

# End-of-life care, death and funerals of the Asante: An ethical and theological vision

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THESIS TITLE

**END-OF-LIFE CARE, DEATH AND FUNERALS OF THE ASANTE: AN ETHICAL  
AND THEOLOGICAL VISION**

SUBMITTED IN PARTIAL FULFILMENT FOR THE DEGREE OF  
**LICENTiate IN SACRED THEOLOGY**  
**(BIOETHICS)**

BY

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AT

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## General Introduction

Asante (Ashantis) in Ghana are endowed with various ceremonial practices and art forms which emphasize the identities of the indigenous Asante and promote their socio-cultural development. Unfortunately their funeral practices on which this study seeks to dwell bring many burdens to the people. Every death triggers a flow of money and the funeral business flourishes. An Anthropologist, Marleen de Witte observes that, “The elaborate funeral celebrations during which no trouble or expense is spared contrast sharply with the daily struggle for the primary necessities of life.”<sup>1</sup> In a “world of plenty” the number of Asante elders dying or suffering from hunger and related diseases is staggering.

Families often spend more money on funerals than they do on the care of the elderly. In other words, they take better care of the dead than the living. They seem more interested in the post-mortem than the pre-mortem care. As the Akan proverb goes: “the family loves the corpse.” Little or no attention is paid to people at the End-of-life (EoL). My thesis, therefore, has three parts; first, it discusses culture, belief systems and the funeral rites of the Asante by placing these practices in their factual, historical and cultural perspectives; second, it offers an ethical and theological critique of modern funeral practices. Third, recommendations regarding EoL care based on ethical and theological considerations will be considered. It seeks to re-examine these practices and realign them to promote the socio-cultural development of the Asante for improving care for the EoL.

Chapter 1 will examine the historical background of the Asante, their culture and the traditional Asante values. It will first of all discuss the people of Ghana and their religious life.

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<sup>1</sup> Marleen de Witte, *Long Live the Dead!: Changing Funeral Celebrations in Asante, Ghana*. (Amsterdam: The Netherlands, Aksant Academic Publishers, 2001), 7.

Asantes have various rites and rituals performed when a person is dead and that is what will be discussed in chapter 2. There will be a look at these rites and rituals performed when a person is approaching his/her journey's end and eventual death and these practices will be placed in their factual, historical, and cultural perspectives. I will then proceed to discuss succinctly the funeral celebration of the Asante by giving a detailed account of how it is seen as a social event as well as a tradition. I will proceed to look at how individuals as well as institutions in various ways have criticized the flamboyant way Asante celebrate their funerals. And finally, I will be exposing the End-of-Life care situation of the Asante at the moment.

Chapter 3 develops a robust alternative ethical and theological vision for terminally ill patients or elderly. It also discusses palliative care and hospice service in the modern era as a model for the Asantes and people of Ghana in general. The theological and ethical foundation for my desire to promote EoL care more than post-mortem care will be based on human dignity, social justice, solidarity, option for the poor and the common good. I will argue that there must be a different attitude towards our dying persons instead of expensive and ostentatious funeral celebrations. An alternative ethical and theological vision for funeral practices will be given. Pragmatic suggestions based on pastoral care will also be offered. Conclusion will then be drawn.



## Chapter 1

### GHANA AS A COUNTRY

#### Introduction

This thesis begins in chapter 1 with an exploration of people of Ghana and their religious life- Christianity, Islam and African traditional religion (ATR). It also examines the culture and belief systems of the Asante. In this chapter, then, the nature and character of Asante and Ghanaian people are established and some cultural values are exposed that should enable us more clearly to situate and recognize people of cultural values. This will lead us to understand chapter 2, where some of the practices that might have contributed to the situation of the elders will be discussed.

#### 1. Ghana- People and Religious Life

Ghana, a country on the West Coast of Africa, is one of the most thriving democracies on the continent. It shares boundaries with Togo to the east, la Cote d'Ivoire to the west, Burkina Faso to the north and Gulf of Guinea, to the south. A country "covering an area of 92,099 square miles,"<sup>2</sup> has an estimated population of about 24,500,000 (2010 Ghana Census), drawn from more than one hundred ethnic groups-each with its own unique language. English, however, is the official language, a heritage of its former colonial status. English is invariably a second language. Mother tongues include over sixty indigenous languages.

Akan is the most widely spoken language and has a large number of native speakers. Many members of the groups learn Akan as a second language and use it fluently for intergroup

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<sup>2</sup> Kwame B. Assenyoh. *The Disabled Church: Toward Roman Catholic Theology of Disability in Ghana* (Weston Jesuit School of Theology: Cambridge, MA, 2004), 9.

communication. Ga-Adangme and Ewe are the next major languages. Many Ghanaians are multilingual, speaking one or two indigenous languages beside their native dialects and English.

Each of these ethnic groups has its own distinctive religious customs and practices. Besides this, there are also religious worldviews, customs and traditions that are significantly common to them all. This is evident in the work of Paul Gifford, when he writes about the Akan tribe of southern Ghana: “In the pre-Christian religion reality consists of beings and objects charged with varying degrees and qualities of supernatural power. There (Akan tribe) is a Supreme being (Onyame) and lesser deities (abosom). The Ancestors too are honored; and other spirits dwell in rocks, rivers, trees, animals and various objects.”<sup>3</sup> Their worldview is a clear indication that divinity and transcendence permeate every aspect of the Ghanaian people. F. K. Buah, a Ghanaian historian, emphasizes that, “in Ghanaian society the belief in the Supreme Being is considered to be inborn in each individual from the start of existence.”<sup>4</sup> This is attested in Akan proverb: “Obi nkyere abofra Nyame,” which means the child does not need to be taught about the existence of God. A Ghanaian child from his birth is religious. Each child is born into religion and grows with it.

In Ghanaian religion (also African Traditional religion) the essence of divinity shapes the meaning of all other beliefs, practices and customs. This is also established by Kwame Assenyoh when he writes, “for instance, the physical world is not held in individualistic tension or competition with the spiritual world as in Euro-Western cultures. Rather these two worlds are bound up in one reality: nothing is purely matter, since spirit infuses everything and changes occur as a result of one spirit acting upon another.”<sup>5</sup> The actions of the spiritual world are considered as

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<sup>3</sup> Kwame B. Assenyoh, 3.

<sup>4</sup> F. K. Buah. *A History of Ghana: Revised and Updated* (London: Macmillan Education Ltd., 1998), 50.

<sup>5</sup> Kwame B. Assenyoh, 3-4.

causes of the events of the physical world. It is within this rich religious context of a strong sense of divinity, where all realities in the physical world are interpreted by means of the spiritual world of ancestors<sup>6</sup> and other spiritual beings, that I will discuss the culture and belief systems of the Asante.

### **1.1. Christianity**

Christianity came to Ghana at the end of the 15<sup>th</sup> century, around the year 1492.<sup>7</sup> The Portuguese explorers, who were Catholics, used to come to the West Coast of Africa with Chaplains. When they docked and after Mass in the morning when the Chaplains did not have anything to do, they would go out and begin to talk about Jesus. In this way, they converted a big number of Catholics around Elmina, on the west coast of Ghana.<sup>8</sup> So at the end of the 15<sup>th</sup> century and in the beginning of the 16<sup>th</sup> century, there was a very flourishing Catholic community around that area. But for some reason which we have never been able to find out, this thriving community disappeared completely, after about 30 to 50 years, leaving in its trail only a few remnants like the devotion to St. Anthony which has been corrupted into *Nana Ntona* and made a tutelary spirit of traditional religion.<sup>9</sup>

The Portuguese were replaced by the Danes as colonizers who were not very Catholic and introduced Protestantism into the then Gold Coast. But they were not missionary minded so under them, Christianity did not make any impact. The Danes in turn were ousted by the Dutch, another

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<sup>6</sup> Spiritual beings and ancestors will be treated as sub-topics in this chapter (1), which much will be said about them.

<sup>7</sup> Steven J. Salm et al, *Culture and Customs of Ghana*. (Westport: CT, Greenwood Press, 2002), 46.

<sup>8</sup> Steven J. Salm et al 46.

<sup>9</sup> This idea was given to me by Emeritus Archbishop of Kumasi, Peter K. Sarpong when I had an interview with him on December 30, 2015. The interview was part of the research work I did for this thesis.

more or less Protestant country. But it was when the British took over and colonized the then Gold Coast, that they brought with them Anglicanism, the official religion of England. This was followed by Methodism; then came the double form of Presbyterianism, one from Bremen in Germany and the other from Basel from Switzerland.<sup>10</sup>

These two denominations of Christianity had a very great impact on the country. They had strongholds. Methodism established itself around Cape Coast in the Central Region and Presbyterianism settled in the Eastern Region, both claiming equal parts of the Greater Accra Region.<sup>11</sup> The Anglican Church remained a kind of urban Church. It is found in the big cities and its influence in the rural areas rather limited.

The Catholic Church reappeared years after these three major denominations. The Catholics were back to Ghana in 1880 and the missionaries who brought Catholicism were French Alsatians. They began again from Elmina.<sup>12</sup> Twenty-five years afterwards, the White Fathers, especially from Canada, also penetrated Ghana but this time from the North. So there was a kind of two-pronged approach to evangelization, one from the South and one from the North. From Cape Coast, the Catholic Church spread to Keta where the Germans had also infiltrated, as it were, from Togo. The third place was in Kumasi.<sup>13</sup>

The Christian Church has developed and improved tremendously from all aspects. Currently all the mainline Christian Churches have their own Ghanaian leaderships. There is hardly a Christian Church, the exception probably being the Salvation Army that has a White head. The Anglicans have about 6 dioceses; the Methodists have recently adopted the Episcopalian form

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<sup>10</sup> Interview with Archbishop Sarpong, 2015.

<sup>11</sup> Steven J. Salm et al, 46.

<sup>12</sup> Ibid, 46.

<sup>13</sup> Interview with Peter K. Saponng.

of the administration of the Diocese and now have as their head the Presiding Bishop. The personnel that used to be called Chairmen of Districts are now Bishop and what used to be their Districts are now called Dioceses; the Presbyterians have their Moderator and Presbytery Chairmen and the Catholic Church now has **4 Archbishops** and 15 bishops.

Apart from the mainline Churches, nowadays we have an influx of Charismatic, Healing and Pentecostal Churches. Some of these are from outside Ghana, even from America. Some have come in from Nigeria and other parts of Africa. But some of these religious movements have their origin in Ghana itself and they range from very highly biblical sects to sects whose inspiration can hardly be traced to the Bible, even though they insist that they are Christian. While some of these Churches command deep numerical strength, others have very small followings.

Statistics are difficult to come by but we are told<sup>14</sup> that there are about 3,000 of these religious movements, sects, call them what you like, in Ghana now.

The mainline Churches have had a very great influence on the development of Ghana. In education, for example, the Methodist Church established the first ever secondary school in Ghana. Until recently, almost all the good schools in Ghana were Church owned. We can think of Wesley Girls' High School, Mfantshipim, Wesley College, all belong to the Methodists. Then we have the Aburi Girls' Secondary School, Presbyterian Training College, Presbyterian Secondary School, all belonging to the Presbyterians. The Catholics have many such schools – St. Augustine's, Holy Child in Cape Coast, Opoku Ware, St. Louis Senior, St. Hubert and St. Louis College of Education in Kumasi, St. James in Sunyani, St. Peter's, St. Martin's and Pope John in the Eastern Region, St.

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<sup>14</sup> This normally comes from social commentators and leaders of religious group such as Christian Council.

Aquinas and St. Mary's in Greater Accra Region, O.L.A., Bishop Herman in the Volta Region, Francis Xavier in the Upper West Region and so on.

In health, mission hospitals command at least one-third of the bed strength of all hospitals in the country. The Catholic Church has 29 hospitals. The other churches have about 14 hospitals. By a hospital we mean a health institution with at least a doctor.

The Pentecostal and the Charismatic faith-healing Churches which have come into existence of late are spreading like wild fire over the whole of Ghana. As has been remarked, the Anglicans are concentrated in the bigger townships. The Methodist Church is found in many places but its stronghold is the Central Region. The Presbyterian Church is similarly found in many places but its stronghold is the Eastern Region. The Evangelical Presbyterian has its stronghold in the Volta Region but has found its way into other parts of the country. The Catholic Church does not have a stronghold as such but it is found in every nook and corner of Ghana.

In spite of the blessings the Christian Churches have brought into Ghana, the Christian Churches have also been the cause of disunity and dissension in Ghana. In the beginning, each denomination tried to gain converts by all means, foul or fair. The scramble for converts was scandalous to the cause of Christ who had called upon Christians to be united so that the world may know that the Father sent him (John 4:34, 17:4). The rivalry amounted to hatred. Lies were told by one denomination about others. In particular, the Christian religions treated traditional religion with contempt, failing to realize that many of the things taught by Christianity are found in African Traditional Religion (for instance love, peace, forgiveness and reconciliation). There are still traces of this unhealthy rivalry among the Christian religions. Especially the newly-founded movements thrive on intolerance, condemning orthodox Christians, Muslims and followers of traditional religion.

## 1.2. Islam

Islam has been in Ghana for many years. It came to Ghana through trade across the Sahara. Muslims settled mostly in the Northern section of Ghana. They did not come down South until recently.<sup>15</sup> Wherever they went in the South, they stayed together in what are called *Zongo areas*. Islam has developed different forms, some of them militant and fundamentalist. However, there are two main groups of Muslims. The first are the mainline Muslims. The Orthodox Muslim is non-evangelical. But it is extremely difficult to convert them to Christianity. They are interested mainly in the education of their children in the tenets of the Koran.

The Ahmaddiya movement is a kind of “heretical” section of Islam or so the other section thinks. It originates from Pakistan. They call themselves *mission* and, indeed, this is what they are. In terms of modern development, they are very dynamic. They have educational institutions from kindergarten to secondary schools. They run hospitals. They go in for evangelization.<sup>16</sup> They own newspapers and their leaders are very much educated. But they are extremely tolerant and pacific. Left to them there should be constant interaction between Christians and Muslims so that Christians and Muslims get to know one another better. For this reason, the Ahmadiya Mission often organizes symposia and lectures on important issues and invite people of all religions to share their ideas on them.

Muslims in Ghana are normally very peace-loving. In Tatale, northern part of Ghana, where I was the parish priest, before coming to the United States to study, I had many Muslim friends. Muslims would attend my Mass and were very happy to come to me for blessings. I had a Muslim youth as a friend who would always bring gift. This action most of the time was

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<sup>15</sup> Steven J. Salm et al, 51.

<sup>16</sup> Ibid, 53.

encouraged by his parents who would say, “won’t you go and give father something?” They are very happy to receive the annual message that the Papal Council for Inter-Religious Dialogue sends to them on the occasion of the Ramadan.<sup>17</sup> But of late we have had some groups of Muslims, a very small minority, that have shown uncharacteristic signs of militancy, violence and intolerance. But these militant Muslims do not only oppose and condemn other religions, like the African Traditional Religion and the Christian Religion, but often clash violently with Islamic leaders whom they accuse of moving away from orthodoxy and watering down Islamic teachings.

### **1.3. African Traditional Religion (A.T.R.)**

Both Islam and Christianity originally, and even now, consider the African Traditional Religion as their enemy. However, the truth of the matter is that African Traditional Religion is the friend of these religions. It is the religion from which one can convert people to Islam and Christianity very easily. Contrary to what strangers say, African Traditional Religion is based on very sound principles. It is based on belief in the Supreme God who is One, Creator, Kind, Loving and so on. From the point of view of faith, African Traditional Religion has been pictured as an equilateral triangle. God occupies one spot that is the apex. On the right side of the triangle are the so-called divinities: on the other side are the ancestors and on the base are other components of the religion: the powers and forces, witchcraft, magic, totemism, taboos, morality, medicine, life cycles and their ceremonies like child-naming ceremonies, initiation ceremonies, funerals, etc.

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<sup>17</sup> Interview with Peter K. Sarpong.



African Traditional Religion does not have a scripture or an identifiable founder.<sup>18</sup> African Traditional Religion is suffering from all kinds of unfairness from Christians, Muslims and Jews. It has been called different names (such as paganism, tutelary god, false god etc) and then those who give it those wrong names turn round and condemn it because it bears the names. These names, as far as I am concerned, arise mostly from the arrogant Christians, Jews and Muslims who believe that anybody who is not a follower of a religion of the Book, Bible or Koran, is an infidel, a non-believer.

Morality in African Traditional Religion flows from our belief in the ancestors, our belief in the spirits and especially our belief in the Supreme Being who is the universal norm of morality. Here is a clear lesson for Christianity. The actions of many against their neighbors contradict their faith. They act as if they have no faith and yet Jesus has said, “*So long as you did it to the least of my brothers you did for me*” (Matt. 25: 40).

African Traditional Religion is **all-pervasive**. It is a way of life, not a fashion. It is like the skin you wear not the cloth you put on. Wherever you are, whatever you are doing you are involved in a religious experience. In African Traditional Religion we are one another’s keepers. The strong belief is that the effect of one’s deeds – evil or good- rebound on society. Religion is, therefore, not a private affair.<sup>19</sup> I must see to it that you keep your religious injunctions.

Africa Traditional Religion is concerned therefore with this world. It does not pretend to leave this world and go to a better world.<sup>20</sup> Yes, of course, we know that there is a world of peace and tranquility waiting for us. But in African Traditional Religion one is not in a hurry to go there.

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<sup>18</sup> John S. Mbiti, *African Religion and Philosophy: Second and Enlarged Edition*. (Oxford: UK, Heinemann, 1989), 3.

<sup>19</sup> Kwame Gyekye, *African Cultural Values: An Introduction*. (Accra: Ghana, 2002), 4.

<sup>20</sup> John S. Mbiti, 4.

One wants to achieve this peace by being of assistance here on earth. And this assistance is manifested in the number of children one has, in the number of achievements one has on record.

In African Traditional Religion we have what we call *eternal vigilance*. Ignorance does not excuse from blame if one sins. One cannot be remiss and commit offenses under the cloak of ignorance. If something is a taboo to be avoided then you must see to it that it is avoided. For example, if you are forbidden to eat beef on Sundays then you must be sure that the day you are eating beef is not a Sunday or that the meat you are eating on a Sunday is not beef. If you eat beef on a Sunday because you thought that is venison or if you knew it was beef but you thought you were eating it on a Saturday you have offended grievously. You were not vigilant enough.

African Traditional Religion is an attempt to explain phenomena as Christianity does. It stresses the need for community existence like Christianity. In African Traditional Religion the idea of forgiveness and reconciliation is so paramount that in many cases there is a special ceremony or ritual for forgiveness and reconciliation. The love for life is a great value in African Traditional Religion, contrary to what some people think. In the past, among the Asante when one killed an enemy in war one had to have ritual cleansing. It is surprising that Ghana with these major religions and their values which geared toward the welfare of human person, yet the elderly are not taken care of. How these religions are contributing to the end of life care problem of the elderly or trying to help alleviate it? The question is, “are these people not living their religious tenets which seek the welfare of individuals? Religion must be an institution that seek the welfare of the people. The dignity and well-being of the people must be the first and foremost of all religions. It is partly the responsibility of the various religious bodies to make sure that ensure the peace and tranquility of people.

## THE ASANTE PEOPLE

### 2.0. Historical background of Asante (Ashantis)

The territory is a forest belt laced with some mountains in some areas. Kumasi is the capital of the current Ashanti region, and has also been the historic capital of the Ashanti Kingdom. Most Historians believe that the Akan group of people migrated from the old Mali Empire and settled at a place near Kin-nta-mpo and from there; most of them migrated to places like Takyiman and Akurofuom.

As a united people, they started with a nucleus of the Oyoko<sup>21</sup> clan around Asantemanso. After several years of subjugation by other empires, such as the Akwamu and the Denkyira, Asante eventually grew to be a very powerful empire founded by King Osei-Tutu I<sup>22</sup> (1695-1717), after defeating the Denkyira King Ntim Gyakari (in 1701 and annexed all Akan clans under his kingdom and administered them from Kumasi, his headquarters), during the battle of Feyiase.<sup>23</sup>

The Asante are the largest tribe in Ghana and one of the few matrilineal societies in West Africa. The area of Ashanti is 9400 square miles with a population of about 2.5 million. The Ashanti King, Asantehene is the political and spiritual head of the Ashantis.<sup>24</sup> The word Ashanti is a British misnomer and Asante, is the correct Twi. Asante literally means “because of wars” (Asa - wars; Nti- because of). Historically, the Ashanti tribe was known as a disciplined and powerful people. The Ashanti people have always been known as fierce fighters. The people of this tribe have a slogan: ‘If I go forward I die, if I go backward I die, better go forward and die.’

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<sup>21</sup> The Oyoko Abusua or clan is the most powerful family in Asante because it is the ruling family and the occupant of the Golden Stool. The Ayokufuo (plural) have up to date tried to maintain that it is forbidden for two Ayokofuo to marry irrespective of town or tribe.

<sup>22</sup> Osei Tutu I (first Asante King) was the most noted ruler of the Asante, a powerful, warlike, and highly disciplined people of West Africa, whose history goes back more than 200 years.

<sup>23</sup> Buah, 82.

<sup>24</sup> Ashanti people tradition and culture, African Crafts Market. [www.africancraftsmarket.com/Ashanti\\_people.htm](http://www.africancraftsmarket.com/Ashanti_people.htm).

When the Ashanti tribe was faced with war, they used drums to signal the upcoming battle. The beat of these drums could be heard through the dense forest.

These people constitute a well-known segment of the people who live in central Ghana. They speak a dialect of Twi, called Asante. They are world famous goldsmiths and are best known in America for their Kente cloth, a fabric originally worn by the royalty of the Ashanti. One of the Ashanti tribe's most notable aspects is the matrilineal structure of its society that has lasted throughout history to present-day. While children receive their father's spirit, it is believed that a mother gives each child his physical body, therefore relating a child more closely to his mother and mother's family. Generally, Ashanti hold very strong family bonds.<sup>25</sup> Since some Ashanti men practice polygamy, and divorce is rare, families live in extremely communal settings. Extended families live in compound/courtyard style yards with multiple homes to accommodate large numbers of relatives. The main father (also called Housefather) is often one of many brothers-often a child's uncle will be called father.

It must however be pointed out that though Asante exists today as a Kingdom, it is not an island with complete autonomy. It forms part of a greater society called Akan.<sup>26</sup>

### **3.0. ASANTE CULTURE AND BELIEF SYSTEMS IN THE MODERN WORLD**

I am an Asante. I was also born and bred on the Asante land. This means that I know my people and the culture into which I was born. In describing the Asante culture and belief systems in the modern world, therefore, I would like to center my attention on my own personal life and

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<sup>25</sup> The history of the Ashanti tribe of Ghana, Lotus Marks World and Import. [www.lotusmarks.com/category/ashanti-tribe-ghana.html](http://www.lotusmarks.com/category/ashanti-tribe-ghana.html).

<sup>26</sup> Osei Kwadwo, *A handbook on Asante Culture* (O. Kwadwo Enterprise: Kumasi), 2002. 11.

experiences. Whatever I write about the Asante today is my knowledge and experience of them. It must be noted today that, this culture and belief systems have been adulterated in the big cities because of modernity. It must also be clear at this point that the traditional values and culture of the Asante are worth discussing, because they are the very things that are going to contribute either positively or negatively to the situation of the Asante elderly as they will be treated in the next chapters. It is these culture and belief systems that may or may not influence the life of the people to live a good life or not.

### **3.1. Fear of God**

The key value among the people of Asante is the fear of *Onyankopon* (God). The name of *Onyankopon* comes up time and again – in ordinary speech, in the drum language, in proverbs, in dances, etc. Even in the religious dance of the *okomfoo* (the traditional priest), the name *Onyankopon* crops up. It is obvious that in the thinking of my people, Onyankopon is a unique being, higher than all other beings. He (He is used because God is portrayed as a male in the Asante culture) is the Creator (*oboadee*), he is Eternal (*Tetekwaframo*), he is kind (*odeefoo*), he is the source of Water (*Totrobonsu*), he is the source of Light (*Amowia*), he is the One who keeps forgiving to the extent that the sinner can never finish saying “thank you” (*Daaseensa*), he is the One whom you thank and get tired (*Daasebre*), and so on.<sup>27</sup> This is the Supreme Being. This is how the Asante think of him to be. “It is God who drives away flies from a tailless animal”<sup>28</sup> God,

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<sup>27</sup> Kwame Gyekye, 2002. 7.

<sup>28</sup> Steven J. Salm et al, 2002. 40.

for the Asante, is “considered understanding and merciful, but capable of calling punishment on those who do not live according to the society rules.”<sup>29</sup>

### 3.2. Holistic Religion and the World of Spirits

Among the Asante people, their whole world is a world of Spirits. Some of these spirits are good, some of them bad. The spirit world contains a hierarchy of powers that includes the Supreme God, lesser gods, ancestors, witchcraft and magic. Of the good ones, of course, the Supreme Being (*Onyankopon*), as I have just said, is unique.

The belief in the abosom is very unique. It is no easy task to obtain from books or personal research answers as to the precise nature of the *Abosom*. Meyerowitz, however, is of the opinion that it is the same word as Bosome (the moon) because *obosom* ... is the visible manifestation of the *kra* (Soul or the vital force) or the moon).<sup>30</sup> What is certain is that they are spirits, created by God, having as their mundane abode anything from the rivers to creepers, and from beasts to rocks. They could also be found in the bush, in their natural habitats such as mountains or rivers or some ropes or some animals or they could be domesticated. They possess astonishing powers, which they use, some to the advantage of man, others to his detriment.

The *Abosom* have always been spiritual entities. They are the creatures of God, and subordinate to him. In spite of this, they possess extraordinary powers and authority over persons, which they seem to use independently of God. They are distinct from the spirits of the dead; and their habitations on the earth are natural places and things, as well as man-made shrines. But they

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<sup>29</sup> Steven J. Salm, et al, 40.

<sup>30</sup> Meyerowitz, *The Akan of Ghana*. (Russell Square: London, Faber and Faber Ltd, 1958), 24-25.

have a predilection for those “residential areas” that induce fear and reverence. Life was governed and directed by a religious worldview of the society.

The belief systems of the Asante permeate every facet of their lives. There is no way you could do anything without involving yourself in a religious experience, so much so that the hunter is involved in a religious experience, the chief being installed is involved in a religious experience, the judge passing sentence is involved in a religious experience, the girl who had reached puberty is involved in a religious experience, the farmer going to farm would not just farm without offering something to the earth, the carver would not cut a tree without offering something to the tree. Whatever one is doing, whether one is sad or happy, whether you have just come from a journey or you are going on a journey, whether you are playing or being punished, you could not leave out religion.<sup>31</sup> “Religion is inseparable from virtually every aspect of Ghanaian life and is important in the determination of worldview. Religion commands a central place in the organization of social, political, and the cultural life, and regulates the relationship between people and their physical and spiritual environment.”<sup>32</sup> This belief system of the Asante is in line with what Mbiti said about Africans, “Africans are notoriously religious, and each people has its own religious system with a set of beliefs and practices. Religion permeates into all the departments of life so fully that it is not easy or possible always to isolate it. A study of these religious systems is, therefore, ultimately a study of the peoples themselves in all the complexities of both traditional and modern life.”<sup>33</sup> This is also affirmed by Kwame Gyekye:

In African life and thought, the religious is not distinguished from the nonreligious, the sacred from the secular, the spiritual from the material. In all undertakings-whether it be cultivating, sowing, harvesting, eating, traveling-religion is at work. To be born into the African society is to be born into a culture that is intensely and pervasively religious and

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<sup>31</sup> Kwame Gyekye, 3-4.

<sup>32</sup> Steven J. Salm et al, 33.

<sup>33</sup> John S. Mbiti, 1.

that means, and requires, participating in the religious beliefs and rituals of the community.<sup>34</sup>

Religion is not taught or learned as a classroom subject; it is picked up informally, formally and non-formally. *Obi nkyere akwadaa Nyame* (No one shows the Supreme Being to a child) was a proverb that I learnt right from my infancy. *Asaase tetretee* (A vast land), *Nyanme ne hene* (God is King) was something I learnt from infancy. Their (Asante) morality is governed by their belief systems. They mold their lives on their beliefs. *Onyankopon* is, for them, the universal norm of morality. Whatever they do, they try to conform themselves to what they conceive to be the will of *Onyankpon*.

About 20 years ago it was impossible for somebody to steal from a blind person. It was impossible to fight a one-armed person; it was impossible for somebody to do what he or she liked. You would never laugh at a deformed person or a person with disability. Anybody who did any of such things would be reprimanded: “why, don’t you fear God?” (*Aden wonsure Nyame?*).

This religious worldview of the Asante is gradually changing in the cities but still enforced in the villages and towns. Looking back today, I can only see that things have changed and continues to change. Growing as a child I have realized that there are many things done today in the cities that couldn’t have been done about thirty years ago. In those days, for fear of *Onyankopon*, there was respect for the aged, the sacred and those in authority.

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<sup>34</sup> Kwame Gyekye, 4.



### **3.3. Religion not a private affair**

The belief system of our people are such that religion is not considered a private matter. There are prohibitions, the punishments for which are spiritual. For example, it is believed that if certain acts are committed, there would be famine or unusual deaths or infant mortality, and so on. So any person who see another person infringing the laws of the society is bound to arrest this person and report him to the authorities for the proper punishment. For example, if one caught two people, even a husband and his wife, having sex in the bush, this person had to arrest them and report to the authorities for proper penalties to be meted out to them for desecrating the earth. “Religious life, then, is not an individual but a communal affair, woven into the culture of the people.”<sup>35</sup>

### **3.4. Ancestors**

The ancestors are certain individuals of the past generations of a lineage who are said to have distinguished themselves in many ways and, in particular, to have led virtuous and exemplary lives worth of emulation by succeeding generations of the lineage. The Asante do not think of their ancestors as gods. They are human beings on earth and they remain human in incorporeal existence where they are now. “They are therefore considered, not as gods, but as ‘relatives’ who see us and have sympathy for their relatives on earth. Only their form as mundane creatures has changed. They are God’s children. The spirits of those who commit suicide and the like, are afraid to approach God. That is why they roam about this world. Ancestors are then human spirits.”<sup>36</sup>

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<sup>35</sup> Kwame Gyekye, 4.

<sup>36</sup> Peter Kwasi Sarpong, *Ancestral Stool Veneration in Asante (Revised edition)*. (Kumasi: Ghana, The Goodshepherd Publishers Limited, 2011), 152.

The Asante people of Ghana call their ancestors *nananom* (singular: *nana*, a word that also means ‘grandfather or mother’). “Because the ancestors are no longer living and have become spirits, they are often referred to by the full phrase *nananom nsamanfo* (grandfathers [or great grandfathers or grandmothers] who have become spirits or ghost).”<sup>37</sup> According to Salm et al, ancestors “can manifest themselves in many forms, including human bodies, in dreams, or through possession.”<sup>38</sup>

For somebody to be called an ancestor, three things had to be fulfilled in his life. The person had to be an adult: By definition somebody who was married, preferably with children. Then somebody had to die a “good death,” that is to say, death not caused by an unclean disease like leprosy or epilepsy or small pox or through an accident, like drowning, being shot accidentally, or suicide, or after being accused of being a witch or during childbirth.<sup>39</sup> The third condition was a life that was worth imitating and remembering. It was believed that a dead person who satisfied these conditions went to a place reserved for such people, called *asamando*. The living could not just do what they liked, they had to please the ancestors.

The Asantes are constantly preoccupied with the thought that the ancestors are watching him; that when he joins them one day, they will demand an account of his life from him. This preoccupation serves to regulate his daily life and behavior, while the thought is a very potent sanction for morality. The ancestors are believed to send help to their relatives. One ancestor may indicate the remedy to an illness to one of his own, in his dream. Another may see to it that the girls of his clan are endowed with fecundity – the greatest blessing for the Asante woman and so

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<sup>37</sup> Kwame Gyekye, 163.

<sup>38</sup> Steven J. Salm et al, 41.

<sup>39</sup> Peter K. Sarpong, *Peoples Differ: An Approach to Inculturation in Evangelization*. (Legon, Accra-Ghana: Sub-Saharan Publishers, 2002), 98.

on. J. H. Kwabena Nketia affirms this when he writes, “There are beliefs in the visitations of the dead, invisible participation of the dead in the life of this world and in the continuation of ties of kithship and kinship after death. Consequently, the living are anxious to keep up good relations with the dead, to remember them, to show concern for them, to identify themselves with them and to ask their favor.”<sup>40</sup> A few people claim the power of seeing the dead, and at national ceremonies, it is believed that the ancestors join the living in the celebration.

The significance of the ancestors consists simply in this: that they watch over the affairs of the living members of their families, helping deserving ones and punishing the delinquent. Lystad was right when he wrote about the Asante funeral,

this celebration takes on the flavor of a party, a farewell party, for that, indeed, is what it is. The soul of the dead has begun its journey to the land of departed souls, and this is an event which calls for music, for drumming, for drinking, for dancing and visiting. The soul’s journey, for one thing, is not a very long one; the ancestors are always nearby, and he but joins them. Though he will no longer be visible to men, his presence will still be felt, a very real threat to those who ignore him through social misbehavior, a very real help to those who show their respect for him through social conformity.<sup>41</sup>

In any case ancestors are there to see to the good of the living. The living feel not only linked to the ancestors for their help and protection, but also positively obliged to do honor to them and render service to them as appropriate. To live uprightly is to be a source of honor to one’s family, and one’s ancestors constitute an integral part of one’s family. Bad conduct, on the other hand, brings disgrace to the living family and displeasure to the ancestors. The ancestors, in their post-mortem condition, are credited with veritable moral perfection and are therefore not

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<sup>40</sup> J. H. Kwabena Nketia, *Funeral dirges of the Akan People*. (New York, Negro University Press, 1969), 6.

<sup>41</sup> Lystad R. A. *The Ashanti: A proud people*. (New York: Green Wood press, 1968), 101.

accessible to disgrace, but because of their elevated moral status they are thought to be even more scandalized by wrong doing than the living elders of the family.

### **3.5. Composition of the human person**

The belief system of the Asante is such that our people believe that human being is composed of certain elements from the mother (the *mogya* or blood). It is given to a person by the mother during pregnancy. This *mogya* gives children their lineage status and membership in the family. Another component is *sunsum*. It is certain elements from the father (the *sunsum*). It helps to determine individual character, intelligence and personality. The *sunsum* is the spiritual part that can bring physical ailments, as well as leave the individual vulnerable to witchcraft and other evil spirits.<sup>42</sup>

The next component is some elements from *Onyankopon* (the *okra*-soul and the *honhom*). It is the spiritual part of humans that predates birth and survives after death. The *okra* helps people to make moral decisions and sustains their life powers. It is believed that the *okra* is from Supreme God and links people to the creator.<sup>43</sup> After death, the Asantes believe that the *okra* returns to Supreme God to account for its time on earth. Every *okra* has a name associated with the day of the week on which a child is born. A female child born on Sunday, for example, is called “Akosua,” and a male child is “Akwasi”. It is believed that diseases, for example, and, therefore, death were caused when something went wrong with the *bogya* or something went wrong with the *sunsum* or something went wrong with the *okra*.<sup>44</sup>

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<sup>42</sup> Marleen de Witte, 24.

<sup>43</sup> Marleen de Witte, 25.

<sup>44</sup>J. H. Nketia, 35-36.

### 3.6. Community

But even with the composition of the *bogya*, the *sunsum* and the *okra*, it is believed that it is our existence in community that makes us human beings. A community is a group of persons linked by interpersonal bonds – which are not necessarily biological – who share common values, interests, and goals. A person has to be part of the community, move with the community, know the community's likes and dislikes, take part in community exercises, take part in the community rituals, take part in the community ceremonies, fulfill one's duties in community but at the same time enjoy one's rights in the community and so on.

Asantes believe that in the social context of the community, each member acknowledges the existence of common values, obligations, and understandings and feels a loyalty and commitment to the community that is expressed through the desire and willingness to advance its interest. "Members of a community or society are expected to demonstrate a concern for the well-being of others, to do what they can to advance the common good, and generally to participate in the community."<sup>45</sup> We have to remember that we are because others are and that others are because we are – community life.

The belief system is such that it is known that if there is only one person in this world, he/she would not be a human being. The belief system of Asante, at the time I was infant in my village, taught me that I should not be a nuisance in the society, doing wrong things, provoking others, causing problems, causing havoc. If I did that my mother would say *wo nnye wo ho nipa*; *wo nnye nipa* (you do not behave like a human being; you are not a human being). When somebody was doing those things – being a liability in society – my mother or father would tell me "don't go near that person; *onye nipa* (he is not a human being). Humanity was itself described in terms of

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<sup>45</sup> Kwame Gyekye, 36.

community. When somebody was good, an asset to the society, causing no problem, helping here and there, all the time at the disposal of others, he was described as *oye nipa dodo* (he is human being indeed).

Humanity, in the belief systems of my people, is based in the way we act in society. Morality is based on the belief systems. Because you knew that your spiritual overlords did not like something, you would not do it and because you knew your spiritual overlords liked something, you would do it. It is, therefore, not surprising that in the modern world, when we have lost confidence in the supernatural beings, overlords, things that we should not do in society are being done.

### **3.7. Institutions**

In my infancy, I became acquainted with certain institutions and customs that protected us. These were customs that made us happy, educated us, and gave us a sense of the goodness and evil. Such an institution was story-telling. I remember in the evening, we would sit down and sometimes dramatically portray an imaginary scene. But more often, these were described and during the description, there were intermittent songs full of meaning, entertainment and education. Such stories were beautiful and they were told to instill discipline in us. A story would be told about how a girl repeatedly refused to marry the young man proposed to her by her parents. She ended up marrying a python and the python deceptively brought her to a lake where it began to swallow her. When she cried aloud, it was a hunter she had contemptuously rejected who heard her voice, came to the lake and slit the python into two, rescued her and brought her home. She later married him and they lived happily afterwards. It was an abomination to disrespect and spite your parents.

So we have stories that tell us about the power of *Onyankopon*, how good it is to tell the truth, what one gains from helping another person, the punishment that one brings upon oneself for being wicked to other people. For example, a woman who was determined to poison the child of her co-wife (*korafoo*) ended up poisoning her own child.

These belief systems then had a practical value for our people. The *bragoro* (puberty rite), which nowadays I do not think young girls follow with any seriousness, except probably in the villages, was effectively used in my infancy to educate the girl in wifely matters. It made it possible for the society to honor the girl by giving her gifts. Younger girls coming to stay with her honored the girl. The girl got the chance of being heard about by men who might be seeking wives and so on. Above all, the desire, the eagerness, the expectation to have a good husband and children in the future were sufficient incentives to good morality and deterrent to loose life.

### **3.8. Indispensable values of the Asante**

The beliefs of the Asante stress values that are the mainstay of our society: hospitality, forgiveness, reconciliation, kindness, fatherliness, magnanimity, justice and peace. I noticed in my infancy that the society in which I lived, you could not be so hard-hearted as to let somebody die because of hunger. Not only were you to give food to the hungry person but when somebody was passing through your farm and really felt very hungry, he would simply take your food item there, whether it was a piece of yam or plantain or cassava and cook to eat. When he met you, he had only to say, “oh, the other day I was passing through your farm; I was gripped by an uncontrollable hunger and I took your yam. I think you noticed it.”

The point is that the person who does this, had indeed to be hungry. Not that he felt a little hungry and went and took somebody’s food. Nobody would do that. Therefore, the person whose

food you took would not be angry at all. In fact, if you had not taken it and you told him or her later on, “when I was passing through your farm, I was very hungry but I felt afraid or shy to take some of your yam,” the person would consider that an insult. So if you passed by somebody’s pineapple plantation and you felt like eating one pineapple, you just took it and ate it. The same applied to banana; you just took it and ate it. We used to go through the farms of everybody every morning to collect kolanuts. We called that *abese*. We could fish in a river running through somebody’s farm, we could trap in somebody’s farm and so on and so forth.

### **3.9. Hatred for Injustice**

The belief system of the Asante loathes deceit, exploitation and oppression. Even a person who puts himself at the protection of an “obosom” dares not commit an act that can be described as “kwaseabuo” (deceit). If you do that, your own “obosom” would be very angry with you; the ancestors would be very angry with you. It is to be noted that the whole Asante nation was founded on the principle that there should be no cheating in life. The Asante went to war against other people (especially the Denkyira) because the Denkyira had enslaved them, were exploiting and oppressing them. They thought the Asante were fools.<sup>46</sup> The Asante, inspired by the great Okomfo Anokye and Osei Tutu I, demonstrated that they were not.

The Asante often went to war against the coasters, not because they wanted war but precisely because they did not want war. When they went to sell their wares to the Europeans on the coast in the so-called silent trade, they were cheated and deceived by the dwellers of the coast. It was to get rid of oppression and exploitation that they fought the Fante so as to be able to get access to the Europeans.<sup>47</sup> All this is because in the belief system, we have an idea of *Onyankopon*

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<sup>46</sup> Interview with Peter k. Sarpong, Dec. 2015.

<sup>47</sup> Ibid.



Who does not want deceit and oppression. The proverb says, *Nyame mpe kwaseabuo nti na wama obiara din* (God abhors deceit that is why he has given each and every individual a name). *Kwaseabuo* is the one thing that the Asante does not like. He can be your slave. So long as you treat him fairly with justice and transparency, he is alright.

## **Conclusion**

These beliefs and values underscore the need to care well for our elderly and dying. Yet this is not what is often happening today. In the next chapter, we turn to an examination of contemporary challenges in the funeral practices and end-of-life care.

## Chapter 2

### DEATH, RITES, RITUALS AND FUNERALS OF THE ASANTE AND END-OF-LIFE CARE

#### Introduction

In order to explore this phenomenon, one must be acquainted with the Ghanaian funeral. Marleen de Witte, in her book entitled, “Long Live the Dead,” shares valuable insights into the “changing funeral celebrations in Asante, Ghana.” She believes that “funerals are at the heart of Asante culture and social life.”<sup>48</sup> And after several visits to Ghana in order to do anthropological fieldwork to research this cultural enigma, she observes, “one sometimes gets the impression that people care more about their dead than about the living.”<sup>49</sup> She adds, “The elaborate funeral celebrations during which no trouble or expenses are spared contrast sharply with the daily struggle for the primary necessities of life.”<sup>50</sup> Funerals “are great public events, where families compete for prestige and respect by showing off wealth and by publicly conforming to norms of solidarity and respect for the dead. A funeral more than a wedding or any other ceremony, should be grand and successful.”<sup>51</sup> The Asante people consider every Saturday a funeral day where there are no less than two funerals taking place in any mid-size town.<sup>52</sup> Hundreds of people dress up and travel from miles around to “pay their last respects to a deceased loved one, or to sympathize with a bereaved friend. In turn, they expect the bereaved family to entertain them with show, music, dance, drinks and sometimes food.”<sup>53</sup>

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<sup>48</sup> Marleen de Witte, 6.

<sup>49</sup> Ibid, 6.

<sup>50</sup> Ibid, 7.

<sup>51</sup> Ibid, 8.

<sup>52</sup> Ibid, 5.

<sup>53</sup> Ibid, 8.

## **1.1 Enigma of Life and Death**

There is no doubt that death is a fundamental modality of concrete existence. All of us are aware that our existence carries death within itself. Our existence is perpetually on the march to meet death. Death and life, therefore, may not be synonymous, but they are certainly coterminous. As soon as we are born, we begin to die.

Death can come one day after our birth, it can arrive 10 years later, it can strike when we are nonagenarians. Consequently, since death is often preceded by illness of some sort, we are ontologically terminally ill, if terminal illness is defined as a state which irrevocably leads to death. But for the purposes of this work, I am concerned with a physical disorder, whether it is the malfunctioning of an organ of the body or the absence of such an organ, that we think or know cannot be repaired and that will certainly lead to death.

Our prognosis may tell us a few things. It may mean that death is imminent: that it is going to happen soon, however we describe “soon.” It may also mean that death can take a long time to come or that we do not know when it would take place. The condition may be attributed to terminal disease or an illness which, although curable, is all the same a potential killer. In this thesis (chapter 2 and 3), the term “patient” will be used to refer to elderly people (or terminally ill) and the seriously ill, unless the context indicates otherwise.

## **1.2. Death in Traditional Thinking**

Death is reality. It remains a great mystery. It is one of the central issues which religion, philosophy and science have wrestled with since the beginning of human history. To the Asante, death closes the door of physical, visible, bodily existence of a person and opens another door, the door to a

new life. The aged, therefore, does not face death as a coward. His bravery is stalwart. The big question we need to ask ourselves is “what is our thinking of death?” In Asante culture death is never welcome. Archbishop Peter Kwasi Sarpong in his classical book, *Ghana in Retrospect*, argues that:

Death, as has been pointed out, is never welcome. Everybody tries to avoid it. ‘If one would know where death resided, one would never stop there.’ And the dread of death influences the behaviour even of misers. ‘Death has the key to open the miser’s chest.’ But it is not always resented. It may be accepted as man’s inevitable lot. Ironically people who accept it with dignified resignation, are those who have been successful in life. They can die in peace; they have built a house; they are going to bequeath a large farm to their children; they have given birth to many children; they are rich; they are famous; posterity will ever remember that – what more do they want in life? They are ready to go. But of course they must be given a fitting burial and a deserving funeral: one of the signs of a successful life and a good death is the way a deceased person’s funeral is celebrated.<sup>54</sup>

In Asante traditional thinking, death can be due to many causes. The first of these is the natural degeneration of the body, otherwise known as old age. We cannot reverse old age and its consequences. Death, due to old age, should be honorable and desirable. A patient accepts it and his or her relatives should make every effort to make him or her happy with it. Secondly, it may be due to another person’s wickedness, which makes such a person act physically or psychically against the patient, rendering his condition irreversible. Such a patient wins the sympathy of all.

Thirdly, it may be thought that this state of irreversibility of the undesirable condition leading to death has been brought about by the patient’s own misdeeds or sinfulness or foolishness. Diseases that are thought to be caused by the Supreme Being, the tutelary spirits, the ancestors, fall under this category. Here the patient may not have any sympathy from anywhere and his or her death may even be desired by others if not actually provoked. A fourth situation is where it is

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<sup>54</sup> Peter Kwasi Sarpong, *Ghana in retrospect: Some Aspects of Ghanaian Culture* (3<sup>rd</sup> ed.). (Ghana Publishing Corporation, 1974), 26.

believed that the person's fate had been pre-determined. Either God willed that this be so or the person chose such a situation for himself or herself prior to his or her conception.<sup>55</sup>

The Asante believe that there is a state of existence, attainable by human beings, beyond the limits of our present mortal lifespans. That there can be some kind of continuation in existence after death is attested to by the actions and practices of living people such as veneration of the ancestors, ancestral festivals, concept of the 'living-dead,' belief in spiritual superintendents of family affairs and punishment of moral offenders. For the Asante, the change that takes place at death opens the way for the continuity of life in the hereafter.<sup>56</sup>

The Asante generally believe that bodily death is not the end of life, but only the inauguration of life in another form. It is a journey back to the spiritual world of the ancestors. It is important to note that the whole point of going on the last journey is to become one of the ancestors.

### **1.3. Rites and rituals of death and funerals**

Asante have various rites and rituals performed when a person is dead and that is what will be discussed here. There will be a look at these rites and rituals performed when a person is approaching his/her journey's end and eventual death.

The celebration of funerals, which starts when a person dies and is washed and laid in state, and passing through various stages until the anniversary of the death of the deceased, portrays vividly the dignity of the human person. It teaches us that when you die, you are not dead; you are going to another world, *asamando*. The traditional beliefs teach our people to lead good, kind, serviceable lives so that on their

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<sup>55</sup> Interview with Archbishop Peter K. Sarpong.

<sup>56</sup> Interview with Peter K. Sarpong.

death, they too would have a place at *asamando*.<sup>57</sup> The funeral rites give the opportunity to the community to sympathize and console with those in the society whose life has been shattered by the departure of their beloved one. Sarpong attests to this when he writes:

It is when the deceased is laid in state that sympathizers from the village and relatives living far away and near pour in one by one and in groups to have a last look at him. There is often someone, usually related to the deceased, sitting beside the bed on which he lies, driving away the flies from him. Women bewailing him constantly keep coming before him and going back, singing out his praises and telling everybody in dirges how sad it is to realize that such a good person is no longer going to be with us (even when they think his death is more a blessing than a curse).<sup>58</sup>

Death in the Asante tradition is not typically a cause for sadness. Funerals are usually large community events meant to celebrate the life of the deceased. The Asante believe that these events ensure that the soul is able to transition into the spirit world to become an ancestral spirit. While many Asante are Christian, their funeral rituals are still largely traditional, although the burial may be presided over by a Christian minister and Christian hymns may be sung at the funeral.

Among traditional Asante, death marks a physical separation of the individual from other human beings. This is a radical change, and the funeral rites are intended to draw attention to that permanent separation. As a result of the above elucidation, meticulous care is taken to fulfill the funeral rites, and to avoid causing any offense to the departed.

There are many rituals: giving offerings to the spirits of the ancestors such as food, drinks, and traditional dances which accompany them (the dead) to the world of their ancestors in a flurry of drumming and wild dancing. The ritual of the Asante funeral is significant for the entire community, rather than just family of the individual who has died. Regarding the Asante funeral rites, authors like Forde and Jones (1950), Rattray (1927), and Mbiti (1975) have written that the

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<sup>57</sup> Interview with Peter K. Sarpong.

<sup>58</sup> Peter Kwasi Sarpong, *Ghana in Retrospect: Some Aspects of Ghanaian Culture*, 30.

rites which intend to assist the deceased in his/her life after death often imply the general intention of a respectful farewell and to prevent his return either in body or as a ghost.

An Asante funeral ritual begins shortly before death, when the immediate family conducts a form of last rites for the person who is about to pass. Female family members gather around the dying individual and pour water on his or her throat whilst reciting a prayer. The water is believed to be essential for the departing spirit on their journey into the world of the ancestors, and many Asante consider it a tragedy if a dying person is not given water. The 'okra' (soul), or undying spirit, needs this water to "climb the mountain" into the world of the ancestors. Marleen de Witte affirms this when she writes about the Asante,

Death is like birth; the dead person is born into another life. That's why the cloth given to a deceased must always be white and dead bodies are sometimes laid in state in white. Death is perceived as the transition to the position of ancestors, as a journey to *asamando*. Hence the practice of giving a dying person a sip of water, to be able to climb the steep hill leading to *asamando*. One's existence in *asamando* will be very much like one's existence on earth. One will have the same position one has had in life. A farmer on earth will farm the land in *asamando*; a chief on earth will be a chief there. One will also have the same material needs as on earth.<sup>59</sup>

When the death is announced, all adults in the village begin an eight day fast to honor the sacred ritual as a group event. As soon as the head of the lineage is informed of the death, the men of the family gather to plan the funeral and burial. After the chiefs and sub-chiefs are informed, the ceremonial mourning officially begins. Family members cry out in grief, disseminating the news to the rest of the community. Messengers are sent out to inform family living outside of the community so that they may attend. The women of the family lead mourning through the streets, while the men continue making arrangements.<sup>60</sup> The death of a person in a village affects everybody.

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<sup>59</sup> Marleen de Witte, 26.

<sup>60</sup> Osei Kwadwo (2002), 13

Upon death, the corpse may be washed, shrouded, dressed up, or laid on the ground or placed in a state with ritual objects or funerary artifacts near it. Sarpong makes it clearer when he writes, “When a person dies, he is washed up and dressed in a manner proper to his age, sex, and status. He is then laid in state prior to the burial. The interval between this stage and burial depends to a large extent on the status of the dead person and the condition of the corpse.”<sup>61</sup>

In the event of the death of a husband, the widow is expected to provide artifacts such as sponge, soap, towel, cloth, blanket, pillow and a long piece of hand-woven cloth called ‘Danta’ which was used in the olden days as underwear. These items are used for the bathing and lying in state of the dead husband. Religious Obsequies (such as pouring of libation, or giving the dead food to eat by placing it at a quiet place where no one is allowed to see) may be observed at the house, at a place of worship or at the place of disposal with funerary arts. The actual disposal of the body may include the dead person’s necessities such as amulets, food, weapons and treasures.

The young men of the village will dig the grave spontaneously, at no cost. They will carry the corpse to the grave yard and bury it solemnly. If there is traditional band in the village or nearby village, that band would turn up for the burial and for the funeral and even for such celebrations that took place on the 8<sup>th</sup> day of the death, the 80<sup>th</sup> day and the anniversary and play without asking for anything. Obviously, the bereaved would serve them palm wine. That would be the end of it. These are all imperatives of the belief systems. One could not be at peace with his conscience if he fails to think like that.

Asante dead are buried with everything they might need for their journey through the spirit world, including money, food, a mat, blanket, pillow, handkerchief, jewelry, and the bucket, cloth

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<sup>61</sup> Peter Sarpong, *Ghana in Retrospect: Some Aspects of Ghanaian Culture* (3<sup>rd</sup> ed.), 30.



and soap used to wash the body before burial. In her book, *Long Live the Dead*, anthropologist Marleen de Witte writes,

This is comparable to the common practice of giving things like foodstuffs to a traveler departing from home and going to a place where relatives or acquaintances stay. A traveler should never go (and come) empty-handed. This is also very clear when Ghanaians living abroad come home for a visit. They bring lots of beautiful gifts for their relatives and so prove their success abroad. Without that they can't come home. If they can't afford much, they rather don't go than go with too few things. Even when you are coming home from a day trip to town, Kumasi for example, people will always ask you 'What have you brought for me?', *eeden na wade bre me?*<sup>62</sup>

Therefore the deceased is given consumer goods and money to enable him or her to provide for him or herself after the arrival in *asamando*. Before the burial there is mourning and this may vary from different mourners and relatives. Some of the various ways in which this is expressed are funerary banquet, the wearing of distinctive colors, or special hairdo. Libation is poured on the ground with its associated artistic performance. Offerings, abstention from certain aspects of social life, purification and the like form part of mourning activities. Society at large also participates with the immediate mourners through response to graphic arts of obituaries, public notices (a relatively modern trend), verbal arts, as well as visits and attendance at various ceremonies.

Families will acknowledge the recently deceased during ceremonies of remembrance held on the eighth day (*nawotwe da*) after death with dancing and wearing of "funeral cloths." Other rituals take place forty (*adaduanan*) and eighty (*adadutwe*) days after death with an important ceremony one year later (*afehyia da*). Important ceremonies of remembrance are also regularly held in the community to celebrate not only those recently deceased but to honor all those who

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<sup>62</sup> Marleen de Witte, 27.

have died (owuofu). These take place every forty days (adae or kwasidae) with a major country-wide ceremony (odwira) held yearly.<sup>63</sup>

Another thing that is associated with Asante funeral is coffin. According to Rattray, coffins nowadays are quite common in Ghana. They have been used for centuries within many cultures. They are said to have been fashioned out of the great flat buttress roots of the “onyina,” ceiba petandra (silk cotton tree). When a coffin was used, the body was wrapped in mats. The use of the coffin in Asante is not a new concept as pointed out by Rattray.<sup>64</sup> It must also be stated that this funerary artefact is used for preservatory purpose within royal circles in Asante. In his own account, Rattray has this to say, “I had the privilege of being shown the coffins containing the skeletons of two of the Ashanti kings, Karikari and Mensa Bonsu.”<sup>65</sup> These are more sacred, perhaps, than the Golden Stool and its regalia, in the pursuit of which our blood and treasure had vainly been poured. Coffins used for the above purpose seem to be given so much veneration that one begins to feel the awe and reverence the Asante had for these relics. These are, therefore, not buried; they are rather kept in royal mausoleums. The sizes of the coffins used for this purpose are quite short, not more than four feet long, and hexagonal in shape. Rattray asserts the material of which they were made was covered with green silk, studded with gold disks or rosettes, with varying designs. Each of the coffins had seven disks on it.<sup>66</sup> It is, however, not known whether color plays an important role or not because earlier on, Rattray posits that the small coffins of hexagonal shape were covered with black velvet. The influence of western culture has given another dimension to the function of the coffin. It is now sometimes used as a substitute bed for laying the body in state.

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<sup>63</sup> Osei Kwadwo, (2002), 29.

<sup>64</sup> Rattray, R. S. *Religion and Arts in Ashanti* (London: Oxford University Press, 1927). 159.

<sup>65</sup> Ibid, 160.

<sup>66</sup> Rattray, 161.

Osei Kwadwo agrees that coffins are quite common in Asante culture. They were used throughout their history. Oral tradition suggests that in ancient times, hollowed-out tree trunks or barks of trees were the most common objects within which dead Ashanti bodies, wrapped in cotton wool, were placed before burial.<sup>67</sup> The current practice is that expensive, locally made coffins are used to bury the dead. In the case of wealthy individuals, coffins made of silver, brass, glass or like media are sometimes imported to befit the position and status of the deceased or to display the wealth of the living relatives. Customarily, it is the children of the deceased who purchase coffins in Asante. Sometimes, too, it is an organization to which the deceased belonged which provides the coffin. A more recent emerging trend in the Asante region is that neighborhood welfare groups (e.g. Koroye- kuo), in a show of love and unity to a departed colleague, offer to provide the coffin for the burial.

#### **1.4. Funerals as: a life celebration, social event and a sense of tradition**

Here I discuss succinctly the funeral celebration of the Asantes by giving a detailed account of how it is seen as a social event as well as a tradition. I will proceed to look at how individuals as well as institutions in various ways have criticized the flamboyant way Asante celebrate their funerals. The Asante spend huge sums of money on funerals which later may bring a financial burden to the family.

Asante (Ashantis) are traditional, strict observers of Akan culture and as they are noted, “they don` t do things by halves.” When Asante do things they do it to the fullest, hate it or like it; that is who they are. We are truly a people of culture and they are worthy ambassadors of rich

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<sup>67</sup> Osei Kwadwo, 54.

Akan culture and traditions because of their strict observance and cooperation during funerals to commemorate the deceased and the unique event that takes place after the burial.

The lavish funeral celebration has been building for several decades. Since 1940s<sup>68</sup> the trend of funeral celebration have been changing. The main reason for this has been modernity and influence of western culture. Hired canopies and eating of food, drinking and dancing are the order of the day. Marleen de Witte observes that in Asante funeral, “People dress up and travel to visit a funeral in another town or village. In turn, they expect the bereaved family to entertain them with show, music, dance, drinks and sometimes food.”<sup>69</sup> It must be stated that this new practice has led to the proliferation of canopy-hiring commercial ventures in the region. Close relatives of the deceased sit upon mats provided for that purpose in front of the sheds or canopies while the rest, well-wishers, sympathizers and friends, are provided with benches and or foldable wooden chairs. Plastic chairs are now largely in use at funeral grounds in the Asante region. Opportunities are provided for well-wishers, sympathizers and friends to express their sympathy monetarily. In this regard, male relatives take their positions at strategic points behind tables to receive donations for which receipts are issued. It is an almost obligatory practice to announce such donations at the funeral grounds for all present to hear. No tangible reasons have been assigned to these announcements as the donor is given a receipt to show acknowledgement of the donation. It is now a common phenomenon to see donors crowding at public address systems at funeral grounds waiting impatiently for their donations (they are given to the family to help defray some of the costs they may incur during the celebration of the funeral) to be announced. Formerly, only drinks were provided but now food is served to participants in the family house, or in cases where there are huge numbers of people to be served, other places, apart from the family houses, are sought

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<sup>68</sup> Marleen de Witte, 5.

<sup>69</sup> Ibid, 6.

within the vicinity. Sometimes, a catering service enterprise is contracted to prepare and serve the food.

Funerals and later ceremonies of remembrance are prescribed to follow established protocols of behavior and conduct in order to ensure their success as a rite of passage and as a “social event.” Funerals among the Asante have considerable communal prestige so that they are not only measured as ritual processes but also as public displays. The proper conduct of a funeral acknowledges established social and ritual protocols and must reflect appropriate artistic and aesthetic concerns so that ceremonies will not only be measured by their content, but could be equally compromised by not being well done.<sup>70</sup>

Like many cultures, Asante celebrate the transition of the soul of the deceased, into the ancestral world where it becomes a protective spirit for the clan. As a result the dead person is highly venerated through funeral celebrations. Family, friends and acquaintances, sometimes in hundreds, take part in the celebrations. The participants dress in accordance with tradition; the dress worn by relatives is in red while the others wear black cloth and every piece of gold jewelry their bodies can support. A notable celebration after one’s death is one week observance. Culturally, the main purposes for the one week celebration on the death of a person are:

1. To ascertain on the 8<sup>th</sup> day that the person is really dead.
2. To call all the family, living far and near to come and sympathize with family members.
3. To inform sympathizers about arrangements for the interment and final funeral rites of the deceased.

In past years, the observance was celebrated on a very low key without much fanfare. However, the nature of the celebration has changed over the years giving rise to the elaborate celebration.

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<sup>70</sup> Rattray R. S., 121.

The social component is acknowledged by Professor Kwabena Nketia, the great Ghanaian and international musicologist and living African traditional scholar writing in the 1950s concerning the unchanging, lavish display at Akans' funerals. He opines that,

the celebration of funeral is regarded as duty and no pains are spared to make it a memorable event. 'Was it well attended?' (Ayie no nkrofu bae?), 'Was it exciting?' (Ayie no soe?), [was there much to drink, was there much singing and music for dancing? Were the funary gifts for the deceased sufficient and did the family receive donations to defray the cost of the funeral?]. Those are the questions that may be asked as a test of successful funeral.<sup>71</sup>

A family's prestige is at risk if the local community did not think that appropriate efforts had been made to "send the dead off in style" or if those attending are not treated properly. Marleen de Witte affirms this when she writes,

"Since my first stay in Ghana in 1995 I have been fascinated by the great importance Asante attach to funerals. In the course of three subsequent stays in Asante I attended more than fifty funeral celebrations. Although every funeral was different and that of Agnes Ankobiah was classier than average, .. The elaborate funeral celebration during which no trouble or expenses are spared contrast sharply with the daily struggle for the primary necessities of life. ... [Funerals are] great public events, where families compete for prestige and respect by showing off wealth and publicly conforming to norms of solidarity and respect for the dead. Weeks or even months and millions of cedis are spent in organizing an event, which impresses everybody. A funeral, more than a wedding or any other ceremony, should be grand and successful."<sup>72</sup>

Those attending will also expect to be entertained with music, dancing, and refreshments to lighten the day.

Funerals still cause ambivalence. Their high cost and extravagance are frequently criticized in articles and letters in newspapers and in recent times the media, the speeches of politicians, and in sermons of priests/pastors.

Already since the 1940s there have been protest at the commercialization and the increasing expenditure of funerals. The commercialization of death has also evoked a fierce discussion in the media. It seems to be a tug-of-war between those who argue that funerals are

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<sup>71</sup> J. H. Kwabena. Nketia, 48.

<sup>72</sup> Marleen de Witte, 5.

contributing to the economy and those who say that funerals are only swallowing money badly needed for other purposes, like the improvement of the living conditions and socio-economic development.<sup>73</sup>

Many people morally reject wasting money on grand funerals while this money could also have been used to ease a person's living before death. Some also think that it has contributed greatly to the moral decadence of society. In his reaction to a social commentator, Nana Opresem's proposed funeral economy, Michael Dedey writes,

I do not in any way believe in Nana's proposed funeral economy and would like to ask him if he has thought about the following: the economic effects of people (skilled and unskilled labour) getting drunk at funerals and getting involved in motor accidents; the economic effect of hang-overs; the economic effect of spending too much on funerals when a lot of enterprising young people could be helped out of their misery with these funds; the economic effect of certain vices such as wife snatching, teenage pregnancy etc. [...] I have heard weird things in my time, but not economics that thrives on funerals.<sup>74</sup>

In fact, some traditional rulers have condemned it. A brief notice in the Ghanaian State-owned newspaper, Daily Graphic, on June 3, 1994, speaks of "expensive coffins, psychedelic funeral parlours, elaborate banquets, and display of extravagant items."<sup>75</sup> It also says that such funerals "are not meant to express grief but rather to show off." A related criticism is that families often spend more money on funerals than they do on the care of the elderly. De Witte affirms this, "In Ghana one sometimes gets impression that people care more about their dead than about the living."<sup>76</sup> In recent times, the situation has become so worrisome that the Archbishop of Kumasi, Most Rev. Thomas Kwaku Mensah (now Emeritus II) came out with guidelines regulating how Christians, especially Catholics, should celebrate their funerals. The said guidelines abolish the following: serving of food and drinks during one week, things arranged in a convoy ("adekyerede")

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<sup>73</sup> Marleen de Witte, 105.

<sup>74</sup> Ibid, 105-106.

<sup>75</sup> Funerals of the Asante, Graphic Online. <http://www.graphic.com.gh/>. Accessed, April 20, 2015.

<sup>76</sup> Marleen de Witte, 5.

for the burial during final funeral celebration, and change of clothing on the dead person. They also limit the duration for celebration and the venue.<sup>77</sup>

The discussion in the media mainly seems to revolve around the question of whether funerals are useful or wasteful, economically. Some people argue that funerals contribute immensely to the economy. Nana Opresem is quoted to have stressed the economic importance of funerals in an article in one of the State owned newspapers, *The Mirror* (1995): “Funerals make the economic wheel-revolve – the breweries, the butchers, the foodstuff sellers, the transporters and others all benefit.”<sup>78</sup> Again one Arhin<sup>79</sup> is quoted to have argued that funerals are the backbone of the economy. “Contrary to popular impressions and to the views of Ashanti, the transformations in the rites support certain industries and stimulate new services.”<sup>80</sup> He asserts that “the increase in the quality and scale of funeral rites has stimulated the carpentry, brewing, distilling and paint trades, and has promoted such service industries as those of the mortician (a Ghanaian version of the undertaker), the suppliers of canopies and seats, and music and dance or cultural groups”<sup>81</sup> and he makes an emphatic statement that “economically they are useful.”<sup>82</sup>

Archbishop Emeritus I, Peter Kwasi Sarpong, the former Catholic Archbishop of Kumasi, also disagrees with the assertion that the Asante don't take care of the elderly but rather waste money on funerals. He contends that Asante don't agree to this assertion. According to him it is a perception other people have about the Asante. He explains that it looks as if they don't take good care of their father, mother, uncle, other relatives etc, but when the person is dead there is concentration on the dead person which makes it seem as though they pay more attention to the

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<sup>77</sup> Catholic Archdiocese of Kumasi. *Funeral Regulations* (Kumasi: Kumasi Catholic Press, 2011). 5-6.

<sup>78</sup> Marleen de Witte, 105.

<sup>79</sup> Arhin is one of the several people Marleen de Witte interviewed when she went to Ghana to do her Anthropological studies Ghana in the 1990s.

<sup>80</sup> Marleen de Witte, 106.

<sup>81</sup> Ibid, 106.

<sup>82</sup> Ibid, 106.



dead than the living. He notes that in the Asante culture there is tension between the dead person and the spirit, so the money and other things spent during funerals are not for the dead person but the spirit which is going to travel.

In justifying why Asante spend money on funerals he argues that “the Asante spend money on funerals because they have different conception of life.”<sup>83</sup> This conception is based on their belief in the human person. This is how it is categorized:

- a. The first is the unborn life
- b. The life of the living
- c. The life of the dead

He argues here that when the person is alive, they will do everything for the person to ensure his or her well-being but when the person also dies they do a lot of customs for the person. All the activities are meant to usher the dead person into the life of the ancestors.

Many other Asante people argue that the Asante funerals are not necessarily about the dead. They believe that it is an occasion for families and the whole societies to come together to reflect on the meaning of life through the evaluation of the life of some dead persons. For them, it is an important occasion for families and friends to take stock of their lives and also show love for, and gratitude to friends. They argue that it is an insult to Asante to suggest that the monies spent on such occasions are a waste of resources when we don't seem to be concerned about similar behaviors at weddings and outdooring, and even in decorating houses.

Whatever may be the criticism, Asante still perform their funerals in the manner they deem fit. Buses and domestic air-line travels to Kumasi on the weekends are a sight to behold! According to the April 20, 2014 edition of Daily Graphic, when Asantehene put a temporary ban on funerals

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<sup>83</sup> Interview with Sarpong.

in Kumasi, Ashanti Regional capital, the patronage of domestic airline services, dropped over “the past two months” thereby affecting “revenues of the domestic air traffic of the six airlines operating domestic air services in and out of the region.”<sup>84</sup> Kumasi is the biggest market for airline operators and currently accounts for about 50 percent of their passengers. The Chief Executive Officer of Starbow, Mr. James Eric Antwi, confirmed in an interview with Graphic Business on April 20 that the ban had led to a reduction in the number of people his outfit flies on a weekly basis. “The numbers in our weekend flights have dropped. Mostly, the funeral travelers go on Friday and return on Sunday or Monday but that is no longer the case because of that ban on funerals in Kumasi,”<sup>85</sup> he said in an exclusive interview. The fact that funerals reduced the revenue of the operators is a clear indication that the Asante do not take their funeral as a joke.

Whether the funeral celebration of the Asante has economic benefit or not, it is believed that there must be a second look at the way money and other resources are splashed on funerals. This is in sharp contrast with the way the elderly are taken care of among the Asante (and Ghana as a whole).

### **1.5. Costly Funeral**

When a loved one dies, grieving family members and friends often are confronted with dozens of decisions about the funeral – all of which must be made quickly and often under great emotional duress. In the days following the loss of a loved one, funeral planning can add an extra burden to the already fragile griever. Not to mention the stress that comes from having to make a myriad of important decisions within a short period of time. What kind of funeral should it be? What funeral provider should you use? How should you bury the body? What are you legally required to buy?

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<sup>84</sup> Daily Graphic, State owned News Paper (Ghana). April 20, 2014.

<sup>85</sup> Ibid.

What about the availability of environmentally friendly? What other arrangements should you plan? And, practically, how much is it all going to cost? And then there's the shock of cost.

According to most sources, the cost of a funeral is one of the three or four most expensive consumer purchases. Traditional Funerals can cost upwards of GhC31,000 to GhC50,000 (\$8,000 to \$12,000). It is not exaggeration to admit that those from affluent families may spend close to GhC100,000 (\$26136.38) or even more. In writing about services in the funeral industry at Kumasi, de Witte, writes about her experience with Auntie Amoanimae, a professional and an experienced body decorator, "For the decoration of a paramount chief I ask C1,000,000 (\$258.25), for a normal person C250,000 to C300,000 [\$64.56 to 77.47]. The price is always discussed with the family and depends on how they want it."<sup>86</sup> This is the amount of money spent only on decorations.

In another development, my interview with Kofi Aboagye<sup>87</sup> about the prices of coffin in Kumasi, the home of the Asante, reveals that coffins are very costly. Kumasi is known as the center of the coffin business. A lot of carpenters specializing in coffins are concentrated in Antoa road and Fante New Town, suburbs of Kumasi . Aboagye reveals that most of the coffins on sale there cost between GhC15000 (\$387.37) to GhC20,000 (\$516.50), annually. To some people this may not be much money but if you take into account that the average household income in Ghana is just GhC1000 (\$258.10), then you can see how much impact this has on families in Ghana. A classy coffin averages between GhC4000 (\$1032.99) to GhC5,000 (\$1291.24), a year's salary for some people. The above quoted figures may seem exaggerated but the fact remains that the well-to-do families have no problem spending such monies on their relatives' funerals. If these huge

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<sup>86</sup> Marleen de Witte, 108.

<sup>87</sup> Kofi Aboagye is a 41 year old young man in the coffin industry. He has been in the business for the past thirteen years. He has a very big coffin industry in Kumasi Antoa road with many apprentices. This interview was conducted on March 11, 2016.

amount of monies can be thrown on decorations, coffins and music alone while people die of hunger, then there are a lot of ethical questions that need to be raised.

Currently, the average funeral in Ghana costs anywhere from Gh¢15,000 to Gh¢20,000. This range may include casket or coffin, food, hard and soft drinks, water, hiring of canopies, hiring of chairs, Ambulance to carry the dead body, various kinds of family clothes, invitation cards, invitation letters, brochures, wreaths, video, music or drumming group and many others. It must be kept in mind that prices may vary greatly, depending on the family. Other costs incurred could include T-shirts, headscarves, buttons, calendars, mugs, the fee for placing an obituary advertisement in the newspapers and flowers, keeping the body in a mortuary for months, preparation and decoration of the body, and the place for the burial.

When my own mother passed away about four years ago, I had to be firm with my mother's family before I was able to beat the cost down to about Gh¢12,500 (\$3180.17). The initial budget presented to me by the *abusua panin* (family head) for the organization of the funeral was Gh¢20,000 (\$5248.26). I felt that some of the things mentioned in the budget were not necessary and must not be included. This did not go down well with the elders as they were of the view that tradition demands that those things must be done. In fact it became a very serious issue when the elders of the family were not in any way ready to accept the proposal of my siblings and me. At the end I prevailed. To buttress this point, The 'Goodsherphed' Publisher, Simon Baidoo, who is also a friend to me, informed me that he used about Gh¢31,000 (\$8005.70) to organize his father's funeral in 2014. If people from a poor country like Ghana, where majority of the people find it difficult to afford one square meal a day, can spend about C8,000.00 to C10,000.00, and even more on funeral, then there is a cause to worry. Indeed, if people from a third world country, where the

majority of the people lack what would be considered as essentials (food, water, shelter etc.) spend such money, then ethically, there is something fundamentally wrong.

de Witte also affirms the expensive nature of Asante funerals:

With the growth of all those small services and businesses engaging in death, funerals have become extremely costly. Funeral societies described in the previous chapter have come to play an important part in the financing of grand funerals, a form of funeral insurance. But not everybody takes part in such a collective saving programme. When bereaved families don't have the money required for the funeral they intend to organize and have difficulties raising funds from well-to-do friends or acquaintances, some banks grant them 'funeral loans' to pay for the expenses. ... The head of the family and another person are also required to stand as surety. Interest on the loan is 5 percent at the Nwabiagya Rural Banks (1994:320). So not only individuals who run small businesses, but also larger companies like banks profit from the Asante funeral obsession.<sup>88</sup>

This is outrageous. The reason is that most of the families end up incurring debt bringing additional burden to the family. Life cannot continue this way. The elders deserve something better, a life of respect and dignity. Funerals definitely don't have to be so expensive, and there's no reason to believe that paying so much for a funeral is somehow a sign of love for the departed. Pragmatic measures should be taken to discourage this habit and that is what this thesis seeks to achieve.

The truth is that funeral costs is in sharp contrast with the reality of people living in abject poverty. If one decides to spend time visiting rural Ghana, across the length and breadth of the country, the person will be shocked to the marrow at the extent of poverty in Ghana. There is extreme poverty everywhere in rural Ghana. The level of poverty in those places is an unacceptable human condition that needs to be addressed at all cost. This does not mean that there is no poverty in the cities and urban areas. In all the ten regions in the country, one will find a lot of people living in abject poverty in the urban areas. For instance, "Nima" which is at the center of the capital, Accra, is inhabited by people living in abject poverty.

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<sup>88</sup> Marleen de Witte, 125.

Their level of poverty is characterized by a lack of access to essential goods and services, such as good food, good drinking water, shelter, and social amenities to which every human being is entitled. Most of the people are hungry and cannot afford even one square meal a day.

Ben Ofosu-Appiah, writing on poverty in Ghana states,

Majority of people living in rural Ghana fit into the World Bank's classification of extreme poverty. Extreme poverty defined by the World Bank as getting by on an income of less than \$1.25 a day, means that households cannot meet basic needs for survival. They are chronically hungry, unable to get health care, lack safe drinking water and sanitation, cannot afford education for their children and perhaps lack rudimentary shelter- a roof to keep rain out of the hut- and basic articles of clothing like shoes.<sup>89</sup>

In Ghana today people live on less than \$1.25 a day which the World Bank defines as abject poverty. According to Ghana Statistical Services there are people who do not have Gh¢2.17 (0.56 US cent) per day which is less than US \$1.<sup>90</sup> There are many others who get nothing at all.

Nowhere is this trend so acute as in Northern Ghana, made up of three regions. Poverty rates in the north are two to three times higher than the national average, and chronic food insecurity remains a critical challenge there. "In the Upper East Region, nearly thirty percent of people do not have adequate access to food, compared to a national average of five percent."<sup>91</sup> My experience in northern Ghana, at "Tatale" to be precise, was an eye sore. Many people live in real poverty. Children travel many miles in order to have access to life essentials like education, food and drinking water. Some of the students I taught in school had to sacrifice their classes to work in peoples' farm or sell in the market in order to get money for their daily expenses. A good number of them had to turn into potters (carry items on their heads for money) during market days to be

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<sup>89</sup> Ben Ofosu-Appiah, "Why Ghana is Worse in Poverty." Ghanaweb.

[Http://www.ghanaweb.com/GhanaHomePage/features/artikel.php?ID=217354](http://www.ghanaweb.com/GhanaHomePage/features/artikel.php?ID=217354). Accessed, March 23, 2016.

<sup>90</sup> Poverty in Ghana (Video) – My Joy News Interactive (27-8-14). Published in (27-8-2014) by Myjoyonline. [http://purelocal.com/Video.aspx?videoid=7remGisp2aw&slk=poverty+in+ghana&cid=10270421034&kwid=21128695186&akwd=poverty+in+ghana&uq=un+records+poverty+in+ghana&nid=2&term=poverty\\_in\\_ghana&vx=0](http://purelocal.com/Video.aspx?videoid=7remGisp2aw&slk=poverty+in+ghana&cid=10270421034&kwid=21128695186&akwd=poverty+in+ghana&uq=un+records+poverty+in+ghana&nid=2&term=poverty_in_ghana&vx=0). Accessed, March 23, 2016.

<sup>91</sup> World Foods Program. Ghana: Current issues and what the world food program is doing. [Http://www.wfp.org/countries/Ghana](http://www.wfp.org/countries/Ghana). Accessed, March 23, 2016.

able to pay for their school fees. Though poverty is a world-wide phenomenon, many countries provide practical measures designed to reduce its intensity, yet successive governments in Ghana show no sign of helping, let alone coming to terms with what has caused so much hard pinching poverty over the years, or finding ways to remove such causes.

This kind of situation is driving youth migration into the cities and fueling lawlessness and violence, armed robbery, corruption, economic crisis, high inflation, and unemployment.

## **2.0. End-of-Life (EoL) situation in Ghana**

### **2.1. The Problem**

At the end of life, each story is different. Death comes suddenly, or a person lingers, gradually failing. For some older people, the body weakens while the mind stays alert. Others remain physically strong, and cognitive losses take a huge toll. But for everyone, death is inevitable, and each loss is personally felt by those close to the one who has died. The question then is how must one die? How do we take care of the elderly to ensure that they die with dignity?

Throughout the ages, people have sought a “good death” in which they are physically as comfortable as possible, are treated with compassion and respect, and find closure in their lives. In Ghana today, this quest remains elusive. Improving care at the end of life is particularly important in light of ongoing public discussions about managed care and physician-assisted suicide.

End of life (EoL) care in sub-Saharan Africa still lacks the sound evidence-base needed for the development of effective, appropriate service provision. End of life (EoL) care is an important public health concern predominantly due to the large number of people it affects.

In the United States of America there is a system of taking care of the elderly people that, in one way, does not allow them to be left without help or contact with other people. They have for example the hospice service, nursing homes and palliative care services. The situation in Ghana is different. In Ghana, there are no established palliative care services. There is absolutely no care for the dying among the Asante. In Africa, few countries like Mali, Uganda, Kenya, and Zimbabwe have made some efforts and continue to seek ways to improve the living conditions of the aged. Because of that many elderly people in Africa find themselves in very bad situations when approaching death and have nobody to take care of them.

In the absence of formal structures, individuals in Ghana have begun to incorporate palliative care principles into home-based care projects with AIDS and cancer patients. In Africa, and Ghana in particular, older people are among the poorest in every society, they are often abandoned, isolated, abused and subjugated by those members of society and institutions upon whom they must depend. Many elderly people feel lonely and abandoned by society and their own families, since parents and children do not necessarily live at the same place nowadays.

The breakdown of the extended family system in Africa (and among the Asante in Ghana in particular) has exploded the myth that older people would be looked after by their children or relatives, adding that, regrettably government, development agencies and donors also marginalize older people. There is a lot that the Government of Ghana needs to be working on to create an



environment through which the public, the private sector and other stakeholders would be positioned to care for older people in Ghana. This will ensure the security of the elderly people.

The elderly are faced with many more complications in life. Some family members accuse the elderly of being responsible for suffering, death, barrenness, disease and sickness in the family. Growing as an Asante child, I have seen and experienced most elderly people dying miserably. In the course of my priesthood I have come across many deplorable situations which can be described as inhuman. I have experienced dying persons in their homes, dying in squalor, hungry with nobody to look after them. The conditions of the elderly I have experienced are better described as a deprivation of humanity of these elders. There have been cases where I met people with Guinea worms sticking out of their legs.

In my five years as a priest in Ghana, I experienced many people dying in a very bad and sad condition. There were people who had not bathed for months; who died with hunger; who have wallowed in their own excreta; in going round for communion to the sick, I saw that some of these elderly people have nobody to care for them; an elderly person with a wrinkled face is accused as a witch or wizard. As a result, children and other family members abandon them. People who move abroad forget about their parents and other elderly family members. My experience with some elderly people at many places has had a terrible influence even on my psyche.

I cannot leave out the conditions of inmates of hospitals and in individual homes. I have had terrible experiences of witnessing human misery which makes me doubt whether the biblical truth that God created us all in his image and likeness can be applicable to them. This personal experience I'm skimming through has been gathered from such places as Tatale in the north, Offinso, Obuasi, Mampong, Kumasi, even Accra, the capital of Ghana and many other places. The

stark poverty in the sub-continent in Africa and especially Ghana simply defies description. In these places the severity of the cases is only matched by their incredible multitude.

Traditionally, “we have ways of dealing with patients, depending upon the kind of cause we attribute to their condition. Family members are supposed to do all they can to reverse the terminality of the illness by applying the appropriate spiritual, psychical or physical remedy. The proverb always applies: “When one has helped you to cut your teeth, you help him or her to lose his or her teeth.” “One does not and cannot abandon a patient just when such a person needs the attention, the affection, the care and the love of the strong and healthy.”<sup>92</sup>

I buried an aunt on the 16<sup>th</sup> of December about three years ago. My elder brother, who is also a pastor in one of the charismatic churches, paying tribute to the old lady, described her as having suffered a lot in the last six months of her life. This old lady, my grandmother’s uncle’s daughter, was at least 79 years old. She had had a terrible fracture of the thigh and was immobilized. She was, contrary to all cultural expectations, totally neglected by her younger relatives who regarded her with contempt because of her childlessness. My brother and I had to put our heads together to find ways and means of helping our poor great aunt. We could not take her to the hospital for various practical and logistical reasons. But when we decided to get a kind of chaperone for her, then her grand nieces felt totally humiliated, and took on the challenge themselves. We had to pay them all the same.

There is no system in society to take care of the old people. The family is mainly responsible for taking care of the elderly family members, but most families are not able to support the old person. Naturally this affects the perception of their life situation. They might not feel

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<sup>92</sup> Interview with Peter Kwasi Sarpong.

important and valued, and sometimes they might even consider themselves a burden on society and on their own families.

## **2.2. Causes of the problem**

The responsibility of elderly care is still on the family and the public elderly care has not developed in Ghana. In most parts of Africa, people have forgotten how to treat their elderly with dignity. There are a number of causes that account for this. Most often, the older folk are considered witches/wizards and it's sometimes said that their sins are haunting them. Some believe that these elders are the cause of their problems such as barrenness, sicknesses, unemployment and many others. The situation has made them think that the closer they get to these elders the heavier their problems are aggravated.

At their old age people find themselves to have outlived their usefulness and they feel in that condition it is better for them to die. Additionally and honestly, some families feel that they can't get somebody sitting beside one person and it is better for him/her to die. They feel that it is a waste of time to care for the elderly while neglecting other important economic and social aspects of their lives.

One of the main causes of this problem is the economic reason. The bad social and economic situation of the country has really changed the beautiful cultural values and traditions I discussed in Chapter One, as regards relationships with the elders and families in general. Children and family members of most of these elders are migrating to urban cities and foreign countries to seek greener pastures. As a result, most elders are abandoned in family homes with nobody to care for them.

Another problem which has not received much attention is the change of priorities by some NGOs in Ghana. NGOs such as USAID, SendGhana, Rotary Club, Access MedCare Ghana, Alliance International, and many others which used to take care of the elderly are now shifting their attention to people who have been infected with HIV/AIDS leaving the elders at the mercy of the sun. The thing is, when many young people are dying due to AIDS and poverty in general, the social network that has traditionally supported old people is being disrupted. Few NGOs still take care of some elderly people, but this is woefully inadequate, because fewer resources are channeled towards care of the many elderly people.

Poverty is another strong factor which has contributed immensely to the deplorable nature of the elders. Most elderly before old age were not working but the few who worked, their retirement salaries cannot even afford them three square meals a day. This has resulted in their predicaments coupled with diseases and suffering. World Health Organization (WHO) says, poverty is the “world’s most ruthless killer and the greatest cause of disease and suffering.”<sup>93</sup> Old age is the most difficult period in Ghana and Africa in general, because most people don’t earn enough money to keep some aside for retirement. Some old people are often reduced to beggars, unlike in the developed world, where the material development and social welfare are given to all citizens equally and the elders have their fair share. The issue of dignity will continue to be far removed from old people, unless Ghanaian and African governments develop good Social Security policies.

Governments should have the primary duty and responsibility to maintain dignity and safety of our elders. However, the moral fiber of our politicians cannot move them to take care of their younger citizens, let alone the old folks who are considered a liability to society.

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<sup>93</sup> Daniel Daly, “Unreasonable Means: Proposing A New Category for Catholic End-of-Life Ethics,” *Journal National of Christian Bioethics* (April 2013), <http://cb.oxfordjournals.org/content/19/1/40.full.pdf>, 46.

Today the elders face this reality because of unfair healthcare structure and politics – these unjust structures have distributed medical resources discriminately. For instance, in Ghana the Ashanti Region which is considered the home base of the opposition New Patriotic Party, has been using the National Health Insurance (NHIS) on a parrotting basis for the past seven (7) years with much stricter regulations on accessibility and benefits; however, the rest of the nine regions in the same country have a less regulated Health Insurance system. No one knows the reasons why of all the ten (10) regions, only Ashanti Region is using it on a parrotting basis for so long. People perceive that this is politically motivated because Ashanti region is the strong hold of the biggest opposition party. The various hospitals have complained many times about the bad policy which is not helping the people and complaints have fallen on deaf ears. This has led most of the private hospitals which account for the greater number of hospitals in the region to reject the NHIS. The few government hospitals which could have solved their problems do not have enough resources. People do not have faith in these government hospitals anymore.

Widow inheritance is another practice adding to the problem. There is a belief among some communities that women are to be seen and not to be heard. This has made women susceptible to many challenges. If a married man dies, a brother or clansman is selected by the clan elders to marry the wife of the deceased. During the funeral, clan elders are often the only people who speak, confirming the cause of death and taking decisions on the future of the bereaved family. After the funeral, the family and the clansmen hold a meeting during which the widow is inherited. The clan does not allow the widow to choose the man who will inherit her. She and the wife of the selected brother or clansman have no say in this matter. This cultural belief in subordination of women has exposed many and especially women to problems. Since those who marry them may be having one or two wives already the third wife is left without care. Most of them die miserably.

Polygamy, according to Miss Cynthia Afenyo<sup>94</sup> “is a major factor that has contributed greatly to the problem of the elderly”<sup>95</sup> in Ghana. In Ghana and Africa in general, polygamy is a social practice used to ensure the continued status and survival of widows and orphans within an established family structure.<sup>96</sup> In Ghana polygamy has been part of customary marriage. When a man is encouraged to take a second or third wife, he does not need the consent of his wife to marry another wife. This is an issue of injustice. Some of them refuse to take good care of their many wives. And because they have many wives, they don’t care what happens to them.

Women throughout Ghana and Africa do much more than their share of the work in many spheres of daily life. They maintain households, fetch firewood and water, work the fields, sell goods in the marketplace, and more. And yet the irony is that this work remains so invisible and undervalued that ethical issues at the end of life care of the elderly still seems appropriate in a thesis such as this. In the workplace, women often face discrimination, harassment and exploitation. Politically, they face little representation and are often marginalized. In most African countries, women’s rights are not entrenched into constitutions, nor are they implemented in practice. The judicial system often favors men over women and will often attempt to buy the silence of victims of rape and their families. Socially, women sometimes face rape and violence within marriage, but in most African countries, this isn’t recognized as an offense. Women also face contracting HIV/AIDS from their partners who may refuse to use any form of protection.

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<sup>94</sup>Cynthia Afenyo is the chairperson of Central Youth Group, a Community Based Organization (CBO). She was speaking at an HIV/AIDS workshop organized by the CBO for the Moslem community at Gomoa Ankamu near Apam in the Central Region. The workshop, which was sponsored by the Ghana AIDS Commission, was on the causes and prevention of the deadly disease.

<sup>95</sup> Cynthia Afenyo, Polygamy a Major Factor in the HIV/AIDS Spread. [www.ghanaweb.com](http://www.ghanaweb.com).

<sup>96</sup> Emma Day and Allan Maleche, “Traditional Cultural practices and HIV: Reconciling Culture and Human Rights.” [www.hiv/commission.org/index.php/working-papera?task=document.view&id=02](http://www.hiv/commission.org/index.php/working-papera?task=document.view&id=02).

Culturally, practices such as female genital mutilation are still being practiced which casts a dent on our person and culture.

These and many other reasons are the causes of the poor care of the elderly in Ghana. Some are cultural practices. Among them is the role of Ghanaian women. They are cultural issues that diminish humanity that put women at significant disadvantage, and above all, as essentially under the control of men. These are issues of injustice. Every effort must be made to curtail these causes in order to help the elders in Ghana die in a dignified manner.

### **2.3. Ethical Concerns**

There are serious ethical issues that are confronting us today as far as Asante elderly care concerned. The stubborn persistence of deplorable nature raises what are perhaps the most burning ethical questions of our age. What obligations do we have with respect to those elderly who are suffering? What measures can we take? In the world of the elderly, ethical issues have an even greater significance because they usually involve an elder who is likely to be more vulnerable than the average adult.

For that reason, in many ways the elderly are taken advantage of by people in whom they have placed their trust. They live in deplorable conditions, left in farm huts to face starvation and worst of all are left in poverty to look after their grandchildren, whilst our leaders' bank accounts are swelling in Swiss banks. Some elders find it difficult to take their shower, some are dying of various kinds of diseases without Medicare, others are being starved, they are seen as witches and wizards in the family and as a result they are being abandoned and die in very pathetic manners. The situation of the Asante elderly is unnatural and morally indefensible. This situation has cast doubt whether Asante elders can die with dignity. This raises the question of whether the rich

people in the family and the society in general have a moral obligation to aid those poor elders. What is the impact of the elderly on individuals, households, and the nation? Are we causally responsible for (some of) their suffering?

These and many other ethical issues call for attention. According to Catholic tradition, allowing someone to die in this situation does not only violate the natural and divine law written in the heart of every person, but it outrages the noblest instinct of humanity. Life is understood as a gift of God<sup>97</sup> and no one should sit unconcerned when a neighbor is dying of hunger. There is the need to pay critical attention to these realities. All human beings have dignity deserving of respect and are entitled to what is necessary to live in dignity, including a right to life and a right to the goods necessary to satisfy one's basic needs. Freeing humanity from their predicaments is a moral obligation that weighs on us more and more heavily as our capabilities and technologies advance.

In my opinion, in order to reduce these problems confronting Asante elderly and many elders in Ghana, there is the need to pay attention to human dignity, common good and solidarity as enunciated in the Catholic Social Teachings (CST). These are the frameworks that form my ethical visions for this work. In the next final chapter of this thesis, I intend to propose an ethical and theological framework in which I will discuss ethical issues that are likely to arise and the means to deal with ethical dilemmas involving the elderly and those who provide eldercare, whether professionals or family members. As important as the above principles are, surely the ultimate foundation and underpinning of all ethical frameworks or models must be respect for the sanctity of life.

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<sup>97</sup> Lisa Sowle Cahill, *Lectures: Reflections on Week 2 Readings* (Death and Dying I: Care for the Terminally Ill and Permitting to Die), Boston College, Spring 2015.



## CHAPTER 3

### PROPOSAL FOR ETHICAL AND THEOLOGICAL VISION

#### Introduction

Drawing upon the content of classroom discussions in my two years of graduate study at Boston College, scholarly works from scholars and Professors, and other sources from academia, I discuss theological and ethical vision as a model for funeral celebration and also how to take care of the elderly. It will be based on human dignity, social justice, solidarity, the theological virtue of charity and then communicate that death is a passage to resurrection and not an occasion of lavish display. Hospice and palliative care will be dealt with as modern models that can be used for the care of the elderly.

As explored in the previous chapter, indeed, it is a fact that culturally Asantes have always paid the greatest respect to the dead and will do everything to accord the highest honor for the dead. This is commendable. Notwithstanding, this last respect to the dead is gradually becoming a financial burden to the bereaved family. This is simply because certain practices which culturally and theologically are at variance with the typical Asante sentiments are becoming part of funeral celebrations. A typical example is the elaborate serving of food and drinks, lavish coffin for the dead, expensive decorations etc. They tend to spend more money on funerals than they do on care for the elderly. They take better care of the dead than of the living. Their love and care for the dead body is unbelievable. This finds its concrete expression in their adage: “Abusua do funu” (The family loves the corpse). This attitude does not allow them to pay critical attention to the good aspects of their loved ones when they are bed-ridden. This chapter seeks to correct this attitude by making proposals to that effect.

### **1.1. What the Caregiver must know (Situations)**

Practical cultural imperatives and expectations apart, it is important that on the more objective level, persons taking care of a patient are aware of what the sick or the dying person is going through so as to know how best to assist them through it. We can think of three situations:

- (a) Where the patient is kept at home. Here the patient is expected to enjoy the natural love and attention of beloved ones. This helps in soothing the patient but the disadvantage is the possible lack of medical competence.
- (b) Where the patient is in the hospital. Here the danger is that whilst medical competence may be expected, the personal touch could be lacking. The patient is regarded as a 'case.'
- (c) Where the patient is in a hospice. Normally a hospice would try to combine the advantages of both the home and the hospital: affection with medical expertise.

The pressures of the modern world, therefore, would indicate that we think more and more of the hospice care these days. But hospice care should be care with a human face and not the type of care provided in the so-called Old People's Home in a township in the Ashanti Region where conditions are simply deplorable.

### **1.2. Loss**

It must be noted that at their old age, the elders go through terminal changes, they go through processes of grief, and this is important to note in caring for them. Whatever the case, it should be noted that when there is a *loss*, *grief* work is necessary for emotional healing.<sup>98</sup> Terminal change in life is a form of loss. Here, *acceptance* and *support* of the patient are crucial to facilitating the

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<sup>98</sup> Melissa Kelley, *Lecture notes (Death and Dying)*. Boston College, Spring 2015.

grieving process. It should also be noted that grief is a subjective response to the loss of something<sup>99</sup> or someone of personal significance. It is a response that may impair the ability to function. This may occur when a person has been diagnosed with an incurable illness (for example cancer) or has endured a protracted illness and death seems inevitable.<sup>100</sup>

Here, it is commendable that families become aware of the six (6) categories of loss proposed by Mitchell and Anderson. Their proposal encompass of kind of loss the elderly may experience as they approach death.<sup>101</sup> They are:

1. Material loss-This is whereby one loses his/her property such as housing, car, and other material things. Most people have strong attachment to material thing they may love most and when such a thing is lost, it's very painful. People who have experienced material value find it difficult to replace what they have lost. Mitchell et al argues that "Those who replace lost material objects often conclude that the replacement is never quite the same as the original, even when by objective standards it is better in quality or cost. more."<sup>102</sup>

2. Relationship loss- Loss can come in many forms. "It may be a loss related to moving, divorce, job change, or change in personal friendship."<sup>103</sup> We can lose it to death. Losing a relative has been described as the worst kind of loss anyone could possibly go through, a searing and unspeakable pain. Losing someone you love can be like losing one half of yourself. It is an experience everyone goes through. For those dying they may feel they are losing the relationships with those left behind. The pain and emptiness felt during the grieving process can go on for months or years. It must however, be noted that no two people will ever respond to the same

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<sup>99</sup> Melissa Kelley.

<sup>100</sup> Ibid.

<sup>101</sup> Kenneth R. Mitchell et al, All our Losses, All our Grievs. Philadelphia, PA: The Westminster Press, 1983, 38-46.

<sup>102</sup> Ibid, 36.

<sup>103</sup> Ibid, 37.

situation in the same way. The emotions that accompany a loss of this magnitude is unthinkable. In such situations, a part of one self is cut off.

3. Intrapyschic loss- It is forgoing of a person's plan for the future. It is a loss which occurs within one's own sense of identity, hopes, dreams etc. These category of people feel that they are losing something important they might have achieved in the future such as building a mansion, becoming a professor and so on. "Although often related to external experiences, it is itself an entirely inward experience."<sup>104</sup> One feels that the world has come to an end. Anyone who has lost a parent, spouse, child or close friend knows the intense sense of loss and emotional pain that is a natural part of the grieving process. Such experiences make a person feel they losing all that will make his/her dreams be fulfilled.

4. Functional Loss-It occurs when one loses "some muscular or neurological functions of the body."<sup>105</sup> Physical responses are expected when a person loses the body physically, for instance aging, stroke etc. At functional loss one may lose his/her autonomy and cannot do anything of him/herself. The person may need assistance from others. For Mitchell et al, "loss is horrifying to young and old. Going blind at seventy-five is no less painful than going blind at fifteen even if it does happen more often."<sup>106</sup> This buttresses the argument that no matter the age of the Asante elderly, they need to be taken good care of.

4. Role Loss- Losing a role can mean losing work, performing, job, social status. For instance when one is laid off or fired from job. Losing a job is never easy, one faces an imminent loss of income, not to mention health insurance and other benefits. And because job searches often take

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<sup>104</sup> Kenneth R. Mitchell et al, 40.

<sup>105</sup> Ibid, 41.

<sup>106</sup> Ibid, 109.

several months, one may go through a period of unemployment. One may feel that he/she has lost a status in the community or society. All these situations may lead to loss and grief.

5. Systemic loss – It comes with many forms; a loss of a whole system—a family, community, society may go through loss. Losing a loved one can result in social loss including those of friendships and family relationships. Neighborhood too can experience systemic loss after people's home have been destroyed completely and they have to turn refugees. The whole community can be traumatized. In cases where a family member dies, the loss of family structure requires painful readjustment. Not only does the family grieve the personality lost, but the role that person played within the family. The dying person may feel he/she is losing his/her system, group, or community.

These are important areas that families need to pay attention to when taking care of the elderly. They provide the platform for families to love and care for the elderly.

### **1. 3. Stages of the Dying Patient (elderly)**

As death approaches, the patient may go through stages to cope with it. Elizabeth Kubler-Ross outlined five stages patients may experience as they approach death. Kubler-Ross' stage model has influenced the theories of dying for more than four decades.<sup>107</sup> These stages may differ from one individual to another.<sup>108</sup> They are not necessarily in any particular sequence and it is helpful for us to think of them as suggestive rather than prescriptive. They may be grouped as follows:

1. There is *denial* which serves a dual purpose. It establishes a protective barrier because the reality is too harsh to face and it helps patients to mobilize other coping strategies. The denial

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<sup>107</sup> Judith M. Stillion and Thomas Attig (eds.), *Death, Dying and Bereavement: Contemporary Perspectives, Institutions, and Practices*. (New York, Springer Publishing Company, 2015), 93.

<sup>108</sup> Marian Carter, *Dying to Live: A Theological and Practical Workbook on Death, Dying and Bereavement*. (Golden Lane: London, SCM Press, 2014), 76.

may manifest itself as an unwillingness to acknowledge symptoms, or non-compliance with treatment or medication, or refusal to discuss illness-related matters. It is very important that the denial is acknowledged and not challenged.

2. A common trait is *anger*, which may be self-directed but often targets others. Anger is more likely the result of the perception of a loss of control. The persons around the patient should take care not to let him or her feel helpless or useless or of little value because he or she is dying.
3. Then there is the stage of *bargaining*. This commonly involves the patient making a kind of secret pact with God or a spiritual overlord. “If you heal me, I will do this or that” or “If I get better, I will never do this or that again.” This is only an attempt to postpone the inevitable.
4. There is also the stage of *depression*, which is not quite the same as the typical mood disorders. The common emotions are complex and more varied. There can be feelings of loneliness, sorrow, fear of the unknown, fear of dying alone, loss of self-control, fear of more intense pain and suffering and sometimes regression and dependence.

The last may consist in excessive demands by the patient to have things done for him or her. This could be accompanied by refusal to do very simple tasks or self-care things that patients can do for themselves and sometimes behaving in ways well beneath their maturity and chronological age. This is a cry for help.

5. Then comes the time of *acceptance* when the patient experiences a sense of closure. There is a kind of feeling more resolved or even relaxed. Some experience peace or resignation to their

fate. They may wish to be left alone and may become less involved with others. They talk less.<sup>109</sup>

It is an undeniable fact that understanding the losses attached to dying as well as the dying process itself can foster empathy in others.

#### **1.4. Response of the Health Professionals**

How do we respond to the condition of the patient? What can be the proper care of patients? What can those around them do to help? There is obviously no blueprint for such a care. Much will depend on the patients themselves, but some form of action from outside is also indicated. Whether one is a nurse, a chaplain, a social worker, a volunteer, a friend, one should not decide for the patient. Rather, one should present options for the patient to choose from, if it is possible. Pamela J. Grace notes that, “nurses [and other professionals must] ensure that patients are capable of making their own medical decisions and are not subject to undue interference by interested others who may or may not hold a person’s best interest as primary.”<sup>110</sup>

It is important that the health care professional is aware of his or her own personal feelings and reactions to the illness in question and to the issue of death. To support a dying patient who is grieving, it is important to establish *rapport* and build *trust*. One must present oneself as a support and not be dominated by the emotion of the ill person; for example, the fear of death.

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<sup>109</sup> Mervie L. Potter, *Grieving and Suffering*, in *Palliative Care Nursing: Caring for Suffering Patients*, ed. Kathleen Ouimet Perrin, et al. (Sudbury, MA: Jones & Bartlett Learning, 2012), 59-60.

<sup>110</sup> Pamela J. Grace, *Nursing Ethics and Professional Responsibility in Advanced Practice*. (Burlington, MA: Jones and Bartlett Learning, 2014), 119.

An awareness of personal issues is important because care for the patient can be challenging. One must accept and support the patient's denial as a necessary coping mechanism. To confront or attack the patient's denial would simply exacerbate the patient's stress. One should encourage the patient to participate in decisions that affect his or her life. It is essential to provide the patient with anticipatory guidance by helping him or her to prepare for death and its consequences for the patient's family. Such preparation helps to promote feelings of control over the situation.

One should try to understand the patient's anger so that one can accept it when it is directed at one when one acts as a care-taker. One should encourage the patient to articulate his or her needs and express his or her feelings candidly. One must allow for outward expressions of grief, for example, crying, and validate these as normal.

A patient should be helped to schedule daily routine to include satisfying activities, where this is possible. Opportunity for the patient to release tension and guilt should be provided and it is most helpful to promote an adequate balance of rest, sleep and activity. One should assist the patient to review the past, if this is possible. This can be done, for example, by listening actively to the patient's life story as he or she tells it.

### **1.5. Role of the Family**

There is a role to be played by the patient's family and the community at large. Ira Byock puts it well when he writes,

Collectively, as communities, we must take back responsibility for the care of our dying members. Currently, care for persons as they die is delegated to medical professionals and institutions: doctors, nurses, social workers, chaplains, therapists, hospitals, nursing homes,



and hospices. Each has a critical role to play, but ultimately, as members of our communities, we all must retain the responsibility to see that the needs of dying persons are met.<sup>111</sup>

The care-taker, therefore, must get the family members involved in caring for the patient because providing care for the patient helps in working out one's own grief. Again it is also a response to the patient's dignity. Family members should be provided with education on illness, grieving, death and dying so as to assist them to understand and accept their difficulties. Without appearing to impose, the family should be encouraged to help the patient complete unfinished business, such as making a will, settling financial affairs, reconciling with the family members, where friction has occurred among them, making peace with an adversary and so on.

Both the patient and the family must be re-assured that anger, depression, guilt and sense of loss may all be part of the grieving process. The family members must be encouraged to express their feelings about the patient's illness or anticipated death and helped to adapt to changes in their roles and lifestyles that may occur as a result of the illness or anticipated death.

## **1.6. The Role of the Religious Leaders**

The religious person has his or her own ideas and convictions about death. These ideas drive people not to resist death or to court death. As a religious leader, I think that the religious person should be very careful to distinguish between the patients who, more or less, subscribe to his or her religious convictions and the many others who do not. He should never, in these critical moments, impose religious ideas on the patient. If the patient happens to be one who appreciates

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<sup>111</sup> Ira Byock, *Dying Well: Peace and Possibilities at the End of Life*. (New York, Berkley Publishing Group, 1997), 246-247.

the religious person's stand on faith, then the occasion may be easy for him or her to implant in the sick person a sense of consolation or even the desire to die, in accordance with the teachings of his or her faith.<sup>112</sup>

For the Catholic Church, the personal, spiritual good and peace of any person in danger of death take precedence over every law. This is how the Catholic Church's law puts it: "Even though a priest lacks the faculty to hear confessions, he absolves validly and licitly any penitents whatever in danger of death from any censures and sins, even if an approved priest is present."<sup>113</sup> Once a person is in danger of death, it is his or her spiritual welfare alone that must be sought. Therefore, any priest, even an ex-communicated priest, should help such a person and absolve him or her from all censures, interdictions, punishments, including ex-communication, suspensions, removal from office. In short, a patient is entitled to the consolation and peace of mind that his or her condition demands, as St. James clearly teaches: *Is anyone among you suffering? He should pray. ... Is anyone among you sick? He should summon the presbyters of the church, and they should pray over him and anoint him with oil in the name of the Lord, and the prayer of faith will save the sick person, and the Lord will raise him up. If he has committed any sins, he will be forgiven* (James 5:13-15).

It is the responsibility of the religious persons to give full support and care to people in their time of loss. The pastoral care giver has no reason to decide to ignore people in their difficult times. Melissa Kelley in her work on grief writes, "By depriving of the acknowledgement and support they may most need in their time of loss, the disenfranchisement of grief may create additional grief and pain, which also may be disenfranchised... Ministers and faith communities

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<sup>112</sup> Melissa Kelley, Spring 2015.

<sup>113</sup> John P. Beal et al, *New Commentary on the Canon Law* (Can. 976). (New York: Paulist Press, 2000), 1159.

have a particular responsibility to ensure that no grieving persons in their midst go unrecognized and unsupported.”<sup>114</sup>

I now propose the Church’s social teachings, Hospice and palliative services and some practical pastoral suggestions as models for the care of the elderly/sick.

## **ETHICAL AND THEOLOGICAL VISION**

### **2.1. Catholic Social Teachings**

The key elements that can contribute immensely to solving the Asante situation regarding costly funerals and problematic end-of-life care is the Catholic Social Teachings (CST). In a sense, as a priest and a student of Bioethics, I articulate the principles of solidarity, human dignity, option for the poor and the common good as a way of solving many ethical and social problems bedeviling the Asante elders. These principles balance the power between the individual and community.

Donald Monan Professor of Theology, Boston College, Lisa Sowle Cahill makes a fascinating case for CST when she writes, “But Catholic social teaching is not just a *theory*. Its values and ideals are embodied in a vibrant tradition of Catholic social *action*. It demands participatory and democratic political action aimed at improving the conditions of social life on which the common good depends.”<sup>115</sup> This means that anyone committed to the well-being of the Asante elders and Ghanaian elders in general should put hands on deck to put an end to these practices for the good of all.

It is not about prohibition – banning the serving of food, water, alcoholic and soft drinks, banning the use of expensive caskets/coffins to bury the dead is not the issue. This is a

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<sup>114</sup> Melissa Kelley, 13.

<sup>115</sup> Lisa Sowle Cahill, *Global Health and Catholic Social Commitment*. Health Progress 88, no. 3 (2007): 55.

manifestation of a failed effort made by Emeritus II, Archbishop Thomas Kwaku Mensah to regulate the funeral celebration of the Catholics in the Archdiocese of Kumasi. In fact since the introduction of the funeral regulation in the Archdiocese of Kumasi, many people including his own priests, have failed to adhere to it. The archdiocese has even failed itself. Among the things that were banned were serving of food and drinks during one week celebrations, burying a deceased after a month of his/her demise. It is very interesting to know that recently the oldest priest (Msgr. Joseph Yeboah) in the archdiocese and the Archbishop Emeritus II himself (Thomas Kwaku Mensah) passed away in March and April, 2016, respectively and all these regulations were violated. Their burial took place after a month and the two were in a fridge for almost two months. My investigations indicate that during their one week celebrations food and drinks were served as against what is clearly stated in the funeral regulation book. If the framers of the archdiocesan policy are violating the very thing they seek to enforce, what do you think the followers (in this case the faithful in the archdiocese) will do? The best way to persuade those who, in good faith, embrace and engage in such practices (spending huge monies on funerals and refusing to care for the elderly) would be to exemplify the practice that a better way exists to care for the dying. It is about the issue of justice. It is about common good. We need to respond not only to the needs of our family members but also to the needs of those in other families and the rest of the whole society who experience such situations.

The common good calls for persons to evaluate the moral status of existing structures. It also requires agents to scrutinize their participation in social structures and institutions.<sup>116</sup> It is a virtue that requires justice, fidelity and love. It is about justice being rendered to all. This common good cannot be realized by an individual person, institution or country but, rather, all humankind

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<sup>116</sup> Daly, 50.

(it seems unrealistic to have everybody participating but the majority can make it happen) working together to achieve a more just and dignified treatment for every human life.

The Catholic Church should take the lead in this campaign and crusade through its own teachings. The Catholic Church proclaims that human life is sacred and that the dignity of the human person is the foundation of a moral vision for society. This belief is the foundation of all the principles of our social justice. Social justice is an integral part of the teachings of the Catholic Church. The teachings of the Catholic Church on social justice are very clear and relatively easy to articulate. They offer a framework of analysis that clarifies the mutual rights and responsibilities of members of local and global communities. It deals with the human person as a social being.

The Asante must recognize that we are all brothers and sisters which requires us to respect, value and uphold a common dignity for ourselves and each other. In this case the elders are not different. Their well-being should be equally important as the young. The growing sense that they are old and have lived their usefulness does not hold. As human beings we are created in the image and likeness of God so therefore, we have an inherent worth and distinction.

Pope Benedict XXVI (now Pontiff Emeritus) in his Encyclical Letter *Caritas in Veritate* (Charity in Truth) states that “The dignity of the individual and the demands of justice require, particularly today, that economic choices do not cause disparities in wealth to increase in an excessive and morally unacceptable manner.”<sup>117</sup> Human persons are willed by God; they are imprinted with God’s image. Their dignity does not come from the work they do, but from the persons they are.<sup>118</sup>

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<sup>117</sup> Benedict XXVI, *Encyclical Letter: Caritas in Veritate (Charity in Truth)*, no. 32. Vatican.ca.

<sup>118</sup> John Paul II, *Encyclical Letter: Centesimus Annus on the Hundreth Anniversary of Renum Novarum*. No. 11. Vatican.ca.

According to Lisa Cahill, Catholic social justice is “centered on the concepts of, first, the dignity of the person and, second, the common good.”<sup>119</sup> The foundation for Catholic social thought is the proper understanding and value of the human person. In the words of Pope John Paul II, the foundation of Catholic social teaching “is a correct view of the human person and of his unique value, inasmuch as ‘man ... is the only creature on earth which God willed for itself.’ God has imprinted his own image and likeness on man (cf. Gen 1:26), conferring upon him an incomparable dignity.”<sup>120</sup> He articulates that “people have an inherently social nature, entailing both rights and responsibilities to others and society.”<sup>121</sup> In his commentary on *Gaudium et spes* (Pastoral Constitution on the Church in the Modern World), David Hollenbach argues for “The ‘Dignity of Human person’ as the focus for the Church’s concern in the social, economic, political, and cultural domains. The Church is concerned with the promotion of human dignity, for this dignity reflects the creation of men and women in the image of God and their redemption by Christ.”<sup>122</sup> He goes on to say that “concern for human dignity means that the humanization of all human activity and work is part of Christian discipleship....These social and cultural achievements, however, make genuine contributions to the building up of God’s reign.”<sup>123</sup>

Making similar commentary on Pope Leo’s Encyclical, *Rerum Novarum* (The Condition of labor), Thomas A. Shannon posits that the Pope argues “for an equality in dignity and status before God for both rich and poor, a status that, if grounded in genuine charity, will lead to true

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<sup>119</sup> Lisa Sowle Cahill, *Global Health and Catholic Social Commitment*. Health Progress 88, no. 3 (2007): 55.

<sup>120</sup> John Paul II, *Centesimus Annus* (no. 11), [http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf\\_jp-ii\\_enc\\_01051991\\_centesimus-annus.html](http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_01051991_centesimus-annus.html). May 1, 1991.

<sup>121</sup> *Ibid*, 11.

<sup>122</sup> David Hollenbach, “Commentary on *Gaudium et spes* (Pastoral Constitution on the Church in the Modern World)”, in *Modern Catholic Social Teaching: Commentary & Interpretations*, ed. Kenneth R. Himes et al (Washington, D.C., Georgetown University Press, 2005), 266.

<sup>123</sup> *Ibid*, 267.

friendship and brotherly love and, ultimately, social harmony within the structures of society as it then existed.”<sup>124</sup>

In a sense, all Catholic social teachings articulate the ethical implications of a proper understanding of the dignity of the person. If this teaching is upheld and “practicalized” by the church in Ghana, it will be a great tool which the Catholic Church can rely on to educate the Asante people to understand the relevance of spending money on the elderly instead of the dead no matter the situation –understanding the value of human life; the human dignity. If Catholic social teachings are well articulated, one can make the following assumptions that it was made: to protect the vulnerable from the powerful; the unwary from the unscrupulous; to ensure that someone will stand by Asante elderly through the course of their illness or death. I believe that spending huge money on funerals need to be thought through with more reason and grace. There are a number of serious ethical issues involved. Apart from its costly nature, which undermines the principles of common good and justice, there is also the ethical issues in the area of human dignity. It is a concept used to describe the quality of being worthy, honored, or esteemed that is grounded in various definitions of a human attribute or right in life. Human dignity is at the heart of this thesis and that is born out of a passion for human dignity - not just the sense of a practical job to be done, but a serious conviction that what is due to people in situations where they are helpless and even dying is time, respect and patience, no less than practical skill.

I will next consider the virtue of solidarity. As a virtue, solidarity’s context is freedom and justice. Our solidarity with all of the human family implies a special commitment to the most vulnerable and marginalized in our midst as Asante. The natural unity of the Asante family cannot

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<sup>124</sup> Thomas A. Shannon, “Commentary on *Rerum Novarum* ( The Condition of Labour)”, in *Modern Catholic Social Teaching: Commentary & Interpretations*, ed. Kenneth R. Himes et al (Washington, D.C., Georgetown University Press, 2005), 137.

be fully realized when people (elderly) suffer the ills of poverty, discrimination, oppression, and social alienation, leading to isolation from the larger community. This is exactly the situation in which some Asante (elderly) find themselves. Therefore, Asante elderly need to be accorded equal opportunity and treatment as any human being needs. But our response of love must be voluntary to be virtuous. In a special way, solidarity encourages striving for relationships that tend toward equality on all levels, which gears toward the good of the community. Here, an important reference point is the work of Andre Ong on John Paul II's *Philosophy of the Acting Person*, which articulates that solidarity "means a constant readiness to accept and to realize one's share in the community because... he has the 'benefit of the whole' in view: he does it for the 'common good.'"<sup>125</sup> All members of the human community must be brought as fully as possible into the circle of productive and creative relationships.

Karol Wojtyla (who later became Pope John Paul II), in his book, *The Acting Person*, develops the notion that solidarity is simply the virtue of care as extended to all other people in society. It involves responsible care for the common good, the moral well-being of the human community. Because solidarity is a virtue, it springs from a heart of love. This is, in essence what distinguishes it from a political reality. Politics participates in a process; solidarity, more spiritual in nature, participates in humanity.<sup>126</sup> In this book, Wojtyla develops what he calls *Attitude of Solidarity*. He explains that,

the natural consequence of the fact that human beings live and act together; it is the attitude of a community, in which the common good properly conditions and initiates participation, and participation in turn properly serves the common good. For him 'accepting the attitude of solidarity man [and/or woman] does what he [or she] is supposed to do not only because of his membership in the group, but because he has the "benefit of the whole" in view: he

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<sup>125</sup> Andre Ong, John Paul II, *Philosophy of the Acting Person: A Personalistic Approach to Life*. Lewiston, The Edwin Mellen Press, 2008, 213.

<sup>126</sup> Karol Wojtyla, *The Acting Person*. (trans., Andzej Potocki). (Dordrecht: Holland/ Boston U.S.A./ London: England, D. Reidel Publishing Company, 1979), 284-5.



[she] does it for the ‘common good.’ The awareness of the common good makes him look beyond his own share.<sup>127</sup>

Wojtyla’s Attitude of solidarity is a good model for the Asante people. Attitude of solidarity will enable them to see the need to care for human person while alive instead of spending huge money after their demise. It calls the whole community to work for a change at the systems level. It demands liberalization of these old people from their long suffering. It means that we understand we are in the same struggle, and we stand up with people who are different from us and who might be in dire need. Indeed attitude of solidarity will mean we begin figuring out how we are going to take care of our friends, relatives and neighbors whose lives will be turned upside – down without any care.

A fourth value I will consider is preferential option for the poor. The option for the poor is simply the idea that, as reflected in canon law, “The Christian faithful are also obliged to promote social justice and, mindful of the precept of the Lord, to assist the poor.”<sup>128</sup> It indicates an obligation, on the part of those who would call themselves Christian, first and foremost to care for the poor and vulnerable.

It is an option which I believe is not optional but morally obliged. Caring for the poor is everyone’s responsibility. People who have suffered from exclusion (such as Asante elders) have a right to preferential option compensation in access to social goods. John Paul II adopts “preferential option for the poor as a biblical value” (One Hundredth Year, no. 11). He repeatedly urged a duty of solidarity toward those who are most vulnerable to social ills and direct abuse. The Pope calls for “solidarity” in “the common good of the entire human family” to end the AIDS

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<sup>127</sup> Karol Wojtyla, *The Acting Person*, 285.

<sup>128</sup> U.S.Catholic Faith in Real Life, *What is the Preferential Option for the Poor?*

<http://www.uscatholic.org/articles/201501/what-preferential-option-poor-29649>. Accessed, April 8, 2016.

crisis, and specifically places persons living with AIDS and their families in a category of preferential concern.<sup>129</sup> This finds its concrete expression in the teachings of the gospel message founded in the life and words of Jesus Christ, who came “to bring glad tidings to the poor . . . liberty to the captives . . . recovery of sight to the blind” (Lk 4:18-19), and who identified himself with “the least of these,” the hungry and the stranger (cf. Mt. 25:45).

The Catholic tradition calls for empathy and a compassionate response to the dying. It is a practical demonstration of our social commitment to dignity and the flourishing of human life. Striving for excellence in end-of-life care indicates a collective effort to transform pain and suffering into hope, especially when one’s life is close to an end. The elders need this. Catholic social teachings as models for end-of-life care for the elderly uphold the sanctity of human life and seek to meet the problems of fear, pain, and despair with compassion and dignity. It gears towards mercy to all. The Catholic social teachings encourage families to actively convey genuine love and support to those who are terminally ill without any discrimination.

## **2.2. Hospice and Palliative care services**

For over 30 years, since Zimbabwe became the first African country to set up hospice services, various models of end-of-life care have emerged in other countries in Africa.<sup>130</sup> They include day care, hospital support teams, hospital units, and home-based care.<sup>131</sup> However, due to poverty, lack of resources and infrastructure, care provision at the end-of-life is scarce across the continent and especially in Ghana. It is of high value that Ghana begins appreciating the modern way of taking

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<sup>129</sup> John Paul II, “The AIDS Epidemic,” *Address to the Diplomatic Corps in Tanzania*, 1 September 1990, *Origins* 20.15 (20 September 1990): 241- 43, nos. 3 and 4.

<sup>130</sup> Stjernsward J, Clark D. *Palliative Care-a Global Perspective*, in Oxford Textbook of Palliative medicine, ed. Hanks G., et al. (Oxford, Oxford University Press, 2003. 3.

<sup>131</sup> Wright M., *Models of hospice and palliative Care in Resource Poor Countries: Issues and opportunities. Help the Hospices*, 2003.

care of the elderly. Among them are hospice and palliative services which can be good models for the care of the Asante elderly.

End-of-life care is the term used to “describe the support and medical care given during the time surrounding death. Such care does not happen just in the moments before breathing finally stops and a heart ceases to beat.”<sup>132</sup> An older person is often living, and dying, with one or more chronic illnesses and needs a lot of care for days, weeks, and sometimes even months.

Hospice, generally, is care given to a patient who is in his/her final stages of life, with emphasis on caring for that person to make their remaining days as comfortable for them as possible. In the modern world hospice means “a system of specialized care that provides shelter and comfort for the most difficult of journeys-facing one’s own death.”<sup>133</sup> With hospice, there is no work on finding a cure to a person’s illness, but rather comforting the person in his/her final moments. Hospice care is generally available to those who have been given six months or less to live. Hospice helps to care for a person when curative treatment is no longer effective.

On the other hand, according to the World Health Organization, palliative care is “an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial, and spiritual.”<sup>134</sup> It is provided to meet the physical, mental, and spiritual needs of chronically ill and dying patients. It is a specialized medical care for people with serious illnesses. It focuses on providing patients with relief from the symptoms and stress of a serious illness. The

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<sup>132</sup> End-of-Life: Helping with Comfort and Care: National Institute of ageing, turning discovery into health. US department of health and Human Services. <https://www.nia.nih.gov/health/publication/end-life-helping-comfort-and-care/introduction>. Accessed, March 12, 2016.

<sup>133</sup> Shirley Ann Smith, *Hospice Concepts: A Guide to Palliative Care in Terminal Illness*. (Champaign, Illinois, 2000), 2.

<sup>134</sup> Joanne Lynn et al, *Improving Care for the End of Life: A Sourcebook for Health Care managers and Clinicians* (2<sup>nd</sup> ed.), (New York, Oxford University Press, 2008), 218.

goal is to improve quality of life for both the patient and the family. Palliative care is provided by a specially-trained team of specialists such as doctors, nurses and others who work together to provide an extra layer of support. It is appropriate at any age and at any stage in a serious illness and can be provided along with curative treatment.

Hospice and palliative service share some similarities in as much as there are differences.

Hospice care and palliative care are very similar when it comes to the most important issue for dying people. Most people have heard of hospice care and have a general idea of what services hospice provides. What they don't know or what may become confusing is that hospice provides "palliative care," and that palliative care is both a method of administering 'comfort' care and increasingly, an administered system of palliative care offered most prevalently by hospitals. As an adjunct or supplement to some of the more "traditional" care options, both hospice and palliative care protocols call for patients to receive a combined approach where medications, day-to-day care, equipment, bereavement counseling, and symptom treatment are administered through a single program. Where palliative care programs and hospice care programs differ greatly is in the care location, timing, payment, and eligibility for services.<sup>135</sup>

Both services improve the care that can be offered to terminally ill patients and their families. They can control various illnesses found in patients and make them comfortable in their end-of-life care.

Both hospice and palliative care help support some patients to live active lives until their death.

The two services ensure that at the end of life, spiritual and emotional pains can be at the same level with physical pain if not greater than it. There are no time limits on when one can receive palliative care, since it acts to fill the gap for patients who want and need comfort at any stage of any disease, whether terminal or chronic. In a palliative care program, there is no expectation that life-prolonging therapies will be avoided.

End-of-life care requires a systematic approach to promote better outcomes for dying patients. A systematic approach is "one that takes into account all aspects of high-quality end of

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<sup>135</sup> National Care givers, Hospice vs Palliative Care. <http://www.caregiverslibrary.org/caregivers-resources/grp-end-of-life-issues/hsgp-hospice/hospice-vs-palliative-care-article.aspx>. Accessed, March 18, 2016.

life care and then creates a rational and humane process for aligning these aspects toward the best outcomes for dying persons”<sup>136</sup> The suffering of a dying person calls for resources that go beyond the medical to communal and religious.<sup>137</sup> This approach calls for palliative care and hospice services based on love and compassion. It is holistic care which promotes quality of life, interpersonal relationships, and the importance of communication among patients, caregivers, and families so that plans for care and treatment match patient values and wishes, regardless of the setting in which it takes place. Lisa Cahill puts it nicely in saying, “in biomedical context, the first and most fundamental response is to strengthen or renew the patient’s bonds of interpersonal, familial, religious and community relationship because love and solidarity are life’s most important meaning.”<sup>138</sup> Here palliative and hospice services ensure that the principles of solidarity, justice, common good, and human dignity are what the Asante elderly need.

Phan posits that “there are some things we can and must do to help the terminally ill persons to go through the dying process with dignity and peace”<sup>139</sup> He proposes Hospice as a helpful way of providing

“patients and their loved ones with physical, emotional and spiritual support. Hospice as an end-of-life care provides the living with the opportunity to accompany the dying with comforting presence, loving care and prayerful support. It is perhaps the most needed ‘works of mercy’ that we can do for the dying in our contemporary society where a majority of patients die in the hospital in isolation, alone, bereft of the comforting presence and the support of their loved ones.”<sup>140</sup>

The government of Ghana must begin incorporating palliative care into various governmental hospitals. Home care based on hospice must be encouraged in the nursing homes.

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<sup>136</sup> David Belde, *Rethinking End-of-Life Care*, 330.

<sup>137</sup> Lisa Cahill, *Suffering: A Catholic Theological-Ethical View*, in N. Palpant and R. Green, eds., *Suffering and Bioethics* (Oxford, 2014)—pdf. 243.

<sup>138</sup> Lisa Cahill, 245.

<sup>139</sup> Peter C. Phan. *Living into Death, Dying into Life: A Christian Theology of Death and Life Eternal* (Rockville: MD, Lectio Publishing, 2014). 26

<sup>140</sup> *Ibid*, 26-27.

There should be a partnership between the government, NGOs and private entities to build various nursing homes that takes care of the elderly. To provide the highest level of care, the entire caregiving team (Family and specialists such as nurses and doctors) needs to form a partnership having the best interest of the elder as their focal point while providing loving, appropriate care to enhance their quality of care, their quality of life and their happiness in the latter days of their lives.

### **2.3. Theological Vision**

Today many Asante die without getting the care due them. There is too much concentration on lavish display at funerals and neglect of the essence of death and our journey to the next world. This is not the way we want to think about our dying persons. There is the need to recognize that the dying go through many struggles ranging from physical, social, psychological and emotional. An appreciation of their vulnerability calls for a commitment to their well-being. Proper care must be given to our elderly and those who are terminally ill. This is the time when holistic care for the patient and their loved ones is paramount. Good and loving care provided within this period can have a profound effect on them. They must die a peaceful, healthy and good death. A good and healthy death is the one “marked by wholeness, dignity and a sense of perspective...one placed firmly in the saving plan of God.”<sup>141</sup>

The reality, however, is that most Asante who are dying need love, care, kindness and compassion. Many people are afraid to communicate with the terminally ill or an elderly, bearing in mind that “we will say ‘the wrong thing’ and in so doing add to someone’s burden, rather than bringing relief.”<sup>142</sup> Sioned Evans et al, argue that “most people who are dying want to be treated

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<sup>141</sup> Sioned Evans and Andrew Davidson. *Care for the Dying: A Practical & pastoral guide* (Norwich: Canterbury Press, 2014). 29.

<sup>142</sup> Sioned Evans et al, 64

as ‘normal,’ even if that means the occasional blunder.”<sup>143</sup>They contend that “avoiding conversation can, in fact, be motivated more by a wish to protect ourselves than a wish to protect the patient,”<sup>144</sup> The issue of anxiety and fear of what to say to the dying person should not deter us from communicating to the dying. We can be motivated by Mother Teresa of Calcutta who is quoted to have written that she “would rather make mistakes in kindness and compassion than work miracles in unkindness and hardness.”<sup>145</sup> For Evans Davidson “if we proceed on the basis of love and compassion, we cannot go far wrong. If we make loving others the central motivation, then we will find the words to say...*how we are* in company of a dying person is just as important, if not more, than *what to say*.”<sup>146</sup> Our presence alone makes the difference in the lives of dying people more than any other thing. It makes them more dignified in their dying processes. It is an important moment in their lives, so we need to pay attention to their needs. It is about companionship. They need others to listen to their stories.<sup>147</sup>

Ira Byock in his book *Dying well: Peace and Possibilities at the End of Life* offers us powerful words of encouragement we can share with the dying person: “We will keep you warm and we will keep you dry. We will keep you clean. We will help you with elimination, with your bowels and your bladder function. We will always offer you food and fluid. We will be with you. We will bear witness to your pain and sorrows, your disappointments and your triumphs; we will listen to the stories of your life and will remember the story of your passing.”<sup>148</sup> In reality, there is much more important work to be done to achieve closure in relationships and a peaceful death.

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<sup>143</sup> Sioned Evans et al, 64

<sup>144</sup> Ibid, 64.

<sup>145</sup> Ibid, 64.

<sup>146</sup> Ibid, 64

<sup>147</sup> Melissa Kelley, *Lecture Notes (Death and Dying)*. Boston College, Spring 2015.

<sup>148</sup> Ira Byock. *Dying well: Peace and Possibilities at the End of Life* (NY: Berkley Publishing Group, 1997). 247.

The most important thing in life is our relationships with those we love. Byock teaches us five vital things that a dying person must do. They are important part of the work of the dying: “1. Ask for forgiveness 2. Offer forgiveness 3. Offer heartfelt thanks 4. Offer sentiments of love 5. Say goodbye.”<sup>149</sup> They need to help them complete their life in order to die well. We help them heal the wounds the family and friends might have inflicted on them and we too might have intentionally or unintentionally inflicted on them.

Another way in which we express our care and love for the dying person is through the lens of Charity. Charity is used here as thinking about the love command. Deuteronomy 6:5 says “You shall love the Lord your God with all your heart, and with all your soul.” And in the gospel of Matthew (22:34-40) Jesus adds “and with your entire mind” and “Your neighbor as yourself.” This means that to God we must give a total love, a dynamic love that drives our actions. When we love God and care for others as we care for ourselves like, in the story of the good Samaritan, who allowed love to transcend hatred (Lk 10:30-37), then we have fulfilled the intent of the Commandments of God. Like the Samaritan we can equally express love and care for the dying person—a love that seeks the well-being of others. Our modern world is strongly influenced by individualism and selfishness; charity invites us to transcend this. In charity, we present ourselves for the care of others, those we know and those we don’t. God’s love is not static or self-centered; it reaches out and draws others in; it is a giving of God to the sufferer.

The care we give to the terminally ill and the elderly discussed above should help the Asante to begin to rethink their funeral celebrations. Thomas Long in his book *Accompany them with Singing: the Christian Funeral* gives us nice suggestions of what can be done. For him the Christian funeral reminds us of our baptism, the beginning of our Christian lives, that sets us off

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<sup>149</sup> Ira Byock, 26.



on a journey.<sup>150</sup> The funeral itself marks the end of that journey, and the service represents the congregation accompanying the deceased on the last part of their life journey to the place of burial. As Christians, however, we understand that death and the grave do not have the final word. Christ gives us the promise and hope of resurrection. We ‘accompany the dead saint to the grave while proclaiming the gospel’. Phan puts it nicely when he writes,

the church’s presence with the dead does not end there: it accompanies them to the very end. The Christian community gathers to say farewell to the deceased, mourn their passing, and comfort their surviving family. The celebration of Christian funerals may begin in the home of the deceased, continues with the Eucharist in the church, and concludes with the burial at the cemetery, or to use the quaintly comforting term, ‘churchyard.’ In this final moment, when death is both end and beginning, when death that is punishment for sin is transformed into an act of total self-surrender in faith, hope and love for God, the congregation sings the song of farewell, with the hope of reunion with the deceased in God’s kingdom, and prayers.<sup>151</sup>

Asante’s funeral must reflect the gospel character. The saint who has died is on the journey to God. We have to gather to witness their passage. “The very notes that should sound at any presentation of the gospel (baptism, repentance, death, resurrection, forgiveness, adoption, etc.) should sound at the Asante’s funeral. These notes should sound with all the particularity of the context of the community and the deceased.”<sup>152</sup>

The creed of the Catholic Church gives us a clear picture of our faith in God. “I look for the resurrection of the dead and life of the world to come.”<sup>153</sup> This is what we profess in the creed and as Christians we hope that one day, death will lead us to the life of the kingdom. For us Christians, the day of death “inaugurates the fulfillment” of our entry into the life of the

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<sup>150</sup> Thomas Long. *Accompany them with Singing: the Christian Funeral* (Rockville, KY: Westminster John Knox Press, 2014). 84.

<sup>151</sup> Phan, 27-28

<sup>152</sup> Unpublished review of Thomas Long’s book *Accompany them with Singing: the Christian Funeral* by Emmanuel Adu Addai. Boston College, Spring 2015.

<sup>153</sup> The Nicene Creed of the Catholic Church.

kingdom.<sup>154</sup> The expensive and lavish display is a by-product of the social life, not the purpose of the funeral itself. The funeral of the Christian therefore “should express the Paschal character of Christian death.”<sup>155</sup> Deceased must be given a Christian funeral—a funeral by which the family members seek spiritual support for the deceased, honor their bodies, and at the same time receive the solace of hope.

In Christian thought, death is not an evil thing. It is an inevitable good, if the aim for which Christ died is to be realized. Christ came into this world that we might have life and have it abundantly but the life he was speaking about was not the life of this world. It was a much higher life, which is attained through the mystery of death. That was why time and time again, he gave the parable of dying in order to live. By all reckonings, Jesus did a lot of things that were simply amazing – curing diseases, walking on the waters, turning water into wine, raising the dead to life, reading people’s minds, multiplying bread, casting out devils. In human terms, such actions should have been his glory; but never once did Jesus point to these as his glory. It was rather when the time came for him to die that he prayed, *Father, the hour has come. Give glory to your son, so that your son may glorify you, just as you gave him authority over all people, so that he may give eternal life to all you gave him. Now this is eternal life, that they should know you, the only true God, and the one whom you sent, Jesus Christ. I glorified you on earth by accomplishing the work that you gave me to do. Now glorify me, Father, with you, with the glory that I had with you before the world began* (John 17:1-5).

Yes, death was Jesus’ glorification because it was through death that he was accomplishing what he came to do, namely, to glorify those God had given him. It was through death that he was

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<sup>154</sup> Catechism of the Catholic Church, Article 2, Christian Funerals, No. 1681. [www.usccb.org/.../catechism](http://www.usccb.org/.../catechism)

<sup>155</sup> Ibid, 1685<sup>155</sup> Catechism of the Catholic Church, Article 2, Christian Funerals, No. 1681. [www.usccb.org/.../catechism](http://www.usccb.org/.../catechism).

going to give eternal life, life that would not cease and, therefore, true life to us. He had not come to this world in order to perpetuate life on earth. He may, indeed, have raised Lazarus from the dead but Lazarus died again, and yet Lazarus did not die. His second death brought him into eternal life, just as Christ's death on Good Friday brought him eternal glory on Easter Sunday.

These are some of the religious thoughts with which the Christian care-taker should comfort the patient, and, indeed, help him or her embrace death the way Jesus did.

#### **2.4. The role of the Church-Pastoral Suggestions (A Praxis)**

As the issue of death and dying has become so serious today, the church must get involved in the care of the dying person. It is possible for parishes to have care of the dying. The following are the pastoral suggestions I give:

1. Workshop for the community to educate them. They need to know that it isn't worth it spending huge money on funerals while they refuse to take care of the elderly. They should know that it is good to be compassionate and merciful. Again they should know that a society/family that does not include skills of serving human dignity is not a society/family at all. Sometimes people do things out of ignorance, thinking that what they do is good which may not be the case. In this situation they may need information to change their way of doing things. It is the responsibility of the church to patiently teach, correct, and encourage them. Education informs, forms, and transforms the people in ways that are life-giving. Good education attempts to enhance who people are and how they live by what they learn. As such, education should enable people to realize the need to care for the dying person.

2. The parish again can have bereavement ministry. This will focus on offering care and love for those who are bereaved. During time of bereavement many people are left alone to suffer. This is the time that they can be talked to, cared for and loved as they go through physical and emotional suffering.
3. Offering of prayer and care for the dying. Intensifying the Church's sacrament of sick through constant visit and praying, with them. It should go beyond the normal monthly visits which at times some priests are unable to do. The Archdiocese can constitute lay apostolate at various parishes in charge of the sick and their families. This group can be working hand-in-hand with priests and other ministers at the parish. Their ministry should focus on offering prayers and comfort to the sick and their families. It should also include giving reports about the elderly to the priests for a quick response to other pastoral needs they could not administer. This should be done with all seriousness and commitment.
4. The Church in Kumasi (for that matter the Catholic Church in Ghana) has a rich variety of acts of worship (such as the Church's response to widow rite) which can be designed to help families (Church members) to say farewell to those who are expected to die; and a range of prayers that can be used between death and the funeral which can serve as a check on the families to help them minimize the waste of money. Regardless of the situation, the parish priest should wholeheartedly welcome the opportunity to serve members by offering a funeral service for someone they love at the parish church, or at a local graveyard. This will serve in a very practical way of solving the problem.
5. Every parish in the Archdiocese of Kumasi has a funeral committee. It is clear that the committee does not know its work well. They collect money for welfare, inform priests about families who are bereaved in the parish and give out welfare monies to bereaved

families who deserve them. I believe that this committee is so important that their work should be well defined for the purpose for which it was created. The work of the funeral planning committee should and must not be limited to collection of money. They must be tasked to get involved in the family meetings when planning for their funerals. In this case the committee can help the families plan for a well-organized funeral devoid of extravagant use of money which can instead be channeled towards the well-being of the elderly.

6. The Role of the Government. The government also has a great responsibility toward the elderly. Our villages and rural settings are increasingly becoming more like the homes for the elderly found in the West. Given that there is this rural-urban exodus of the young and working population, our villages are now the official old peoples' homes. Go to most of our villages today and you will see only the little ones and the very old. The labor force in villages is dropping. Certainly, I will never like to be ostracized like these old people. I think the government should open up employment opportunities in rural areas so as to stem this movement. Care for the elderly is certainly necessary. The Church has a responsibility here to play. The can lobby through government agencies to seek support to help the poor.

## **General Conclusion**

Every culture can be evaluated on the basis of the fruits it bears. Regardless of the convictions behind the Akan funeral rites, I think that some aspects of the rites are sheer profligacy and fall short of sound moral judgment. My assessments are based on my Christian principles and recent observation of the funeral rites.

The works of God's kingdom are neglected at the expense of human tradition. The hungry are not fed, the naked are not clothed, the sick are not attended to, and yet enormous resources are spent on the dead (funerals). This is morally wrong no matter how one wants to justify it. The living are more important than the dead. What is most disturbing is that for most of the time, the dead in whose name these resources are wastefully dissipated are neglected during their lifetime.

To me, the essence of funerals and its rites must reflect the gospel character. The dead person is on a journey to fulfill Christ's promise and the hope of the resurrection. Most of our resources should be channeled to the work of God's kingdom; compassion, love, justice, and common good towards the living. This is the calling of all Christians. This is what we are called to do. The elderly must experience and share our love when they are alive. They want to know whether they are loved, whether people care for them. Our refusal to love and care for them may lead them into their early grave. To show love to them by spending huge sum of money at their funeral after their demise is meaningless. They want to be loved while they are alive. This brings into sharp focus what an anonymous scholar once said,

“When I die, don't come to my grave to tell me  
How much you love me and how much you miss me,  
Because those are the words I want to hear while I'm still alive.”

When Jesus realized that he had not done the ultimate to save the life of his friend Lazarus, the best thing he sought to do, was to bring him back to life. We are told he wept. If it was an issue of resurrecting Lazarus, it wasn't a problem for the son of God but the mere fact that he could not get the chance to do something about his health and as such his death caused the pain and gloom to his family, Jesus resorted to tears. This simply explains why we should show maximum care and love to our elders when they are alive. And not when they are dead and gone.

Reflecting on the book of Job, the suffering Job encountered throughout the text was magnified by the alienation he felt. Though it is recognized throughout the text that he experienced severe illness and lost all his possessions, arguably, it was the profound sense of isolation which compelled Job to cry out to the divine for its meaning. Drawing comparisons between this story to the narrative of Jesus' brutal execution, his isolation compelled him to cry out *Eloi Eloi, lama sabachthani*" which translates to "My God, my God why have you forsaken me" (Mark 15:34). When reflecting on the attitude of the disciples of Jesus-running away, I could only imagine isolation made Jesus cry aloud-At the time of suffering those who mattered most in his life left him alone. Isolation is another form of making suffering greater. The pain became greater realizing that he had no one to lean on. Connecting these two stories to the discussions surrounding Asante elderly, I invite the community and the country in general to critically engage what it means to be a relational people amidst one's agony when confronted with the inevitability of death. Drawing from rich discussions I have developed a robust theological and ethical vision for care of terminally ill patients or elderly. I have argued that there must be a different attitude towards our dying persons instead of flamboyant funeral celebration. This brings in a sharp focus the teachings of Jesus in the gospel of Mathew 25: 30, "that when I was sick did you care for me?" Jesus wants us to pay attention to the sick and the elderly by caring for and loving them.

It is undeniable fact that adopting this alternative theological vision would challenge my people, my tribe men and women, the Asante, to have a paradigm shift, and this is not easy, but change brings growth and maturity, development and true freedom. This should work because many traditional Asante values are consistent with the theological visions proposed. The Catholic social teachings can enhance and fortify the traditional Asante values as laid down by their great grandfathers. The beliefs such as hospitality, forgiveness, reconciliation, kindness, fatherliness, magnanimity, justice and love for everybody which are Asante value systems are among other things proposed as theological and ethical visions articulated as models for the care of the elders. It is in the light of this that the Asante are being challenged to take a second look at the way they celebrate their funerals in order to bring relief to themselves.



## Selected References

Afenyo, Cynthia, Polygamy a Major Factor in the HIV/AIDS Spread. [www.ghanaweb.com](http://www.ghanaweb.com).

Accessed April 10, 2015.

Assenyoh, Kwame B. *The Disabled Church: Toward Roman Catholic Theology of Disability in Ghana*. Weston Jesuit School of Theology: Cambridge, MA, 2004.

Beal, John P., et al, *New Commentary on the Canon Law* (Can. 976). (New York: Paulist Press, 2000), 1159.

Bregman, L. (ed), *Religion, Death, and Dying: Bereavement and Death Rituals*. Santa Barbara, CA: ABC-CLIO, 2010. Vol. 1.

Buah, F. K., *A History of Ghana: Revised and Updated*, London: Macmillan Education Ltd., 1998.

Byock, Ira, *Dying Well: Peace and Possibilities at the End of Life*. New York: Riverhead Books, 1997.

Cahill, Lisa S., *Global Health and Catholic Social Commitment*. Health Progress 88, no. 3 (2007).

Cahill, Lisa S., *Suffering: A Catholic Theological-Ethical View*, in N. Palpant and R. Green, eds., *Suffering and Bioethics* (Oxford, 2014)—pdf).

Cahill, Lisa S., *Lecture Notes: Theology and Bioethics*. Boston College, Spring 2015.

Carter, Marian, *Dying to Live: A Theological and Practical Workbook on Death, Dying and Bereavement*. Golden Lane: London, SCM Press, 2014.

Catholic Archdiocese of Kumasi. *Funeral Regulations* Kumasi: Kumasi Catholic Press, 2011.

Daly, Daniel, *Unreasonable Means: Proposing A New Category for Catholic End-of-Life Ethics*,

- Journal National of Christian Bioethics (April 2013),  
<http://cb.oxfordjournals.org/content/19/1/40.full.pdf>, 46.
- Day, Emma Day et al, "Traditional Cultural practices and HIV: Reconciling Culture and Human Rights." [www.hiv.commission.org/index.php/working-papera?task=document.view&id=02](http://www.hiv.commission.org/index.php/working-papera?task=document.view&id=02). Accessed: April 10, 2015.
- Evans, Sioned & Davison Andrew, *Care for the Dying: A practical and Pastoral Guide*.  
Canterbury Press: Norwich, 2014.
- Grace, J. P., *Nursing Ethics and Professional Responsibility: In Advanced Practice (2<sup>nd</sup> ed.)*.  
Burlington, MA: Jones and Bartlett Learning, 2014.
- Gyekye, Kwame, *African Cultural Values: An Introduction*. Accra: Ghana, 2002.
- Himes, Kenneth R., *Modern Catholic Social Teaching: Commentaries & Interpretations*.  
Washington, D.C.: Georgetown University Press, 2004.
- John Paul II, "The AIDS Epidemic," *Address to the Diplomatic Corps in Tanzania*, 1 September 1990, *Origins* 20.15 (20 September 1990) nos. 3 and 4.
- Kuada, John and Chacha, Yao, *Ghana: Understanding the People and their Culture*. Woeli Publishing Services: Accra, 1999.
- Kwadwo, Osei, *A handbook on Asante Culture* (O. Kwadwo Enterprise: Kumasi), 2002.
- Lithur, Nana Oye, (Gender Minister), Bill for the aged to be passed, My Joyonline.com, -  
<http://news.myjoyonline.com/>. Accessed, January 18, 2016.
- Long, Thomas G. *Accompany them with Singing: The Christian Funeral*. Rockville, KY: Westminster John Knox Press, 2014. 84.
- Lynn. Joanne et al., *Improving Care for the End of Life: A Sourcebook for Health Care Managers and Clinicians* (2nd. ed.). Oxford University Press, U.S.A., 2008.

- Lystad R. A. *The Ashanti: A proud people*. New York: Green Wood press, 1968.
- Kelley, Melissa. *Lecture Notes (Death and Dying)*. Boston College, Spring 2015.
- M. Wright, *Models of hospice and palliative Care in Resource Poor Countries: Issues and opportunities*. *Help the Hospices*, 2003.
- Mbiti, John, *African Religions and Philosophy*. London Heinemann, 1975.
- Meyerowitz, *The Akan of Ghana*. Rusell Square: London, Faber and Faber Ltd, 1958..
- Nketia, Kwabena J.H., *Funeral Dirges of the Akan People*, Achimota: Accra, 1955.
- Ong, Andre, John Paul II, *Philosophy of the Acting Person: A Personalistic Approach to Life*. Lewiston, The Edwin Mellen Press, 2008.
- Owusu, Sekyere B., *Burial and Installation Ceremonies for Asante Kings*. Addae Educational Publication: Kumasi, 1999.
- Panicola, R. M., et al, *Health Care Ethics: Theological Foundations, Contemporary Issues, and Controversial Cases*. USA: Anselm Academic, 2011.
- Peacocke, Arthur, *A Map of Scientific Knowledge: Gnentics, Evolution, and Theology*, in Ted Peters (ed) *Science and Theology: The Consonance*. Colorado: Westview Press, 1998.
- Perrin, O. K., et al. *Palliative Care Nursing: Caring for Suffering Patients*: Sudbury, MA: Jones and Bartlett Learning, 2012.
- Phan, Peter C. *Living into Death, Dying into Life: A Christian Theology of Death and Life Eternal*. Rockville: MD, Lectio Publishing, 2014. 26.
- Portter, Mertie L., *Grieving and Suffering*, in *Palliative Care Nursing: Caring for Suffering Patients*, ed. Kathleen Ouimet Perrin, et al. Sudbury, MA: Jones & Bartlett Learning, 2012.
- Rattray, R.S., *Religion and Art in Ashanti, London*. Oxford University Press, 1927

- Salm, Steven, J. and Falola Toyin (2002), *Culture and Customs of Ghana*. Greenwood Press, London.
- Sarpong, Peter K., *Ancestral Stool Veneration in Asante (Revised edition)*. Kumasi: Ghana, The Goodshepherd Publishers Limited, 2011.
- Sarpong, Peter K., *Ghana in retrospect: Some Aspects of Ghanaian Culture* (3<sup>rd</sup> ed.). Accra: Ghana Publishing Corporation, 1974.
- Sarpong, Peter K., *Peoples Differ: An Approach to Inculturation in Evangelization*. Legon, Accra-Ghana: Sub-Saharan Publishers, 2002.
- Secretan, T., *Going into Darkness: Fantastic Coffins from Africa*. New York: Thames and Hudson, 1995.
- Smith, A. S., *Hospice Concepts: A Guide to Palliative Care in Terminal illness*. Illinois, USA: Research Press, 2000.
- Stillion, M. J. et al, (eds.), *Death, Dying, and Bereavement: Contemporary Perspectives, Institutions, and Practices*. New York: Springer Publishing Company, 2015.
- Stjernsward J, et al, *Palliative Care-a Global Perspective*, in Oxford Textbook of Palliative medicine, ed. Hanks G., et al. (Oxford, Oxford University Press, 2003).
- Thompson, P. K., *From Dark Night to Gentle Surrender: On the Ethics and Spirituality of Hospice Care*. University of Scranton Press: Scranton and London, 2010.
- Witte, de M., *Long Live the Dead: Changing Funeral Celebrations in Asante, Ghana*. Amsterdam, The Netherlands: Aksant Academic Publisher, 2001.
- Wojtyla, Karol, *The Acting Person*. (trans., Andzej Potocki). Dordrecht: Holland/ Boston U.S.A./ London: England, D. Reidel Publishing Company, 1979.
- Wright, M. et al., *Hospice and Palliative Care in Africa: A Review of developments and Challenges*. New York: Oxford University Press, 2006.

## **Church documents**

Catholic Bishops' Conference of Ghana (First National Catholic Pastoral Congress), *Ecclesia in*

Ghana: On the Church in Ghana and its Evangelizing Mission in the Third Millennium.

Instrument Laboris, Cape Coast, (no. 231), April 7-14, 1997.

Benedict XXVI, *Encyclical Letter: Caritas in Veritate (Charity in Truth)*, no. 32. Vatican.ca.

John Paul II, *Encyclical Letter: Centesimus Annus on the Hundreth Anniversary of Renum*

*Novarum*. No. 11. Vatican.ca.

John Paul II, *Centesimus Annus* (no. 11), [http://w2.vatican.va/content/john-paul-](http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_01051991_centesimus-annus.html)

[ii/en/encyclicals/documents/hf\\_jp-ii\\_enc\\_01051991\\_centesimus-annus.html](http://w2.vatican.va/content/john-paul-ii/en/encyclicals/documents/hf_jp-ii_enc_01051991_centesimus-annus.html). May1,

1991.