. Participants had no connection or familiarity with the researcher or NOHA, and therefore could be said to have little incentive to join the study. Not having an "in" or a previous contact within the different organisations sometimes made it more difficult to get a reply. Several organisations were contacted multiple times with no response. The presence of a group of fellow NOHA researchers during the exact same time frame also trying to contact many of the same organisations compounded this challenge. The second challenge that came with being a foreign researcher was in understanding cultures and customs. The researcher attempted to alleviate this by asking Indonesian friends for advice on how to conduct business relations, and observing how Indonesians interacted with each other on a professional level.

Language was another limitation. The researcher took advantage of two weeks of Bahasa Indonesian classes to gain a basic knowledge of the language, and spoke a few simple sentences in Bahasa Indonesian at the beginning of each interview. Many participants indicated that they appreciated this gesture. However, all participants knew that the researcher did not have sufficient language skills to conduct the interviews in Bahasa Indonesian. The researcher offered to arrange for an interpreter for each interview, and four participants accepted this offer. These interpreters were students at UGM, with varying levels of English proficiency. While all interpretations were sufficient for extracting data, it is difficult to gauge the preciseness of translations. The researcher took care to frame questions during the interview in an open manner and with deliberate wording, but it is not certain that these considerations survived the interpretation process.

Timing and duration of the study were also constraints. The Muslim fasting period of Ramadan began one week after the researcher arrived in Yogyakarta. Many offices and organisations operated under reduced hours, and it was difficult to make contacts during this time. After the month of Ramadan were two weeks of holidays, where it was again difficult to arrange for interviews. The researcher took advantage of this time to build the conceptual framework, work on interview materials, and become more familiar with Indonesian practices. Another challenging aspect was the research duration - as with many projects, a longer study period may have allowed more time to build contacts and find more participants. However, the six participants interviewed provided a comprehensive picture.

A final limitation related to the subject matter of the study. Death can be a difficult topic to discuss. For this reason, an emphasis was placed on creating a warm, safe atmosphere during the interviews and building rapport through the introduction and opening questions. Participants were given information regarding the subject of the study before agreeing to participate, and the researcher made a point to remind all participants that they were in no way obligated to answer any questions they did not want to. All participants were very open and comfortable talking about death, burial practices, and disaster relief in an honest manner, and none ever outright declined to answer a question. However, a few participants and other contacts in organisations expressed some surprise about the subject matter after the initial exchange with the researcher.

3.6. Conclusion

Methodology is not only the way a study is conducted, but also a large factor in determining the quality and robustness of its findings. Semi-structured interviews were chosen because they best facilitated drawing out experiences and perceptions of participants. The researcher made use of an interview guide to provide a loose structure and consistency throughout the various interviews.

Ethical concerns were a high priority. Communication regarding privacy, autonomy, and self-determination of participants was facilitated by the use of interview information sheets and informed consent forms. To overcome communication obstacles, relevant materials were translated into Bahasa Indonesian and participants were offered use of an interpreter. Other challenges and limitations included the limited time available for the study and the potentially sensitive nature of the study subject.

The next three chapters explore the results and findings drawn from the data. By introducing a clear picture of the methodological choices and challenges present in this study, this chapter laid a foundation to better understand the following findings.

4. Rights and Responsibilities

4.1. Introduction

One of the main sub questions in this study is: to what extent do ideas of rights and responsibilities influence the actions and attitudes of humanitarian actors in relation to dead bodies? Chapter 2 introduced some of the relevant theories of human rights of the dead, human rights of the living after the death of a family member, and responsibilities of the living to the dead. The hypothesis derived from examining the literature was that human rights of the dead do not play a large role, if any, in the perceptions and actions of humanitarian workers during disaster relief. Instead, human rights of the living and responsibilities to the dead were hypothesised to hold more weight and be more influential in the decisions of study participants.

This chapter explores the three theoretical areas of human rights of the dead, human rights of the living, and responsibilities of the living to the dead. Data gathered from the six interviews that constituted this study is examined under each theory, against the responses of other participants, and against the applicable literature. Thus the hypothesis is tested and the data analysed for further findings.

4.2. Human rights

During their interviews, participants were asked about their familiarity with human rights. These responses gauged explicit knowledge. A distinction is made here that this knowledge is explicit, meaning that participants self-identified as familiar with the terminology used by the researcher and/or specifically mentioned “rights.” The term “human rights” cannot be assumed to be known to all people. This is particularly true when working with people from varying backgrounds, professions, and cultures. For example, a person may be familiar with the idea of all people having the right to life, but be unfamiliar with the term “human rights” and explain using different wording. This implicit knowledge is discussed further in this subsection.

One participant described themselves as familiar with human rights and had previous experience working in a human rights capacity. This participant mentioned rights before the researcher did, and went on to explicitly reference rights numerous times. Another participant stated that they did “not yet” have a strong familiarity with human rights, but went on to later explicitly frame some ideas about the treatment of the dead as “rights”. Explicit references to rights, where participants defined something they spoke of as a “human right” or a “right” was limited to these two participants. A third participant was straightforward in saying that they had not come across any ideas of human rights in their work, and rights did not come up again, implicitly or explicitly, in their interview.

Most other participants did not self-identify as knowledgeable or familiar with human rights, but went on to reference rights implicitly in their interviews. Implicit referencing of human rights can be seen as an interplay between inductive and deductive reasoning. For example, a participant might bring up the importance of ensuring that survivors are adequately fed. This specific example would then be interpreted by the researcher to be under the domain of human rights, because the right to food is a recognised international human right and because of the degree of significance the participant attached to food.

The following subsections of this chapter will examine both these implicit and explicit mentions of rights in the data. This thesis does not have the space or scope to go into detail about the definition of human rights, or the legality of human rights. In several cases, the UDHR is used to place an implicit reference as a right, or to give further information and context about a human right. The UDHR is a declaration consisting of thirty articles, each outlining a universal human right. It was adopted by the United Nations (UN) General Assembly in 1948. While it is not legally binding, the UDHR has been influential in shaping national and international treaties, constitutions and policies and is considered by some academics to be part of customary international law (Humphrey 1979).

It is used here because of its worldwide reach, accessibility, and concise referencing of rights.

4.3. Rights of the living

Rights of the living came up in two capacities. The first was the rights of living as they relate to the dead, one of the conceptual framework points. The second manner in which rights of the living appeared in the data was as rights unrelated to the dead. While the former is more central to the study, the latter is still worth noting to gain an understanding of the role of human rights to the participants and their work in disaster relief.

4.3.1. Rights of the living, as they relate to the dead

The UDHR does not specifically name any rights of or relating to the dead. Other sources such as the PAHO/WHO handbook "Management of Dead Bodies in Disaster Situations" and de Baets's article "A Declaration of the Responsibilities of Present Generations Towards Past Generations" offer some ideas about how human rights apply to the families of the deceased. The main area where human rights of the living intersected with the death of a family member was the right to mourn and perform funeral rites.

De Baets listed "The right to mourn, to hold funerals, to bury and cremate, and to commemorate" as a right derived in part from Article 19 of the UDHR (2004, 143). Article 19 reads, "Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers." After a disaster, funerals and other rituals associated with death become especially important. They provide a forum for survivors to grieve and come to terms with their loss. Funerary rituals are also important for the community to heal because they allow the continuation of well-known traditions in a time of uncertainty, and provide an opportunity for the community to confront the reality of death. The PAHO/WHO handbook explains: "In short, funeral rites serve to redistribute the roles of the deceased among the survivors, adjusting the social roles of those who remain in order to ensure the continuity of the group" (2004, 88). Several sources referred to survivors as suffering from the pain of a "second death" when denied the right to mourn and part with their loved ones (Lithwick 2002, PAHO/WHO 2004).

Several participants considered the importance of burials to a disaster-affected community. One explained that Muslim communities have mechanisms set in place to handle dead bodies, "This kind of thing, every community, usually they have the team to clean and then to wrap." These teams are not specific to times of crisis or disaster, but are a constant resource to prepare bodies for burial. Several other participants discussed how the community is hands-on in gathering and preparing bodies after disasters. One was deliberate in mentioning that not all of Indonesia has the same burial customs as Yogyakarta, explaining that bodies in Bali that come from Hindu families are sometimes cremated.

Five participants spoke about the importance involving the deceased's family, and most brought this up several times. One discussed the necessity of gaining the family's permission before burying a body. Another participant said, through an interpreter, "So [I think] because of [my] upbringing, [I] prefer when they found the body, we have to return it to the family." The third participant emphasised the need to contact the family no matter which organisation finds a body, and also mentioned the feeling of peace that can come to family members after their deceased loved one is given befitting funerary rites. A fourth participant stated that sometimes families would come to their office to thank them for returning the body of a loved one. The fifth participant that spoke about the importance of involving families brought up autopsies. They explained that for many people, autopsies were strange for deaths of known or natural causes, even if a person died in a disaster. The participant elucidated that it is best for the family to decide on their own if they would like to pursue an autopsy rather than have a government agency or NGO automatically perform one. This is a particularly relevant point in a majority Muslim society such as Yogyakarta. While some Muslims allow autopsies, many are against them because they delay burial and because "Islamic belief holds that it may be possible for the deceased to perceive pain" (Sheikh 1998, 139).

Another participant focused on the aftermath of the Mount Merapi eruption. They explained that communities living on the slopes of the volcano felt a strong connection to the land, and had a strong desire to be buried in their villages. However, the participant pointed out that graves in disaster prone areas needed to be treated with care and that there were government regulations regarding where graves could be made. One village on the slopes of Merapi opted to bury their dead, a group of about fifteen to twenty bodies, in a mass grave. The participant expounded that the bodies were all identified, individually washed and wrapped, and placed in the common grave with the consent of their families. The potential dangers of mass graves are well-documented, with both scholars and international standards agreeing that they are rarely warranted and should be avoided (Rosenblatt 2010, Morgan 2004, de Baets 2004; ADPC 2007, The Sphere Project 2011, PAHO/WHO 2004). The PAHO/WHO handbook emphasises the importance of individual graves, even framing them as a right of the family: "Every effort must be taken to identify the bodies. As a last resort, unidentified bodies should be placed in individual niches or trenches, which is a basic human right of the surviving family members" (2004, xii). The case of the mass grave on Mount Merapi showed not a defiance of standards, but a community exercising their right to bury their dead in the manner they believed to be appropriate.

4.3.2. Rights of the living, unrelated to the dead

Human rights of the living came up in several contexts that did not directly relate to the management of dead bodies. For example, four study participants iterated the importance of meeting the essential needs of survivors after disasters. They described the significance of food, shelter, clothing, healthcare, water, and sanitation services for the well-being of survivors. The participant who self-identified as familiar with human rights referred to several of these as being the "basic needs" of survivors, and explicitly recognised them as a "right." The UDHR acknowledges many of the aforementioned needs as human rights in Part 1 of Article 25: "Everyone has the right to a standard of living adequate for health and well-being of himself and his family, including food, clothing, housing, and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control (1948)." Water and sanitation are not explicitly mentioned in the UDHR, but their validity as a claimable human right has a notable amount of support in both academia and the international community (Gleick 1999).

By bringing up different facets of basic human needs, these four participants not only demonstrated an awareness of the components that are necessary for human survival but also gave an insight into their perception of priorities after a disaster. The basic needs named by individual participants varied - one participant focused more on medical care and water, while another stressed the need for adequate food and shelter. The differences in priorities for several participants is discussed in-depth in the Chapter 6.

Three participants brought up the importance of education. In the UDHR, education is named as a human right under Article 26, which begins "Everyone has the right to education." Part 2 of the Article states: "Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms" (1948).

All three participants cited different examples of education related to disasters. One emphasised the need for continued health education as well as practical technical education, such as training on how to desalinate sea water for coastal or island communities. Another participant accredited simulations as a useful tool for educating people on procedures for coping with disasters. The third participant said, "After the emergency relief then you need to have go back to the education, how the education is not going to stop." This participant referred to education, along with housing and food, as one of "three basic human rights needs." Furthermore, two participants charged education as a crucial component of overall disaster preparedness in Yogyakarta. Both participants cited preparedness programmes run in schools by NGOs and the PMI. This discussion of education and schools demonstrated the different facets of learning that are significant to disaster management.

Article 16, Part 3 of the UDHR states: "The family is the natural and fundamental group unit of society and is entitled to protection by society and the State" (1948). Two participants spoke about family tracing programmes, which help protect this right by reuniting families that have been separated. One participant discussed them within the context of Aceh, explaining that the family tracing service connected family members that were in different shelters or camps. This activity did have some link to the dead, the participant construed, "So we help them, and we also accept the information if they found their family dead, or things like that. So it's both, alive and the dead management.” The other participant spoke about the International Committee of the Red Cross’s (ICRC) worldwide family tracing service. The participant elucidated that the tracing programme was not limited to after disasters, but that many disaster survivors used the programme. They did not mention providing families with information about deceased members.

4.4. Rights of the dead

Two participants explicitly framed rights as belonging to the dead. The first participant aligned human rights with the dead and their religion. Their example of human rights was that when a body is found, it should be brought to the hospital and treated in accordance with its religion. The participant did not expound on how the religion of the body should be determined, but it can be inferred that such a step would require identification. The UDHR asserts the right to practice religion in Article 18: “Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief, and freedom, either alone or in community with others and in public or private, to manifest his religion or belief in teaching, practice, worship, and observance” (1948). Other participants discussed how religion can affect dead body management, but this was the only participant to explicitly define religion as a human right held by the dead.

Another participant came close to this idea, explaining without an interpreter, “Because we are Muslim, we have the taking care, or treat the dead body appropriately. Meaning that we cannot, like - we uplift the humanity. Because they are human. So we have to treat them well. Even if they are dead.” The participant connected religious thinking with proper treatment of bodies, and highlighted the humanity of the deceased. This idea is divergent with de Baets’s assertion that the dead are former human beings, and with the type of humanity possessed by the dead. De Baets claims posthumous dignity is derived from a respect of “the past humanity of the dead” (2004, 136). The participant appeared to disagree with de Baets on this point. Wording such as “uplifting the humanity” suggested a drawing out of an existing, rather than acknowledgment of a former, humanity.

This same participant made two explicit references to human rights being held by the dead. The first comment reiterated the idea in the previous paragraph: “That every live people, people that live, you have to treat the dead body. I think it’s part of the basic right for the dead as well to be treated. Because they are human ... They have souls.” The participant again referenced the humanity of the dead as an ongoing phenomenon. They also approached human rights and burial from the side of the deceased, not their family as de Baets did. The participant said, “If you have the right to live you have the right to be treated well when you die. At least you have a choice to be buried or to be burned or to be sent to the ocean, or to - but I think that’s also the basic, the basic right.” Here, the vague “right to be treated well” was refined to include the right to be laid to rest. This also linked back to religion by bestowing the dead the right to choose exactly how they are buried, a practice often - but not always - linked to religious beliefs.

4.5. Responsibilities to the dead

Only one participant described feeling a kind of responsibility towards the dead. The participant explained the different types of responsibilities that are important in Islam: personal responsibility, that involves the actions an individual must do, and community responsibility. They defined the latter as individuals taking on responsibilities because someone in the community needed to do so: “So if there is no one, then you have to have the responsibility.”

These types of responsibility were further situated into the context of dead bodies. “Because we [Muslims] perceive that ... the responsibility for the live people is first to the dead body. First is washing. If you cannot wash, you need to pray. And then if you cannot pray then you need to attend the funeral.” These are concrete responsibilities that the living have towards the dead, with several levels of involvement. The participant clarified how these responsibilities are in place during normal life, but come into play stronger after a disaster. “So that’s for not even the disaster. So especially for the disaster when people in need, so they are still in traumatic situation so the live, the one who are survivor or not become victim have to help them.” Interestingly, even though the above responsibilities were named as responsibilities to the dead, here the participant acknowledged that following through on these responsibilities has an effect on the living.

4.6. Responsibilities to the living

Human rights of the dead, human rights of the living, and responsibilities to the dead appeared in the literature search and were incorporated into the conceptual framework of this study. However, two participants brought up a fourth area of consideration that did not feature in the preliminary research: responsibilities to the surviving family members following a death. Both participants discussed identification of a body as within the realm of responsibilities to the living.

De Baets listed identification as a responsibility to the dead, not a right of nor a responsibility toward the living. Article 5 of his “Declaration of the Responsibilities of Present Generations toward Past Generations” is titled “Identity”: “The responsibility to identify their body; record their death; and preserve their name, dates of birth and death, and nationality” (2004, 143). The Indonesian Ministry of Health’s “Technical Guidelines for Health Crisis Responses on Disaster” also holds identification to be extremely important (2007, 5).

De Baets put identification into the context of the deceased. He only indirectly associated identification with the living, by stating that the living have a right to mourn and to perform funeral rites. Typically, these activities require a body and therefore identification can be interpreted in de Baets's "Declaration" as an indirect responsibility to or right of the living.

The two participants appeared to agree with de Baets about the importance of identification. Their views about whom the responsibility is towards differed. One participant explained through an interpreter that they believed identification was critical "for morality reasons. Because no matter how bad, how badly damaged the body is, the family deserves to know whether or not their loved ones are still alive or not. More like personal belief." The participant did not place value on identification for the sake of the body but for the sake of their family. They also were deliberate in pointing out that even in cases of extreme difficulty when a body is in bad shape, efforts should be made to identify the deceased. The second participant said that even though their organisation was not involved in identification, they still felt it was important because they felt a "moral responsibility for the family." Both participants incorporated morality into their views on identification, and focused on the family of the deceased.

4.7. Conclusion

This chapter brought together ideas presented in the conceptual framework and explored human rights of the dead, human rights of the living, and responsibilities towards the dead as they arose in interviews. A fourth category that was not a part of the framework, responsibilities towards the living, came up in several interviews. The original hypothesis stated the human rights of the living and responsibilities toward the dead hold the most weight for disaster response workers when dealing with dead bodies, and human rights of the dead were too contested and insecure of an idea to make an impact.

While only one participant explicitly stated that they were familiar with human rights, most participants referenced to rights. Some of these remarks were explicit, but many were implicit. The right to mourn came up as the central right of the living related to the dead. Participants discussed burial customs and religious traditions that exist in normal, non-disaster life. Focus drew in closer on disasters when participants spoke about the value of involving the deceased's family. Participants seemed to agree that the family should have the ultimate say in what happens to a body. Participants also mentioned human rights of the living that are unrelated to the dead. They discussed these rights, such as the right to food and shelter, more in the context of the aftermath of a disaster than they typically had with rights of the living related to the dead. This may be because death is a constant in any community, and rituals and traditions surrounding deaths do not change when there is a disaster. Access to food and shelter can change drastically, creating a larger chasm between normal life and life after a disaster.

Two participants explicitly referred to the rights of the dead. Both made references to religion, with one explaining Islam's significance of the importance of proper treatment of the dead in all situations. One participant touched on the right of the dead to maintain their religion in the context of disasters.

Responsibilities to the dead were not a common topic. Only one participant discussed them, and they were mentioned within the context of Islam. These responsibilities - to help wash the body, to pray for the body, or to attend the funeral - are constant and not specific to times of crisis, although the participant did specify that they can be especially poignant after a disaster.

The conceptual framework did not include responsibilities to the living, but they were introduced by two participants. Both viewed identification of dead bodies as morally significant, and felt there was a responsibility to identify for the sake of the surviving family. As discussed in Chapter 2, framing something as a "responsibility" rather than a "right" suggests there are strong reasons to do it, but with softer language than a claimable or legal "right" implies. Viewing identification as a responsibility to the family, rather than a responsibility to the dead as de Baets did, acknowledges that identification is not always possible while making the affected party more visible and able to pursue that identification is at least attempted.

Considering what participants had to say about the various rights and responsibilities of dead bodies and disaster management, the hypothesis presented in Chapter 2 is not wholly incorrect but in need of revision. Human rights of the dead should be recognised as potentially being a part of a community's cultural or religious beliefs, and therefore not automatically discounted. The human rights of the living that do not relate to the dead were important to participants. This may because of their priorities in disaster response, which will be discussed in the Chapter 6. Responsibilities to the living and dead both arose in interviews. Traditions relating to death continue during a disaster, and may involve ideas about the rights of and/or responsibilities to the dead. The right of survivors to mourn, which may require identification efforts, is as important, if not more, than in non-disaster times.

5. Humanitarian Standards

5.1. Introduction

NGOs and governments use humanitarian standards in the creation of programmes and evaluation of needs. These standards can be international, such as the Sphere standards, or national. One example of national standards is Indonesia's "Technical Guidelines for Health Crisis Responses on Disaster," produced by the Ministry of Health. The information inside covers a range of disaster response activities, from implementation of health services to the identification of dead bodies. The guidelines are available in English and are therefore accessible to foreign workers.

The Sphere standards, which are cited in the Indonesian "Technical Guidelines", were first published in 1998. There are five main sections of standards in the current edition, published in 2011: core standards (1); water supply, sanitation, and hygiene promotion (2); food security and nutrition (3); shelter, settlement, and non-food items (4); and health action (5). The current edition has been translated in 22 languages, including Bahasa Indonesian. The Sphere standards are comprehensive but broad. Other groups have released more targeted standards that go into detail on one area. One example of this is the PAHO/WHO 2004 handbook "Management of Dead Bodies in Disaster Situations." For more information on these handbooks and standards, see Chapter 2.

This chapter further explores the relationship humanitarian standards have with disaster response, with a focus on dead bodies, and looks at the subquestion: how do international and national standards affect the management of dead bodies? The core information examined in this chapter is data gathered from participant interviews. Relevant academic literature and examples drawn from standards are cited as well.

5.2. Humanitarian standards in the data

Of the six participants involved in the study, five discussed the impact standards have on their work. Participants described with which standards they were familiar, how standards can make disaster response easier, and the challenges that prevent standards from being met. Some participants also discussed the training they underwent before and during their current positions in humanitarian relief.

Two participants expressed a familiarity with the Sphere standards. One explained "We were already abide by several standards, including Sphere standards and in every emergency settings, we always try to follow the standards." The same participant also mentioned that their organisation worked at adapting some of the principles in Sphere into their standard operational procedures (SOPs). They elucidated, "So before, for example, the health team or the emergency response team were deployed to certain area, they will be given briefing and they will also be given a set of tools on how to quickly identify the context in the area." This description of SOPs and standards as tools is useful because it depicts them as helpful mechanisms in disaster response. This participant spoke of a variety of international instruments in addition to the Sphere standards, including the International Code of Conduct and Humanitarian Accountability Principles. They explained that their organisation often engaged in partnerships with foreign NGOs and donors, and that these groups sometimes had their own sets of standards. This high level of international communication and coordination may account for the participant's wide knowledge of international standards.

The other participant that was familiar with Sphere described their uses and limitations, "We use [the Sphere standards] and in any response we always considering the international standard. But some international standard may have different, especially in term of management of the dead bodies, because Muslim are different with some other culture." This final point suggested why adapting standards can be a useful exercise for NGOs. Sphere does explicitly reference that different cultures have different practices, and keeps suggestions for disposing of dead bodies intentionally ambiguous. Under the health systems section, the Sphere handbook reads, "Dispose of dead bodies in a manner that is dignified, culturally appropriate and based on good public health practice" (2011, 297).

One participant said they were familiar with international standards, but did not specifically state which ones. The same participant also mentioned national standards. They recognised the utility of standards, but also that concerns that are not codified arise during response. Through an interpreter, they explained "[We] try, very, trying to do [our] job based on the book. But also there are other things in the field that are, that has to be done to save lives." A fourth participant discussed national standards, and offered the "Technical Guidelines" to the researcher as an example. They gave a manifestation of a national government standard that influenced dead body management. "Area graves in disaster prone areas should not be made [near] the home." This was presented as part of the reasoning behind the community-backed common grave on Mount Merapi discussed in the previous chapter.

A fifth participant cited a list of standards used by their organisation. There were fourteen different categories, including first aid, restoring families, logistics and distribution, and water and sanitation. They further placed these standards into a timeline consisting of three days for immediate emergency response, three days for medical attention and logistics, and then early recovery. After two weeks, the late recovery phase begins.

The only participant that did not have a familiarity with humanitarian standards was the sole participant who did not work in humanitarian response full-time, but had experience as a volunteer in disaster relief. This may be because short-term, ad hoc volunteers do not always have adequate time to be trained on specifics like standards.

5.3. Standards and training

Humanitarian workers often gain familiarity with humanitarian standards through training. At first glance, this seems to be the case with the Indonesian study participants. The only participant that was not familiar with standards was the one participant who did not have much humanitarian training because they were a volunteer. Of course, knowledge of standards can come from practical, on-the-job, and in-the-field scenarios, but training can be an important component in becoming familiar with standards. The Sphere standards in particular are heavily involved in training, as evidenced by popular training sessions worldwide and the creation of the Training of Trainers course (The Sphere Project 2005).

One participant discussed the impact of training received from outside their job on their knowledge of dead body management. The participant, a former nurse, underwent three months of Search and Rescue (SAR) training. This provided them with expertise on how to search for dead bodies after disaster. The training was aligned with the government SAR team, and the participant referenced government standards related to dead body management.

Another participant also completed the voluntary SAR training, several years before they began working in disaster relief full-time. This participant said that the training focused mainly on the living, and stated that the training taught them to "save people and keep them alive during the disaster. And so the training was not - was mostly about giving first aid." This participant appeared to have a rather "realist" view of standards, conceding that the scale of a disaster can overwhelm standards when there are many bodies. Here a gap between the training, the standards, and the reality of response appeared. The participant had a large amount of experience encountering dead bodies in post-disaster work, but as shown in the previous quote, did not have much training about what do to in these situations. Another participant who also had encountered many dead bodies in their work echoed these sentiments. They described how practical experience in the field made the biggest impact on their ability to work with dead bodies. Through an interpreter, they said, "So at first [we] were always getting contact with dead bodies from train accidents and car accidents. So after a while [we] got used to it, and in Aceh [we] didn't make any adjustment or anything."

A fourth participant emphasised the importance of non-formal training. They explained, "I didn't have a formal training before. I got the community development because I involved in the organisation for such long time." They described helping with the burial of bodies from a young age, and how this made them familiar with the customs and traditions of many Muslim communities. Another participant described a similar type of community-derived, non-formal training. In regards to disaster preparedness, they said, "Knowing that I already have those experiences, I personally ... already applied some of the preparedness principles even in my daily life." These two participants introduced an important point. Humanitarian workers in disaster-prone areas, especially local staff, often have lived through disasters and crises themselves. They are familiar with local customs and can help identify how standards might need to be adapted, as well as the pragmatism of such adaptations.

This same participant from the preceding quote complemented their ideas about gaining knowledge informally with a recognition of formal training. They revealed, "So, we in [organisation] were conducted training. Either for the community directly or for the staffs regarding the humanitarian assistance. I got a lot of knowledge from the process." Another participant told the researcher they believed more training was needed to improve dead body management in Yogyakarta.

Participants had a range of opinions about trainings, with some deeming it useful and others preferring knowledge gained through practice. Some participants even expressed both viewpoints. While few participants made an explicit direct link between their knowledge of standards and their training, many cited an assortment training types with different utilities and purposes.

5.4. Challenges in meeting standards

Several participants compared how the scale of a disaster can affect response. In the context of standards, one participant explained that disasters can be too large for standards to be followed. Through an interpreter, they illustrated, "[We] have some international or national standards on paper. But when it comes to mass natural disaster management it doesn't apply anymore. Because it's so big. People just collect the bodies." Another participant shared this opinion, and described how different types of disasters influence response and cadaver management in particular. They compared Aceh with Yogyakarta, "Like in Aceh it's very extreme, with 50,000 found. And then Yogya is 6,000 ... So it's very different when you treat the massive, or the big calamity, or the smaller size one." The same participant further refined how scale can impact the treatment of dead bodies in a Muslim society, "And in Muslim, if there are lot - like in tsunami - we can have like not one-to-one ... If too many people died or people died from accident from disaster, it's allowed to not wash them." This point showed that like standards, traditions must sometimes change in extreme situations. A third participant discussed how the tsunami in Aceh affected identification goals, "It was hard to identify because it was a tsunami, and people got washed up to different places. And so they just picked them up and if they couldn't identify them, they put it, they bury them in mass." Identification is a central point to the Indonesian "Technical Guidelines" set of standards.

Another participant spoke of how standards sometimes focus on material resources, but how providing knowledge is also important. Their example was an island in Indonesia that was suffering from an inadequate water supply. "We think that based on the Sphere standard for example, each person should be provided how many litres in a day, and we found it is sometimes difficult to stick to the standards ... but we try to keep an alternatives on how to, for example, just to give them knowledge. We are not only providing the material but also providing knowledge on how to, for example, desalinate the seawater." While this specific example is not directly related to dead body management, the viewpoint that standards may not fully cover different areas of valuable support can be transferred. Other than for technological procedures like DNA testing and processes that require a lot of manpower, like searching for and recovering bodies, communities do not generally need an uncharacteristic amount of material support to continue their traditional mourning and disposal rituals. However, technical standards may neglect less accessible aspects of care useful to those who have lost a family member. The 2006 ActionAid International report "Tsunami Response: A Human Rights Assessment" found specific examples of grieving family members being denied compensation. One survivor they interviewed from India said she was unable to claim the compensation offered by the government because she could not obtain a death certificate without a body. While the report does not cite specific examples from Indonesia, vulnerability should not be underestimated. The report says of all governments and states involved, "Orphaned girls, single women, women heading their households and women who are elderly, disabled or part of minority and vulnerable communities remain the most neglected" (43). Following the idea explained by the participant above, providing care for these people adversely affected by the death of a family member can be vital and overlooked, even if technical and/or material standards are met.

5.5. Making disaster response easier

"The standards make the job easier," explained one participant. They went on to describe how standards help guide a response effort because they inform humanitarian actors to "know what to do."

Other participants also brought up things that make disaster response easier or more difficult. Some dealt with human resources. For example, one participant said that people who worked in immediate emergency response should have at least a basic measure of training in first aid. Another participant clarified that there can be too many people at a disaster site trying to help with response, "So some people in Merapi - there were so many people that wanted to help. But in the end, they just made [organisation's] job harder because, you know, too many people helping them." The Sphere standards stipulate some mechanisms to ensure volunteers are in fact needed and qualified. One "key indicator" in Core Standard 6: Aid worker performance reads, "Carry out appraisals of staff and volunteers and provide feedback on performance in relation to work objectives, knowledge, skills, behaviour and attitudes" (2011, 72). This postulates that volunteers, like staff, should have specified work objectives. Although this can be difficult to orchestrate in the chaos after a disaster, it is meaningful for avoiding the kind of cluttered response that the quoted participant experienced.

The PAHO/WHO "Management of Dead Bodies in Disaster Situations" specifies the dangers that personnel in a disaster with mass casualties may face. The handbook reminds humanitarian actors that "Not all professionals and volunteers are suitable for [tasks involving handling human remains]; their suitability depends on a variety of factors such as age, personality, previous experience, beliefs about death, etc. They should be well informed about the tasks they will be asked to do" (2004, 123). The one participant that only had experience in disaster response as a volunteer agreed that not everybody should be able to handle bodies. They had encountered a body after a landslide, while checking on a faulty alarm warning system. The participant believed the responsibility to handle the body lay with specific parties, "So to collect them it's mostly government and volunteers, but to identify them they need a forensic team." It should be noted that international standards like the PAHO/WHO handbook do not suggest that volunteers should be forbidden from handling bodies, but that they should clearly understand what they can expect.

Bahasa Indonesian is the official language of Indonesia, but there are hundreds of other languages spoken throughout the archipelago. In Yogyakarta, many people speak Javanese. One participant that was a Yogya native said "I was working in Aceh, I need the local people to help me to communicate. So it's - language is still challenging for the Indonesians, relief and response." Language is particularly weighty when aiding survivors in navigating their rights and entitlements after a disaster. For example, information about compensation for widows should be disseminated not only in Bahasa Indonesian, but in the language local to the affected community. This is stipulated in Protection Principle 4 of the Sphere standards: "The affected population should be informed by authorities and humanitarian agencies in a language and manner that can understand" (2011, 41).

Some challenges encountered in disaster response simply cannot be compressed and addressed in a standard. One participant preferred working in their hometown of Yogya. They, like the majority of participants, had worked in the response efforts in Aceh. The participant spoke of the differences between the two experiences, "Because Aceh is still in conflict after 30 years conflict, people like - the prejudice still high people do not trust. [In Yogya] there is no conflict and we still have a king. That too also make Yogyanese more harmonious." Of course, this quote had some biases - the speaker is a native of Yogyakarta and perhaps in possession of a natural degree of prejudice towards their locality. But it also raised two important points. The first is the challenges that accompany attempting to deliver disaster relief in an area already embroiled in conflict. This is essentially a crisis on top of a crisis. Dead body management can be exceptionally tricky in such a situation, as mass graves have been used in times of conflict to conceal mass killings (Rosenblatt 2010). Standards offer help and guidance, but they cannot be expected to present a neat answer to challenges such as these. In the case of armed conflict, international humanitarian law may also apply and give further legal instruction about the treatment of dead bodies. While it is not within the scope of this thesis to explore dead body management in armed conflict, it is important to recognise that natural disasters may strike a conflict area, compelling the ensuing relief efforts to consider a multitude of factors.

The second point illustrated in the participant quote above is the value of local personnel and knowledge. The Sphere standards addresses this in a number of capacities, from supporting local health workers (Health systems standard 2, 2011, 301) to using local knowledge to conduct water and sanitation needs assessments (WASH standard 1, 2011, 89). The handbook also explains, "Self-help and community-led initiatives contribute to psychological and social well-being through restoring dignity and a degree of control to disaster-affected populations" (2011, 56). This is influential when dealing with dead bodies, as local personnel are the most familiar with traditional procedures after a death and therefore the most capable of liaising with community initiatives. One participant summed this idea up, "I will say to you that most communities, community members, they are not well informed about the, for example, specifically the treatment of dead bodies. They don't have a set of standard. They just follow the cultural or the religious practice." By recognising that not everything will be codified, both international and local humanitarian workers can strive to understand and harness the knowledge of affected communities.

5.6. Conclusion

While nearly all participants were familiar with international and/or national humanitarian standards, half discussed how these standards can influence dead body management. One elucidated how standards may not be in line with Islam, one cited a specific government standard that affects where graves can be dug in disaster-prone areas, and one spoke of how large scale disasters with many casualties may be too overwhelming for standards to have any large impact. One explanation for this may be that dead body management is viewed as "specialised" knowledge, and therefore not extensively included in sources like the Sphere standards. All three participants referenced above had extensive experience working with dead bodies. Specific standards do exist, such as the PAHO/WHO handbook, and some standards, such as the Indonesian Ministry of Health's "Technical Guidelines", explore dead body management in depth. However, more general relief workers that do not work in a capacity that explicitly involves dead bodies may not seek out this additional information.

Participants also approached the various types of training they received before and during their careers in humanitarian relief. Two participants voluntarily underwent SAR training, and described the training as almost exclusively focused on first aid and caring for the living. While this aspect of SAR certainly deserves recognition, the potential challenges that accompany encountering dead bodies in the field should not be neglected. Practical experience is also useful and training should not be seen as a guaranteed solution to the psychological and emotional challenges SAR may present. The PAHO/WHO handbook states, "The concept of universal vulnerability holds that there is no type of training or prior preparation for a person working with seriously injured and dead victims that can completely eliminate the possibility that he or she will be affected by post-traumatic stress of other psychological disorders" (2004, 124). This does not mean that training should be abandoned, but recognises that real-life experiences are unpredictable.

Valuing communities came up in the discussion of training and of ways disaster response can be made easier. Two participants explained the importance of non-formal training in their understanding of disaster response, with one citing a nearly lifelong involvement in their community's burial traditions. Working in other parts of Indonesia presented more challenges to some participants than working in their hometown. They described these challenges as linguistic, cultural, and political. Notably in dead body management, local and community-driven activities are important for humanitarian actors because they follow the traditions, needs, and desires of the affected communities. Similarly, knowledge gained by participants through their experiences as a part of a community or even from experiencing a disaster firsthand should not be underestimated. Such experiences may not neatly match up to humanitarian standards, but can provide insight into an affected community. Respecting and welcoming these ideas ensures that dead bodies are managed in an approach that is the least detrimental to the well-being of community members.

Scale of disaster posed as a major challenge in meeting standards. Participants that had worked in both Aceh after the 2004 tsunami and in Yogyakarta, either after the 2006 eruption of Mount Merapi or the 2010 earthquake, said the sheer scale of the disaster in Aceh rendered meeting standards almost impossible. Bodies piled up, many deteriorated from spending time in salt water, and became unidentifiable. Mass graves were dug to hold the thousands of bodies and get them off the sidewalks. In the two disasters around Yogyakarta, the casualties were far fewer, and communities handled the funeral procedures for the members they lost. Attempting to reach baseline standards in combination with local traditions and wisdom may help mitigate some of the effects large scale death can bring, but it is also important to recognise that no standard can completely alleviate the emotional pain and trauma of death.

6. Priorities and Roles of Humanitarian Actors

6.1. Introduction

Participants reviewed their own priorities in disaster response. As not all worked in a position that explicitly included handling dead bodies, these priorities show the different attitudes towards the precedence of managing the dead. In some cases, what participants did not say was as notable as what they did say. This is deductive reasoning at work - just as if a person says their favourite colour is red, it can be deduced that they do not enjoy blue as much as they enjoy red. Naming certain priorities but not others showed an attached significance to the mentioned priorities and a lack of similar connotation to other activities. These priorities are reviewed in the first part of this chapter, offering insight into the subquestion: what influence, if any, do dead bodies have on priorities after a disaster?

The final subquestion is: to what extent are the roles of humanitarian actors defined in dead body management? No two study participants worked at the same organisation, but they all made references to other stakeholders working in disaster relief in Yogyakarta. The second part of this chapter explores how various participants perceived the roles of the government, their own organisation, and other humanitarian actors.

6.2. Priorities

Disaster response is almost always undertaken with limited resources, be they material, monetary, and/or human. Time is another pertinent factor. Deciding the immediate focus after a disaster is no doubt a difficult task. Three sets of standards reviewed in Chapter 2 gave three different viewpoints. The PAHO/WHO handbook claims the needs of the living come first and lists three categories of priorities: “First, the rescue and treatment of survivors; second, the repair and maintenance of basic services; and, finally, the recovery and management of bodies” (2004, xi). The Sphere standards acknowledge that bodies may be a priority (2011, 118), while the Indonesian “Technical

Guidelines" name identifying a dead as top priority along with providing medical care for the living (2007, 5).

6.2.1. General post-disaster priorities

Participants named a variety of priorities after disaster response. One definitively placed the needs of the living before the management of the dead. "The first thing is evacuation of the refugees before evacuation of the victims." They further clarified that amongst the survivors requiring evacuation, vulnerable groups like pregnant women and children were the first priority. Three participants spoke of the value of implementing triage. One explained through an interpreter, "So [we] prioritise the ones that are in critical conditions, the ones that are still possible to save. So if there are dead bodies, they prioritise on the tags that are red, green, yellow, and black." Like the previously quoted participant, this study participant clarified that the living take priority over the dead, and that survivors in more urgent need of care take top priority. A third participant had similar ideas about prioritising the living. When asked their priorities in the immediate aftermath of a disaster, the participant responded, "Looking for survivors. Ones that are still alive."

Of the six participants, these three are the only ones who specifically discussed or strongly alluded to the needs of the living taking priority over the care of the dead. The remaining three spoke only about immediate priorities relating to survivors, without any mention or insinuation of the dead. Several participants spoke of the urgency of ensuring survivors had basic needs, like food and shelter. These basic needs are also discussed in Chapter 4. A number of participants named healthcare as a top priority, while others emphasised the immediate need to take care of the evacuation of survivors. One participant provided a different perspective through an interpreter. "So because [my] field is mapping, [I feel] the most important thing is mapping the track of the movement. So the data has to be updated because the government relies on that to give next regulations." In addition to recognising their own occupational bias, this participant gave a priority that is concerned with the potential future of a crisis rather than on alleviating the effects already brought on by a disaster.

Considering the data gathered from participants, the PAHO/WHO handbook's interpretation of cadaver management's place in priorities is the most accurate to reality. While half of participants did not mention the dead in their deliberation of immediate priorities after a disaster, those that did discuss the dead clarified that survivors came first. They also explained that vulnerable survivors take first priority, with some participants specifically framing this idea as triage. This is somewhat in contrast to the Indonesian Ministry of Health "Technical Guidelines," which lists identification of bodies as a top priority. While participants did discuss identification, none listed it as a general post-disaster priority.

6.2.2. Priorities of dead body management

Within dead body management, participants presented priorities. Many cited collection of bodies as the first necessary action. One participant with experience handling the dead described the process through an interpreter, "If it's in a mass disaster, [we] just collect [the dead bodies] and then bring them to a post where people put the dead bodies in." Next, participants named the need for identification of the collected bodies. Only one participant did not discuss identification in their interview. The same participant previously quoted continued on to explain, "They still have identification, like where they find it and what time. But the identification part is mostly done by PMI." This quote presented two levels of identification: an initial labeling of the circumstances of how the body was found, and then a further identification process by the professionals at the PMI. By differentiating between these two steps, the participant recognised the impact that body collectors can have on the identification process.

The Indonesian Ministry of Health's "Technical Guidelines" describes identification of dead bodies as a priority. A chapter on identification clearly outlines specific techniques and procedures:

"Evacuate and transport cadavers and goods"

a. Put cadavers and parts of cadaver into plastic bags and put labels according to the cadaver labels.

b. Enter goods that are detached from the body of the cadavers with labels according to the name of cadavers.

c. Lift the cadavers to the cadaver examination and storage location and make a collective handing over document (2007, 135).

One participant said that the success of dead body identification efforts depended on the nature of the disaster. "[Some bodies] are severely damaged because of the ocean, because of the salty water. The tsunamis are very different with the earthquake. The earthquake they are easier to identify because you are - the appearance of the body are very different." Another participant agreed, comparing Aceh to Merapi through an interpreter, "In Aceh, because there are so many people, dead victims, [I] had to collect the bodies and put it on the sidewalk. So the people that are in charge to take them can take it easily. But in Merapi ... [I] encountered some dead bodies. People already know who that is. So [I] can instantly identify them with the help of people."

This last example depicts a kind of non-technological identification. One could argue that using technology like DNA testing would help the number of identifications that are possible when bodies are damaged. This is not realistic because of the resources needed to perform such an operation. The "Technical Guidelines" explains, "[DNA Profiling] has plenty of superiority but requires sophisticated and expensive knowledge and facilities. In conducting identification easy and uncomplicated methods should be used" (2007, 141). As referenced in Chapter 2, Sumathipala, et al. (2006) mentioned that there was a large discrepancy between the identification of Asian casualties from the 2004 Indian Ocean tsunami and tourists that came from more developed countries. The latter were fewer in number and their countries had better access to the resources required for DNA identification.

One participant stated that even in cases where full identification was difficult, it was still necessary to establish personal information of bodies. “At least by giving the identification like the height, the weight, the estimate age, it will help to connect people who lost and they cannot find the family.” They framed this as a benefit and comfort for the living, blurring the lines between priorities related to the dead and those related to the living. The PAHO/WHO handbook echoed this, “One must always keep in mind that the way corpses are managed has a significant impact on the wellbeing of surviving family members” (2004, 15).

Two participants noted that the priorities within dead body management differ between disaster response workers and the affected community. Community members who experience a death in their family may be able to bypass the collection and identification process if the body remains inside or near the home, or at a known location. Then the priorities would typically leap straight into the burial preparations. One of these participants explained, “Most communities, they are not well informed about the, for example - specifically the treatment of dead bodies. They don’t have a set of standard. They just follow the cultural or the religious practice.”

Two participants referred to public health as a reason to prioritise burials. One did not specifically refer to mass graves, but claimed that burying bodies was beneficial to stop the chance of spreading disease. The second participant declared that “mass graves are better than - better because it could impact the living beings’ health.” These two statements raised red flags. As presented in Chapter 2, there is no evidence that dead bodies present a risk of epidemics after a disaster (Morgan 2004), although the presence of dead bodies can indeed have an impact on the health and well-being of survivors (Parkes 1998 and PAHO/WHO 2004, 15). However, as de Ville de Goyet wrote, disease should not be used as a justification for the “unceremonious disposal of corpses” (2000). Another participant clarified that dead bodies can have a psychological effect on survivors, and that this was included in their organisation’s community first aid training. The presence of the first two statements stresses the need for education about dead bodies, while the third participant exemplified integration of health and dead body management without perpetuating myths.

6.3. Roles

Nearly all participants shared perceptions of the duties of the government. These viewpoints were typically expressed either by naming a specific government organ, or by speaking generally about the role of the “government”. In an example of the former, a participant compared the roles of the government SAR team with the non-governmental PMI. “So if there’s lost people, they call SAR. If the people are dead, they call PMI.” The participant expounded that the PMI had identification capacities and were therefore called to handle bodies by the government. Another participant spoke about the role of the BPBD, a government body. They said, "[BPBD] will be the front line of every emergency in Indonesia". Later in the same interview, the participant claimed it was the responsibility of the BPBD to announce the official number of casualties after a disaster.

Other participants conversed more generally, stating that the government was responsible for providing aid, coordinating with communities, and arranging for identification of bodies - although one government participant clarified that they collaborated in identification with the PMI. Some participants spoke about how their group worked with the government. For example, one participant's organisation was involved in mapping. They explained that "the data has to be updated because the government relies on that to give next regulations". Another participant elucidated how their organisation worked with the government in dead body management, "So we always have to work with the local to get the information or to do the data collection. How many people died. We also confirm with the government because we are actually supporting the government. We are non-government organisation." The participant emphasised their organisation's position as an NGO and their independence, while presenting an example of sharing information with the government. The area of data dispensed in this example, number of casualties after a disaster, benefits from having multiple sources close to the ground.

Participants often shared the activities their organisations were involved in, and some showed a high degree of self-reflection. The two that did worked at NGOs in Yogyakarta. One provided some insight into how their organisation gauged their involvement in response activities. "We're also reflecting in our own institution. Is there any person who is ready to be deployed immediately, and what kind of capacities exist in our institution. If we don't have, for example, medical doctor - can we get from the hospitals easily? ... if we release emergency response team without considering those - our own capacity - it's already feared that we will be overwhelmed while we will be in the site." This self-contemplation and evaluation of capacity is advantageous in dead body management. Throwing resources, especially human resources, into a disaster with mass casualties without knowing if they are equipped to handle it can result in damage for the both the affected community and the well-being of those sent into the field (PAHO/WHO 2004, 28).

A second participant communicated the limits of humanitarians. When asked what steps could be taken to make Aceh, a region in conflict, more manageable for disaster relief work, the participant responded, "It's very difficult because it's not the responsibility of the humanitarian actor." This answer demonstrated realistic self-awareness and reflection. By focusing on their capabilities, humanitarian actors can use their resources to best meet the needs of communities rather than squandering them on an unattainable goal outside of their mandate.

This participant considered the role of NGOs in dead body management, "The people, the NGO, the humanitarian actors, is also work for search and rescue.

So if we found the dead body we are not leave it and wait for the government ... So we should be proactive to take the role for taking care of the dead bodies so it will meet the culturally practices in the community ... we found the dead body, we know their family, then we will contact the family and then help them to be buried properly." This scenario seems more suitable to one of the disasters in Yogyakarta than to a large scale disaster with mass casualties like in Aceh. The religious beliefs of communities can also come into play here. The participant went on to explain how Muslim traditions of burying a body quickly can affect the practical aspects of disaster management. "Although the responsible for search and rescue is the government but usually, in reality, in a practical stand, usually the people who are affected by disaster, they usually work for themselves. Because they have to bury immediately." This sense of urgency also frames their aforementioned ideas about NGOs being proactive in dead body management.

Finally, the participant spoke about coordination with the affected communities in simple terms: "As a humanitarian actor, we help them find the dead body and give it to the family." Later in the interview they expounded, "We always help to the locals because [organisation] is grassroots organisation." The participant reiterated their organisation's close coordination with affected communities, but had different sentiments towards international groups. "So many international organisations involved that will also become making more complex in responding. Because every organisation have different skills, different mechanism, and then they might not understand how is Indonesia. Especially for foreign offices, organisations." The participant acknowledged the variety of competences different groups hold, but also expressed a frustration in navigating an organisation-saturated relief landscape. These two quotes together inform that the participant valued their organisation's role in working closely with the community and was realistic about the challenges of international coordination. Two other participants touched on international coordination, but both kept their discussions neutral without strong indications of how they felt about these collaborations.

6.4. Conclusion

Standards such as the Sphere handbook and the Indonesian Ministry of Health's "Technical Guidelines" recognise that dead body management may be a priority in disaster response, while the PAHO/WHO handbook states that the needs of the living should always come first. When asked what they believe to be the top priorities in response, three participants did not mention dead bodies at all. The other three mentioned the dead only as a point of comparison with the living - that is, they stated that helping the living was a higher priority than dealing with the dead. Therefore, it seems fair to say that management of dead bodies is not a top priority for humanitarian actors in Yogyakarta. Within dead body management, participants stressed the importance of identification while also remarking on its challenges. A few participants recognised that these priorities lay within the realm of professional disaster relief, and that the affected community would handle the dead they find in the the way they deem appropriate. Such a differentiation is important - recognising that humanitarian workers may operate with different priorities than the affected community is vital in making sure the humanitarians complement the actions and needs of the community. A minority of participants alleged burials needed to be done quickly to protect the health of the living. The spread of disease by dead bodies is an inflated myth that should not be used to drive the disposal of cadavers.

The diversity of organisations represented by participants proved useful when it came to discussing the roles of various groups in disaster relief and dead body management. Almost all participants agreed that the government played a significant role in the management of the dead. All participants spoke about other organisations, displaying insight into the many actors that play a role in disaster relief in Yogyakarta. Even participants without experience handling bodies applied this insight specifically to activities related to dead bodies, such as collection of bodies, identification, and burial. A few participants that worked for NGOs engaged in self-reflection regarding the role of their own organisation. Such introspection resulted in assessments of capacity and consideration of the part of the organisation in relation to the affected community. This can have a positive effect on dead body management, as organisations recognise what they are able to do to help and what should best be delegated to other groups with different abilities.

7. Conclusion

7.1. Introduction to the conclusion

The first three chapters of this thesis introduced the study and its central questions, explored relevant literature and built a conceptual framework, and introduced the methodology of the study. The research findings were divided in three chapters. One explored the robustness of the conceptual framework against the data gathered from participants, while one examined the relationship between humanitarian standards and dead body management. The sixth chapter analysed the roles and priorities of humanitarian actors as perceived by various participants.

This final concluding chapter first presents a summary of the findings and offers their key points. The following section revisits the research questions that was first proposed in the introduction. A final part presents the lessons learned from the study, and provides recommendations for both humanitarian practitioners and academics.

7.2. Summary of findings

7.2.1. Limitations and constraints

Before delving into the findings, it is useful to remember the constraints and limitations of the study. For a more comprehensive survey of the methodology, its limits, and the justifications for its use, see Chapter 3.

The researched engaged with participants via semi-structured interviews. While they are flexible and appropriate for drawing out perceptions and attitudes, semi-structured interviews also have drawbacks. Ethical considerations included ensuring participants of the secure nature of the interviews. However, as the participant interacted directly with the researcher, they may have felt unable to present information totally anonymously. The flexible nature of the interviews meant that the data gathered from each session may not be completely uniform - that is, even if the researcher asked the same open question in every interview, the answers from participants could vary so widely that they would not be directly comparable. Nevertheless, this point is also crucial in allowing for inductive contributions.

Other limitations included language and time, since the study had a three-month constraint on duration. Participant recruitment too had limitations, often due to the researcher being a foreigner without extensive networks.

7.2.2. Findings from the data: rights and responsibilities

Exploring rights and responsibilities is a key point of this study. Chapter 4 presented the findings in this field, with four relevant sub-divisions: human rights of the living, human rights of the dead, responsibilities toward the dead, and responsibility toward the living.

The primary right of the living related to the dead that came up in interviews was the right to mourn. The importance of burials and other rituals surrounding death are enshrined as a right to living, because the mourners are the party able to claim the right. Participants often spoke about mourning in the context of the victim’s family, giving insight into the significance the family unit plays in cultures in and around Yogyakarta. Rights of the living that were not related to the dead, such as the right to food and shelter, also featured in a number of interviews. While their inclusion may not have a direct link to the management of dead bodies, even implicit mentions of rights reinforce the growing link between humanitarian action and human rights.

Chapter 2 hypothesised that rights of the dead do not hold much clout in the cadaver management. Nevertheless, they explicitly appeared in two interviews: one participant mentioned the right of the dead to be handled according to their religion, while another claimed that the dead deserved to be treated well because of their humanity.

Only one participant mentioned responsibilities towards the dead, an idea that featured strongly in the conceptual framework. However, two participants discussed feeling responsibilities towards surviving family members. Responsibilities to the living did not arise in the literature review or the conceptual framework, so this was one of the strongest examples of inductive influence.

7.2.3. Findings from the data: humanitarian standards

Chapter 5 looked at humanitarian standards on a few different levels. The majority of participants discussed standards, with some referring to international standards, including the Sphere standards, and some referencing national standards such as the Indonesian Ministry of Health's "Technical Guidelines for Health Crisis Responses on Disaster." In addition, mentions of organisation-specific standards appeared. Participants considered both uses and limitations of standards. Limitations included the need to adapt international standards to fit local culture and customs, and the overwhelming scale of some disasters that can render standards almost impossible to meet.

Talking about standards segued into talking about training. Participants commented on several types of training: official job training, training received outside of their organisation on a volunteer capacity, training received from previous experiences, and non-formal training gained from being a part of the community. Recognising this wide pool of possible resources is beneficial when looking at attitudes and perceptions. Different experiences and trainings combine to create the knowledge and outlook of the humanitarian actor. Some participants highlighted how trainings and standards can fall short in post-disaster reality. In these instances, non-formal training and previous experiences were suggested to be particularly useful.

Challenges to meeting standards were another point of discussion. Participants listed the scale of a disaster, the number of casualties, the type of disaster, material concerns, and the ability to pass on sustainable knowledge all as factors that could make standards difficult to reach. Study participants also spoke about aspects that rendered disaster response easier, such as using standards for guidance, making sure there is not an overabundance of volunteers and that volunteers are qualified for their roles, and working in one's hometown and native language.

7.2.4. Findings from the data: priorities and roles

The third and final chapter on findings presented information on priorities and roles found in the data. Priorities of participants varied from evacuation of vulnerable groups, ensuring active triage, searching for live survivors, mapping, delivering food and shelter to affected groups, and putting healthcare into place. When asked about their priorities, no participant included any aspect of dead body management. Three participants brought up the importance of caring for the living over the dead. Thus dead body management was concluded not be a top priority. Within dead body management, collection and especially identification came up as the top priorities for humanitarian workers. Some prioritised burial, even in mass graves, to protect the health of the living. Dead bodies do not pose a significant threat of disease and should not be disposed of quickly for this reason.

The diversity of the pool of participants was particularly noteworthy when exploring roles - of the six individuals interviewed, none came from the same organisation. Participants discussed the role of the government, both in vague terms and in reference to specific government bodies, and agreed the government was heavily implicated in dead body management. Some participants demonstrated a degree of self-reflection and self-awareness by considering the role of their own organisation, or of humanitarian actors in general.

7.3. Revisiting the research questions

Chapter 1 introduced the central research question: how do humanitarian aid workers deal with the management of dead bodies in disaster situations and what are their perceptions towards dealing with the dead? Before attempting to present an answer to the question, this section will first look at the various sub questions also featured in the first chapter.

7.3.1. Subquestions

The first of these sub questions: to what extent do ideas of rights and responsibilities influence the actions and attitudes of humanitarian actors in relation to dead bodies?, requires looking at the findings from Chapter 4. The original hypothesis was that human rights of the dead do not play a large role in the perceptions and actions of humanitarian workers during the aftermath of a disaster, and that it is instead human rights of the living and responsibilities to the dead that are most influential. However, the data gathered from participants indicates that human rights of the dead are important to at least some humanitarian actors. Additionally, responsibilities towards the living appeared more in the data than responsibilities towards the dead.

The responses gathered from participants show rights - of both the living and dead - as having a stronger influence than ideas about responsibilities. This is interesting because of the nature of the two terms - rights can be claimable and carry a legal connotation, while responsibilities do not bear that same weight. When attempting to answer this question, it is also important to recognise the impact of culture and religion. Several of the rights with which participants identified are rooted in practices that are influenced by religion, such as the right to mourn and the right to be treated according to one's religion even after death. Thus a response to this subquestion is: rights of both the living and the dead influence the actions and attitudes of participant humanitarian actors. The right to mourn is particularly important, with involvement of the victim's family being a paramount part of this. Identification of cadavers is a notable responsibility towards the living. Religion and culture play a role in shaping rights and responsibilities affiliated with death, as evidenced by mentions of the humanity of souls and Muslim funeral responsibilities in the aftermath of disasters.

Another subquestion is: how do international and national standards affect the management of dead bodies? This involves the findings from Chapter 5. While almost all participants had something to say about standards, neither national nor international standards had a substantial influence on dead body management. Awareness did not seem to be the reason, as nearly all participants identified as familiar with standards, albeit not all the same ones. Instead, several alternate explanations can be found within the data. First, large scale disasters with mass casualties create scenarios - such as lack of adequate resources and infrastructure, for example - that render meeting humanitarian standards nearly impossible. Second, not all disasters are created equal - it is easier to adhere to standards on body identification after an earthquake than after a tsunami, where bodies can be badly damaged from exposure to salt water. Third, as the community is present during and immediately after the disaster, they handle much of the dead body management in accordance with their own beliefs. Finally, cultural and religious beliefs can be seen as more pertinent than standards.

Outside of dead body management, participants described standards as a vital component of international collaborations, as a tool that can help make disaster response easier, and as useful for figuring out material needs. Therefore, an answer to the subquestion reads: humanitarian standards are influential and known to participants, but their scope and sway within dead body management is limited. Their influence appears to extend more to matters of the living.

Chapter 6 explored the subquestion: what influence, if any, do dead bodies have on priorities after a disaster? Priorities varied, but cadaver management was not considered a priority even for those who worked closely with bodies. The immediate needs of living survivors, such as shelter, food, and healthcare, were more established as important. Within dead body management, priorities like collection of bodies and identification were pinpointed, but these were not described as a general priority. The outcome of the subquestion is: dead bodies have little influence on post-disaster priorities. The focus of humanitarian actors is on the living and what they need to survive. The myth of dead bodies spreading disease to the living continues and is used to rationalise quick burials.

The final subquestion is: to what extent are the roles of humanitarian actors defined in dead body management? The data shows the government is a central part of dead body management. The roles of NGOs, while they may be defined and reflected upon by organisations themselves, are less known to other groups. An interpretation of the subquestion follows: governmental roles were the most defined and well-known amongst all actors, whether they had a government affiliation or not. Members of NGOs showed a degree of self-awareness and self-evaluation. However, knowledge and consideration toward NGOs other than ones own were limited to a few general statements. Ergo, NGO roles can be seen as more self-defined than government roles, about which there is a wider awareness.

7.3.2. Central research question

The sub questions help piece together a response to the central research question: how do humanitarian aid workers deal with the management of dead bodies in disaster situations and what are their perceptions towards dealing with the dead? The first part of the question can be interpreted as both operational and emotional. The humanitarian actors who took part in the study dealt with dead bodies in the practical sense by having an awareness of their organisations' own activities - or lack thereof - within dead body management, as well as being familiar with the role of the government. By having at least loosely defined roles and an awareness of the most relevant groups, humanitarian workers create a sort of interactive chain of dead body management knowledge. For example, an NGO without the capacity to handle cadavers knows to contact the government if they happen upon a body, and the government in turn is able to turn to the PMI for identification assistance. Complementary to this chain of knowledge is the community - humanitarians might not handle bodies if the community is there first. The community is the source for values that matter in cadaver management, and can thus dictate which roles are of a higher importance. In the case of Yogyakarta, timely burial is important to many people. The government SAR body, along with government and PMI identification capabilities, are tied in to the realisation of these traditions and were thus logically familiar to participants. Humanitarian standards play a very small role in dead body operations, and the Indonesian government has their own standards relating to identification.

Working with the dead can be an emotional and personal challenge. A recognition of the role of the family and the community helps guide workers in their decisions regarding the dead. In Yogyakarta, religious and cultural ideas about the continued humanity of the dead and their rights provide motivation for humanitarian workers to ensure bodies are treated properly. The right to mourn, whose manifestation is visible as it is enacted by the living, influences humanitarians to value identification of bodies and even view it as a responsibility to the living.

The second part of the research question deals with the perceptions of humanitarian actors. Study participants demonstrated thoughtfulness to the issue of dead body management, no matter how involved they or their organisations were in practice. They addressed a wide range of issues related to cadaver management including, indicating a general awareness and openness towards talking about bodies. Rights and religion affected viewpoints, as did concern for the well-being of communities. One of the largest influences was the living. In nearly all aspects of dead body management, a link to the living arose. Some areas of disaster management, like immediate priorities, were completely overridden with concern for the living rather than the dead. The need for appropriate and respectful handling of dead bodies was not forgotten, but providing for the living took precedence.

7.4. Lessons and recommendations

7.4.1. Lessons and recommendations for humanitarian actors

While some aspects of dead body management, such as scientific identification, involve specific knowledge, the reality is that disasters can produce mass casualties and humanitarians entering the field may have to deal with their effects. Ignoring dead body management or regarding it only as a matter that concerns specialists overlooks its broad-reaching facets - direct activities like collection, identification, and burial also have an effect on community roles, mental health, and maintenance of religious and cultural traditions. Humanitarian actors should therefore be familiar with at least the basic key contacts of dead body management - typically the government. Foreign humanitarians should understand how local customs affect the treatment of the dead, to avoid well-intentioned mistreatment of cadavers and better understand how to assist the living in their efforts to rebuild their lives and mourn their dead.

International publications like the PAHO/WHO "Management of Dead Bodies in Disaster Situations" and the ADPC "Public Health in Emergencies (PHE) Fact Sheet: Disposal of Dead Bodies in Emergencies" provide a wealth of information. No participant alluded to these standards, or any other cadaver management-specific standards, though several knew the Sphere handbook. General humanitarian and disaster management guidebooks should make an effort to include as least baseline information about dead bodies and include suggestions for further reading, as the Sphere guidelines do. The ADPC fact sheet is a great example of an accessible resource, as it is short in length but comprehensive in nature. This study showed the myth that bodies pose a large risk of spreading infectious diseases to the living is still in existence. Education is needed to eradicate this line of thinking in humanitarian action to ensure no bodies are mistreated under false pretenses.

7.4.2. Lessons and recommendations for academia

This study evidences that dead body management after disasters does not strictly fall under one area of study. Humanitarian studies (itself multi-disciplinary), public health, human rights, and disaster management are some examples of associated areas of study. However, there is a lack of interdisciplinary scholarship on the issue and a lack of specific consideration towards bodies in humanitarian disaster situations. More studies are needed to build a comprehensive view of humanitarian actors and their effects, attitudes, and relationships with cadaver management. Studies focusing on different geographical locations, disasters, and religious beliefs could complement each other to expand the field of knowledge.

Why is there such little scholarship on humanitarianism and death? Researching the treatment of the dead may appear to be a squandering of resources compared to studies that have obvious ramifications for the living, but as evidenced in this study, survivors are still heavily implicated in dead body management. Others may deem death a topic too weighty to conduct a balanced study on. Death can be a sensitive topic and, as in any study, ethics were of high concern here. Perhaps in part because of this latter point and perhaps in part to varying cultural norms surrounding the discussion of death, participants were open to the topic and patient with explaining their views to the foreign researcher. More scholarship can identify areas of dead body management that repeatedly fall short or excel in various disaster situations, then go on to evaluate why. This knowledge can then in turn influence humanitarian practitioners and their work in dealing with the dead.

The unfortunate reality of disasters is that people can and do die. By acknowledging this fact and striving to both honour them and better serve those left behind, humanitarian action can make further strides in its quest to alleviate human suffering.

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