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The Promise and Problem of "Closure" in Death Investigations

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Abstract

This article reviews the concept of "closure" in the context of death investigations. It focuses on the experiences of bereaved families and justice system professionals, and on inquests undertaken by coroners under the Anglo-Canadian-Australasian model. The article shows the promise of closure figures prominently in coronial rhetoric: that the function of an inquest in facilitating closure has become an orthodox aspect of the promotion of the therapeutic advantages of coronial investigations. It then outlines the problem of closure as a concept, most particularly as an emotional expectation. There is a widely held view that the justice system can help provide closure for people who have suffered violent loss. Yet closure as a construct is amorphously defined: there is no agreement among researchers about what it is, whether it exists or, if it does exist, how it can be achieved. This article suggests that closure language should be avoided in the context of death investigations. Such language carries with it the counter-therapeutic potential to create unrealistic expectations regarding what inquests can accomplish, including through coroners' findings and recommendations.

Keywords: Emotion; death investigations; inquests; coroners; therapeutic jurisprudence.

Introduction

Deaths that become the subject of an official death investigation, including by a coroner, are unexpected, unnatural or violent. Sometimes they are deaths that arise from a person's self-inflicted injuries or missing persons' disappearances where death through one mechanism or another is suspected (see Dartnall et al., 2019; Dartnall et al., 2023; Wayland and Ward, 2022); or they are homicides. More commonly, they are deaths that have occurred in unclear circumstances that may have been avoidable: often the product of human error, negligence or a failure to plan responsibly, ensure a workplace is safe or implement necessary risk management strategies.

For family members and others who care about the deceased person, the loss can be exceptionally difficult to come to terms with due to the suddenness and unexpectedness of the death. In most cases, the death could have been avoided had proper care been taken or if events had taken a different course. Accidents and sheer bad fortune, for which no one is to blame, can be very difficult for family members to accept because of the apparent randomness and unaccountability of the tragedy, as well as the absence of any person or entity who can rationally be the focus of aggrievement. Deaths occurring in controversial circumstances and where there is a dispute about what occurred – "contested deaths" (Scott Bray, 2020) – are particularly distressing. Families can feel anger (Cerney & Buskirk, 1991), frustration and confusion, particularly if there are different perspectives on what took place prior to the death and depending on whether persons who may have contributed to the death have accepted responsibility for their actions, apologised or taken steps to ensure that similar deaths do not occur again (Tait et al., 2016; see also Jacobson et al., 2024). In addition, perceptions may vary among family members, friends and work

colleagues. This can be exacerbated when the body of a deceased person cannot be located or when a post-mortem procedure or even a coronial inquest (such as by an open finding or conclusion) fails to determine the cause of death definitively and whether any person or entity was responsible for the death.

This article reviews the puzzling concept of "closure" in the context of death investigations. It examines the impact of this ambiguous idea on people who work in, and are caught up in, such investigations. In doing so, the article contributes to a growing body of research on closure's "fuzzy parameters" and "murky dynamics" (Bandes, 2021, p. 103), and to understanding the implications of closure's vagueness in legal contexts.

There is a widely held view that the justice system can help to provide closure for people who have suffered violent loss. Yet closure as a concept is amorphously defined: there is no agreement among researchers about what it is, whether it exists or, if it does exist, how it can be achieved (Berns, 2011; see also Armour & Umbreit, 2012; Zimring, 2003). For a century, the term has been used in very different contexts. In the 1920s, "closure" was used by Gestalt psychologists to help explain mental perception and how people make sense of visual and auditory information: "closure", for Gestaltists, referred to the action the brain takes to fill in gaps in things it perceives (see Wagemans et al., 2012). Mid-last century literary scholars used the term to describe the rhetorical means by which a sense of resolution is invested in novels and poetry (see Kermode, 1967; Smith, 1968; Torgovnick, 1981). From the 1970s onwards, closure took on new meanings. Psychologists developed a "Need for Closure Scale" that measured people's need for cognitive closure – that is, their desire to eliminate ambiguity and arrive at definite conclusions (see Kruglanski et al., 1993): a high score was associated with inflexibility and closed-mindedness. Meanwhile, the rise of the victims' rights movement and of therapeutic language and goals meant closure began to be treated as an emotional state (Berns, 2011). People began treating closure as a *feeling*, an affective state to strive for in the face of grief and loss: calmness and a sense of resolution after the experience of trauma, as well as a capacity to re-engage with the world after intense distress, to "move on." It is unclear, however, exactly what this feeling is and what it is supposed to be (Rossmanith, 2024).

Researchers' critical examination of closure in justice settings has focused largely on capital punishment cases in the United States (see Armour & Umbreit, 2007, 2012; Zimring, 2003), and some scholars suggest that closure was deployed in the 1980s "to rescue the death penalty from its brush with abolition" (Bandes, 2024b): a popular view is that the death penalty is fair because it gives closure to the family members of murder victims and yet researchers question this assumption (Armour & Umbreit 2007). Some research has considered how closure is used to justify the role of victim impact statements (Bandes, 2000, 2009, 2021, 2022). Precisely how victims, bereaved families, and legal professionals understand closure, however, has not been determined (Armour & Umbreit, 2007; Bandes, 2021). This can be explained by the fact that little qualitative empirical research has been conducted on the subject (see Goodrum, 2020; Madeira, 2012), with most research approaches to date involving analysis of legal cases.

Our article advances existing research by discovering what closure means to people in the context of death investigations. It focuses on the experiences of bereaved families and justice system professionals, and on inquests undertaken by coroners under the Anglo-Canadian-Australasian model (for information regarding this model, see Freckelton & Ranson, 2006, 2026 in press; Matthews et al., 2024). It thus contributes to scholarship that seeks to understand the coronial jurisdiction better: "a jurisdiction undergoing immense legal and policy reform" (Freckelton, 2024; Scott Bray & Martin, 2016) and that has increasingly come to regard itself as able to set and meet therapeutic aims and goals (see Carpenter et al., 2024; Tait & Carpenter, 2013, p. 98).

The first half of this article shows the prevalence of the promise of closure, demonstrating that the function of an inquest in facilitating closure has become an orthodox aspect of the rhetoric promoting the therapeutic advantages of coronial investigations; and that the quest for closure can be invoked as a basis for the justice in convening an inquest, reopening an inquest or appealing against what are perceived to be unsatisfactory aspects of an inquest's processes or outcomes (Brennan, 2017). The second half draws on interviews and fieldwork to show the problem of closure as a concept, most particularly as an emotional expectation. We conclude by suggesting that aspiring to death investigations to enable a feeling of closure for bereaved families is problematic and requires nuance. We argue that such language should be avoided in the context of coroners' death investigations as it carries with it the counter-therapeutic potential to: (1) create unrealistic expectations regarding what inquests can accomplish by way of coroners' findings and recommendations, and referrals to prosecuting bodies; (2) generate distress by delimiting people's experience of grief and loss; and (3) cause frustration and confusion, given that there is no agreed-upon clinical definition of closure and a persistent vagueness remains in the definition, affecting bereaved families who are left feeling disoriented regarding what precisely they are supposed to feel.

The Coronial Model of Death Investigations

The Anglo-Canadian-Australasian coronial model allows for formal inquiries to be held into the causes and circumstances of reportable deaths – deaths that are sudden, unexpected, unnatural or violent (Cross & Garnham, 2016; Dorries, 2014; Farrell, 2000; Freckelton & Ranson, 2026 in press; Levine & Pyke, 1999; Matthews et al., 2024; Selby, 1992, 1998). The distinctive characteristic of the Anglo-Canadian-Australasian coronial model is that it is public in that it allows for questioning of witnesses in a coroner's court and a rigorous curial analysis of what contributed to or influenced a death. This coronial model is based upon hearings that are open for attendance of the media and members of the general community and involve cross-examination of lay and expert witnesses, by contrast with the model utilised in the United States (Jentzen, 2009) and in many European jurisdictions (Freckelton & Ranson, 2006; Joos et al., 2021), where what takes place is principally a paper medico-legal review that concentrates on ascertaining whether criminal offences have been committed.

Increasingly, the focus of modern coroners' inquests is a combination of provision of information on the public record to explain and clarify causes and circumstances of death, and a preventative role – searching for ways to take actions in the public interest to reduce the potential for comparable deaths to occur in future. Their style is inquisitorial rather than adversarial. The coroner, although a judicial officer, supervises the investigation, drawing on police and medical-scientific assistance, exercising significant powers bestowed by statute and functioning in significant respects like a public health official whose role it is to prompt reforms and systemic changes to avoid further deaths (Bugeja et al., 2023). In addition, findings or conclusions – which are increasingly framed in narrative form, by contrast with verdicts (Carroll et al., 2012) – and recommendations for preventative actions are published on the websites of coroners' courts in Australia and New Zealand. In some jurisdictions, there are also requirements that there be responses to inquest recommendations (Moore, 2015; Sutherland et al., 2016).

However, only a small number of inquests in Australia and New Zealand are conducted in public by reason of limited resources and the fact that there are a great many reportable deaths. The decision to convene a formal inquest is discretionary and tends to be where a public interest has been identified in convening an inquest to scrutinise factors giving rise to a death.[1] Research has identified a strong positive correlation, for example, between the remoteness of where a death occurred and the likelihood of it being selected for an open inquest (Walter et al., 2012). The discretionary nature of the decision to take a death to open inquest means a great many deaths are investigated by coroners and those assisting them, but most result in "chambers findings", and sometimes comments or recommendations – thus, these inquiries are not open and not as extensive as those that take place by way of formal inquests. There is a risk that this will result in distress and a feeling of the deceased person being a 'second-class' person in the inquest environment.

In this article, we show how, in the context of coronial inquests, bereaved families are promised, and therefore often expect to feel, some sort of affective sense of closure. We suggest that the promise of closure is counter-therapeutic because it creates expectations that may not be able to be satisfied. The promise of, and subsequent failure to deliver, closure is one of the things impeding the possible mitigation of people's pain.

A Mixed Methods Approach

How exactly is closure an impediment? What is it about the way closure operates that is causing obstruction? *What* obstruction is it causing? To answer these questions, we draw on our combined expertise in anthropology, emotion studies and the law. We acknowledge the limits and partiality of our disciplinary backgrounds and our subject positions.

We draw on ethnographic research currently being conducted by a member of this research team – Kate Rossmanith – on the concept of closure and how it functions in the lives of people who work in, and are caught up in, Western legal systems. The focus of Rossmanith's study is homicide investigations, particularly the relationships between family members and police detectives who confront ongoing unsolved homicide cases; and the experiences of coronial professionals[2] involved in death investigations. Her ethnographic work, based primarily in Australia with some additional research in the United States, involves a mixed-methods approach: formal and informal interviews; analysis of legal texts and support resources; and observation of police training courses, survivor support group meetings, emergency assistance events, and launches of initiatives to solve cold cases. Her study is rooted in phenomenological anthropology, which is concerned with how humans perceive, experience and comprehend their social world (see Jackson, 1996), and in law and emotion studies, which largely seek to denaturalise emotion by articulating emotion systems that are embedded in legal structures and processes (see Bandes et al., 2021; Rossmanith et al., 2025). Throughout interviews, Rossmanith avoids introducing terms into the conversation, instead listening to the language people use and then asking them about particular words or phrases – for example, she might say, "You have just said 'There will never be closure.' What do you mean by this? What do you mean by the word 'closure?'" (see Rossmanith 2024).

Homicide does not represent the majority of coronial inquests. More qualitative, interview-based work regarding a variety of types of cases is needed if we are to obtain a richer picture of how ideas of closure function in death investigations. Nonetheless, data emerging from Rossmanith's research offer a start: they provide insights into some of the ways closure is understood and experienced by people. In this article, we supplement ethnographic work with a brief discussion of the way the term "closure" has figured in the language used by death investigators, including coroners, in a number of occasions in the United Kingdom, Canada and Australasia.

The Promise: Closure Rhetoric in Death Investigations

Coronial investigations often promise bereaved families a sense of closure. This promise emerges out of various contexts, including people's perceptions of the justice system (that legal processes deliver closure) – perceptions supported by media reporting on cases in which the notion of closure is routinely invoked.[3] The promise is also embedded in the language used by many coroners. In a foreword to the Coroners Court of Victoria's (2024) *Bench Book*, for instance, there is explicit reference to the concept:

> Coroners through their findings and recommendations provide closure for family members following the death of a loved one, and contribute to systemic reform to improve … health and safety …

That coroners (either deliberately or inadvertently) reach for closure language is understandable and perhaps inevitable: the closure rhetoric that exists in and around coronial inquests is consistent with the closure rhetoric that, over the past several decades, has become prevalent in justice system processes in the West: namely, a collapsing of a legal idea of closure ("conclusion") with an emotion concept (a feeling of closure). That many coroners use closure language perhaps reflects how they understand their own role and that of contemporary coronership more generally: to provide answers regarding a person's unexpected or suspicious death and, in doing so, provide emotional closure for families.

The following examples of the use of "closure language" have been identified from prominent reports of death investigation findings – mostly by coroners, but also by appellate courts. While not necessarily representative of all views in the death investigation area of the law, they illustrate an approach with some currency, especially in the context of contemporary coronial investigations.

It is commonly said that the purpose of a properly and sensitively conducted investigation into the death of a person who has passed away in tragic circumstances is to enable family members, and others, to obtain closure (e.g., see *Thales Australia Ltd v Coroners Court of Victoria* (2011) at [40]; see also Carpenter et al., 2015). For instance, in relation to Canada's deadliest rail tragedy, legal scholar Mark Winfield argued in favour of an extensive death investigation:

> None of the processes so far has given an opportunity for victims and survivors to tell their stories on the formal public record, provided the kinds of conclusive assignment of responsibility needed to begin to bring closure to the disaster, or established a definitive set of recommendations on how to prevent similar tragedies in the future. (2018, n.p.)

It has even been argued that holding an inquest "may be seen as an act of closure" by enabling explanations to be sought, among others, for relatives in relation to the deaths of children and young people (see Walter et al., 2012), while Tait and Carpenter have argued that there is a division between coroners for whom their job is principally administrative and coroners "who see their principal task as providing comfort and closure to grieving families" (Carpenter et al., 2024; Tait & Carpenter, 2013, p. 98). Tait and Carpenter (2013) write that:

> Coroners have been allocated or, perhaps more accurately, have allocated themselves a role in the process of giving closure to grieving families. This 'therapeutic' role may often result in Coroners managing inquests in ways that go well beyond the simple finding of facts, and which has significant implications for the administrative elements of the task. (p. 93)

In responding to an empirical study, for instance, New Zealand Coroner Dymond commented:

> I don't think anybody would doubt that the ideal for a coroner is to conduct an inquest in open court … I won't say they [families] enjoy the experience, but they actually benefit from the experience, and I don't think I've ever found anybody in the previous 25 years who has ever regretted coming to an inquest. It's a closure, it's a catharsis … (Moore & Henaghan, 2014, p. 290)

Sometimes, the role of coroners' courts in facilitating closure is articulated by parties, sometimes it is articulated by coroners and sometimes by appellate judges.

An example of parties expressing aggrievement about the death investigation process on the basis that its outcome precluded closure was seen in *Taing and Nuon v The Northern Territory Coroner* (2011), where the deceased persons were self-employed fishermen/crabbers whose burned remains were found at a remote camp with a vessel beached nearby. A forensic pathologist was unable to determine their cause of death. The plaintiff was frustrated at the decision of the Territory Coroner not to convene an inquest and maintained that she had been traumatised by the decision. She told the Supreme Court of the Northern Territory that the post-mortem examination that classified the cause of death of her husband as "undetermined does not give her closure." She was left with "deep and lasting grief" and was ineligible for financial assistance from the Victims Services Unit by reason of the lack of a formal finding as to her husband's cause of death.

In *Office of the Chief Coroner, Ministry of Public Safety and Solicitor-General* (2007), the applicant for information after a death was the father of a man who died by suicide. He sought access to a copy of his son's suicide note from the Office of the Coroner in British Columbia after an investigation into the death had been completed. The father stated that he wanted closure as he could not understand why his son had taken his own life and hoped that reading the suicide note would help him "to put it behind me." The Information and Privacy Commissioner ultimately declined access on the basis that the deceased son's privacy rights survived his death and stated that he sympathised with the father's wishes "to put this sad event behind him", but concluded that his motives, "while undoubtedly sincere", did not overcome the presumption of information privacy (*Office of the Chief Coroner, Ministry of Public Safety and Solicitor-General* (2007) at [19]).

In *Mortimer v Coroners Court of Victoria* (2022), as part of serial litigation in relation to the death of a man with an intellectual disability and schizophrenia, an application was made to quash a coroner's findings. By the time Garde J heard the matter, more than 13 years had elapsed since the death and it was contended by the medical practitioners the subject of allegations that there was a need for closure in the matter, including for the medical practitioners who had faced unresolved serious allegations for many years (*Mortimer v Coroners Court of Victoria*, 2022 at [62]). Ultimately, Garde J accepted that the need for closure and finality "for all parties" was compelling. He noted that the recollection of key witnesses had dimmed considerably or been lost. In addition, at least one witness had died. He found that the Coroner had done all that could be done to call evidence and ascertain the facts and dismissed the application for a further inquest. (*Mortimer v Coroners Court of Victoria*, 2022 at [114]).

Similarly, in *Veitch v State Coroner* (2008), the Deputy State Coroner of Western Australia declined to hold an inquest into a death that occurred as a result of a motor vehicle accident with the deceased man having a markedly raised cannabis level. The plaintiff, who was also involved in the accident, maintained that an inquest was necessary and desirable in the context of what she thought was a cover-up by police and stated that she needed the inquest "to help her find closure and to put her friend … to rest in peace" (*Veitch v State Coroner*, 2008 at [13]). However, in spite of the concerns expressed by the plaintiff, Blokland J found that there "was no realistic possibility of a finding that a collision with a police car played any part in the accident" and therefore that "the foundation for the allegations of police wrongdoing is absent" and that there was no reasonable possibility of a finding of a police cover-up (Freckelton and Ranson, 2026 in press; Studdert et al., 2016).

There are also occasions when the issue prompting aggrievement is the death investigation process – the basis of the way it has been conducted or delays that have impeded family members' capacity to achieve closure. This is significant for the coronial jurisdiction as substantial delays are very common in final resolution of death investigations by coroners (Studdert et al., 2016). The issue was explicitly raised in *Mid and West Wales Fire & Rescue Service, R (on the Application of) v HM Senior Coroner for Pembrokeshire and Carmarthenshire* (2023 at [4]), for instance, where Eyre J noted that the mother of the deceased man informed a coroner that it had been nearly four years since her son's death "and the inquest into that death has not yet been held with an understandable impact on his family's ability to find closure after their loss" (also see *Re Duck*, 2014 at [32]).

In *Mays v HM Coroner for Kingston Upon Hull & East Riding of Yorkshire* (2023 at [4]), Simler LJ (in a judgment with which Masy J and Judge Teague QC, Chief Coroner, concurred), the High Court of England and Wales was called upon to determine whether an inquest should be reopened as a result of the discovery of new evidence in relation to the death of a woman who had been refused admission to a psychiatric inpatient facility. Simler LJ commented that the wishes of the deceased woman's parents were relevant in determining whether the ordering of a new inquest was desirable. She commented that family members must be given "meaningful opportunities to make sense of the circumstances that led to the death of their loved one." The court found that the additional evidence about a conversation "must have been both frustrating and distressing to them. It has, I imagine, prevented them from obtaining the closure they sought regarding their daughter's death at the earliest opportunity and has, no doubt, prolonged their grief" (*Mays v HM Coroner for Kingston Upon Hull & East Riding of Yorkshire*, 2021 at [36]).

Similarly, Treacy LJ in *Re HM Senior Coroner for North West Wales* (2017 at [1]) referred to the death of a deceased woman as a "sad story" and commented: "It is to be hoped that the matter will develop so as to give a degree of closure to the family concerned." In *Frost v HM Coroner for West Yorkshire (Eastern District)* (2019 at [36]), Irwin LJ and Jay J observed in relation

to an application to reopen an inquest into the murder of a deceased person that, "Both families have an obvious interest in bringing closure to these events." In *Power v HM Coroner for Inner North London* (2017), Davies J and Lindblom LJ concluded that a further inquest should be conducted after finding irregularities in an initial inquest and took into account that new evidence had been identified. They commented:

> A jury at a new inquest will be better informed to enable it to arrive at a verdict by reason of properly informed questioning of relevant witnesses, objective and independent assessment of the forensic testing and the original police investigation. It will be open to a new jury to return a narrative verdict which, it is to be hoped, would *bring a measure of closure* for the claimant, who for twenty years has fought tenaciously on behalf of her husband. (*Power v HM Coroner for Inner North London*, 2017 at [42], emphasis added)

If a party to a coroner's inquest does not secure the outcome to which they aspire, this can trigger ongoing appellate and review litigation. In a lengthy sequence of appellate actions, for instance, the daughter of a man who died after aortic replacement surgery, Mrs Shaw, expressed dissatisfaction with the outcome of an inquest and challenged a coroner's findings by applying for judicial review in the Divisional Court. On further appeal, Hallett LJ (with whom Davis and Floyd LJJ agreed) declined the plaintiff's case and commented:

> I am acutely conscious of how much this inquiry means to Mrs Shaw and her family. She undoubtedly genuinely believes the doctors caused her father's death. I know how badly a bereaved person can be affected by the belief that somebody has caused and/or contributed to their loved one's death and not been brought to account. However, to my mind Mrs Shaw's claim is simply unarguable. I confess I am somewhat surprised it has got this far. In my judgment the coroner left no legitimate stone unturned. His inquiry amply met the demands of an Article 2 compliant inquest.
>
> I can only hope that now these proceedings have concluded Mrs Shaw can comfort herself with the knowledge that no daughter could have done more or fought harder to ensure that the circumstances of her father's death were brought to light. I truly hope that she can now complete the grieving process. (*Shaw v HM Coroner for Leicester City and South Leicester* (2014 at [29])

Unfortunately, the hopes of Hallett LJ were not realised. Mrs Shaw then brought a professional negligence claim against the firm of solicitors that represented her at the inquest. Andrews J rejected a strike-out application based upon the argument that the case brought by Mrs Shaw had no realistic prospect of success. However, she noted that all that she needed to do was determine whether there was a realistic, rather than a fanciful, prospect of persuading a trial judge that at the time when Mrs Shaw retained the defendant solicitor's firm to represent her at the inquest, "an important part of that contract was to obtain peace of mind (or as families sometimes put it after an inquest … 'closure'" (*Shaw v Leigh Day*, 2017 at [29]). She found that Mrs Shaw had an arguable case and commented that:

> Inquests have an emotional element that is unique, and absent from other forms of legal process. If the solicitor retained to put the necessary materials before the Coroner and jury does not carry out his or her job with sufficient diligence, the client will never receive that comfort. (*Shaw v Leigh Day*, 2017 at [28])

Later, in denying the civil action brought by the plaintiff on its merits, Andrews J observed that:

> Mrs Shaw failed to obtain answers to all the questions that she wanted answered, and is unhappy with those answers that she did obtain. Having in consequence failed to achieve the closure that she sought, Mrs Shaw has convinced herself that someone must be to blame. She cannot accept that an Inquest will not always succeed in laying to rest all the concerns of the family of the deceased, and that this situation may not be anyone's fault. Although, like other judges before me, I have great sympathy for Mrs Shaw's desire to get to the truth of what happened to her father, that is the position here.
>
> Whilst I have no doubt that Mrs Shaw genuinely feels that Leigh Day let her down, and I reject the suggestion that these proceedings were brought for a financial motive, the simple fact is that there is no legitimate basis for criticism of their performance of their retainer in this matter. They carried out their instructions diligently and competently. The vague assertions that appear in the Claimant's statements of case and which were elaborated on by Mr Berkley in oral and written argument come nowhere near establishing any fault or failing on their part that could be properly characterised as a breach of their professional duties, let alone one that caused any actionable loss. (*Shaw v Leigh Day*, 2018 at [14]–[15])

In Ireland, Kearns P commented in *Lawlor v Geraghty* (2010), an application for judicial review to the Irish High Court after a coroner's failure to grant an adjournment to investigate hospital records in relation to a death associated with a cosmetic procedure in Colombia:

> It is difficult to imagine a more obvious case than this one where a family in the particular circumstances would require clarification about the circumstances surrounding the death of the deceased, not least because it would afford the family an opportunity for some emotional closure on a family tragedy and provide also an opportunity for the making of suitable recommendations at the conclusion of the inquest.

Evident in all these cases is how firmly closure discourse is entrenched in diverse examples of death investigations. The term is used by other coronial professionals and also by families. At the same time, what is actually meant by the word is unclear – this lack of clarity, we suggest below, leads to a range of problems.

The Problem: Probing Assumptions about Closure

In this section we probe and question four common assumptions about closure relevant to death investigations. In doing so, we show some of the ways in which closure rhetoric is impeding the possibility of the mitigation of people's pain. We also question the notion that by not using the word closure, we can neutralise its effects.

The assumptions are that: (1) closure is an emotion; (2) death investigation systems can provide closure for people; (3) closure exists and we know what it is; and (4) what needs closing is clear and commonly understood.

Is Closure an Emotion?

In contemporary Western culture, closure is regarded as an emotion that can be strived for or delivered. As explained in our introduction, closure began to be "emotionalised" late last century: it jumped from being a little-known research term to being treated as a feeling. Closure is now a popular concept connected with grieving and is used to explain what we need after trauma and loss. In 2007, the *Oxford English Dictionary* included this definition of closure: "A sense of personal resolution; a feeling that an emotionally difficult experience has been conclusively settled or accepted." People seek closure and tell others to find it: closure is seen as possible, good, desired and necessary (Berns, 2011, p. 28).

However, there is no consensus among researchers that closure is indeed an emotion. There is no agreed-upon clinical meaning. Closure has an "unearned patina of psychological pedigree" (Bandes, 2021), with sociologist Nancy Berns (2011) pointing out that:

> 'Closure' is not some naturally occurring emotion that we can simply 'find' with the right advice. Rather, closure is a made-up concept: a frame used to explain how we should respond to loss … This does not mean that the pain from loss is just imaginary, but how we interpret and respond to the loss is shaped by our social world.(p. 4)

That closure is regarded as a naturally occurring emotion is distressing for families, who hear the word used by politicians ("This initiative/inquiry/breakthrough will bring closure for the victim's relatives") and by acquaintances ("Have you found some closure?") and read it in the news (Rossmanith, 2024). The term can cause much distress (Dartnell et al, 2023, p. 670), including on the basis that it suggests there should be an end to grief (Kessler, 2019).

The term comes freighted with expectations regarding the feeling you should strive for after the death of a loved one, including expectations regarding "progress" and "finality." Baked into the term "closure" is an assumption that grief is something you "go through" and from which you must "move on." Contemporary grief theorists, however, reject this formulation of grief (including the "five-stage" model developed in 1969 by Elisabeth Kübler-Ross). Bereavement researcher Joanne Cacciatore (2020) argues that "Closure is for doors and cupboards and windows, not for emotions, particularly not for grief. The concept of closure does not apply to grief." She suggests that attempts to "close" or "enclose" grief can lead to "addiction; inauthentic emotions; disconnection from self, from others, from the earth and nature".

Can the Justice System Provide Closure for People?

The notion that justice processes might offer a sense of finality – an end of suffering, even – has gained traction both in popular discourse and the legal context over the last 30 years (Bandes, 2009, 2021). Closure has shaped, and continues to shape, the conversation around the needs of victims (Bandes, 2021). As we stated in our introduction, it has been used to argue for the introduction of victim impact statements in courts (Bandes, 2022) and used by prosecutorial teams to argue for harsher sentences. In the United States, the imposition of the death penalty is portrayed as an act of compassion for bereaved families rather than one of retribution against defendants (Madeira, 2016; Zimring, 2003).

The assumption that the justice system, in particular death investigation systems, can provide closure affects families. Families often expect that such processes will deliver some sort of satisfying feeling of resolution. Obtaining answers and an explanation by way of findings (in Australia and New Zealand) or conclusions (in England and Wales – see Chief Coroner of England and Wales, 2021) delivered by a Coroner into the causes and circumstances of a loved one's death may not produce the feelings that they expect to feel. As a coronial counsellor told Rossmanith:

> Family members have a fantasy they will 'get closure' from a coronial inquest, and that this will manifest as some sort of feeling. Once a matter has concluded in the courts, though, people are unprepared for the complex feelings they feel. Closure – whatever that is – is rarely among those feelings.

Meanwhile, if closure is the expectation created by the justice system, legal actors are left to accomplish it (Rossmanith, 2024). The professionals interviewed by Rossmanith feel it is their responsibility to provide a feeling of closure for people. Police detectives, for instance, report the experience of finally making an arrest in a homicide case and of telling the victim's family in the hope the family might feel a sense of closure (Rossmanith's fieldnotes). Coroners report the experience of making findings regarding the manner and cause of a person's death, expecting that the information will enable the family to feel some closure (Rossmanith's fieldnotes). Police and coroners can feel taken aback when families do not respond as expected. One homicide detective reported that, upon telling a family that an arrest had been made, the family responded, "What took you so long?" Another detective explained:

> Each time you speak with families, you walk them through the evidence. Families have an idea of what happened [to their loved one], or the story that will tell them what happened, and they are disappointed and angry with what is presented to them.

A third homicide detective explained how he felt he could never satisfy some families, and how he wished he could: "We may have solved a case and yet still the family will phone me again and again asking for more details. I keep trying to obtain more details for them." A coroner reported that, despite providing what she regarded as comprehensive information to a family regarding the death of their son, she received repeated correspondence from that family seeking more information when there was none to give.

Research is yet to determine whether justice processes can indeed deliver a form of "emotional closure" for people. While the legal system does demand certain kinds of closure ("case closed"), these kinds "may not track the sorts of therapeutic or spiritual closure victims [and families] seek" (Bandes, 2000, p. 1606). The small amount of existing empirical research on closure shows a range of experiences. Some evidence suggests that in cases of sexual assault, victims who deliver victim impact statements in court find the experience empowering (Davies & Bartels, 2021); however, victims can also feel retraumatised by delivering such statements and more research is needed (Bandes, 2022). Regarding capital cases in the United States, research indicates that executing offenders does *not* provide relief for victims' families and can be retraumatising (Armour & Umbreit, 2012).

Does Closure Exist and do we Know What it is?

Contemporary grief scholars question the usefulness of closure as a concept. Frameworks such as the "continuing bonds" model of grief (Klass et al., 1996), the "dual process" model (Stroebe & Schut, 1999) and "ambiguous loss" (Boss, 2021), for example, overtly reject the model of closure. Similarly, psychology scholars include "closure" in a list of 50 commonly used terms in psychology, psychiatry and allied fields that should be avoided: they argue that closure has been misappropriated by pop psychology "to describe the purported evidence of emotional resolution experienced by victims of trauma" (Lilienfeld et al., 2015).

We have pointed out, too, that research on closure shows a persistent vagueness in definition. Berns (2011) has demonstrated how, in Western cultural contexts, closure has been used to mean quite different things. She identifies six main ways in which people understand the feeling of closure:

1. "Closing a chapter" refers to the wrapping up of a traumatic event (e.g., burying a loved one, ending a court case, finalising a divorce).
2. "Remembering" involves commemorative practices, where people "end the fear of forgetting" a loved one by having "figured out how to remember".
3. "Forgetting" involves "getting rid of reminders of something that caused a lot of pain" to then be able to "move on."
4. "Getting even" refers to people's need to end the injustice, pain, and anger in their lives through revenge.

5. "Knowing" is a type of closure talk that is especially relevant to death investigations: "[F]amily members live with haunting questions. Some people argue that having answers to these questions … is supposed to end the unresolved questions and worries."
6. "Confessing" or "forgiving" is regarded as a type of closure wherein confessing or offering an apology can provide closure by ending guilt or shame. Similarly, receiving an apology or forgiving someone helps one find closure by ending anger (2011, pp. 22-27).

In summary, there are very different types of closure talk used in everyday contexts, each type implying a different theory or strategy to achieve closure. At the same time, it is rarely acknowledged that there are such different ways to understand closure.

In justice system contexts, closure is "an unacknowledged umbrella term for a host of loosely related and empirically dubious concepts" (Bandes, 2009, p. 1). Bandes (2009) suggests that closure has been variously understood as:

> a sense of catharsis at having spoken publicly, in the courtroom, of one's loss; a constellation of feelings (peace, relief, a sense of justice, the ability to move on); and the ability to find answers to terrible questions, which might require the verdict or imposition of a sentence. (p. 2)

Meanwhile, the dearth of research on the experiences of victims and families means we know little about what people mean when they use the word closure "and how that compares with what criminal justice professionals do" (Goodrum, 2020, p. 1).

For families, the disconnect between the certainty with which the word is used in public discourse, and the "definitional confusion" accompanying it, is upsetting (Rossmanith, 2024, p. 304). When people think of the concept of closure, they are "uncertain what it is precisely they are imagining or supposed to imagine – and therefore they are unable to orient and direct themselves in relationship to it" (Rossmanith, 2024, p. 304). (A woman whose adult daughter was murdered told Rossmanith: "It's hard to know what closure is. It's not the right word")

This is not helped by the way legal endings (the conclusion of legal processes) do not map easily onto common ideas about narrative and the way stories (in Western contexts) are expected to end (Bandes, 2024a; Rossmanith, 2020). There is a sense of inadequacy, failure and frustration for families if, at the end of a death investigation such as a coroner's inquest, in spite of the provision of findings and recommendations to avoid similar tragedies, they do not experience a feeling they expected to feel. Even terms such as "justice" and "accountability," sometimes linked to the concept of closure, are left undefined. Jacobson et al. (2024), in their large interview study with families, found that: "Respondents did not define the broad concepts of "justice" and "accountability", and expressed mixed views about whether or how the coronial process could deliver them" (p. 12).

As well as definitional confusion, some families experience "existential destabilisation" (Rossmanith, 2024, p. 305). They are suspicious of the idea of closure and feel conflicted: Is closure really a thing, or isn't it? Closure, for them, "is two-faced: a hopeful promise and a hoax" (Rossmanith, 2024, p. 305).

More generally, because so little empirical research exists regarding closure as an emotion concept, how closure is conceptualised by people from various and varying cultural and religious backgrounds is also yet to be understood.

Is What Needs Closing Clear and Unanimous?

Popular usage of the term closure presumes the existence of something that needs closing and that can be closed. What that thing is, though – its scope and shape – may be different depending on the institutional framework to which it is assigned, and different for different people (including individuals within the one family). "Who or what identifies the nature of the unclosed thing that needs closing? In other words, closure of what, and for whom?" (Rossmanith, 2024, p. 305). A woman whose husband was killed said to Rossmanith: "*Closure*? Closure to *what*?"

A public inquiry, for example, might conclude and in doing so deliver a sense of closure for the people who presided over it, while bringing no feelings of resolution for the people who testified (Rossmanith, 2024; see also Jacobson et al., 2024). At the conclusion of an inquest, it is standard for findings to be delivered by the Coroner in relation to the manner or circumstances of a death and what has caused that death. This process is important and can provide some solace and understanding through its explanatory and clarifying role. However, constraints imposed by the available evidence often result in findings that are limited or unsatisfactory from the perspective of family members, who may have their own views about what occurred, fault on the part of persons associated with the fatality and what could have been done to prevent the death (see Jacobson et al., 2024). At the extreme end of this is the potential for an "open finding" or "open conclusion" (Matthews et al, 2024, p. 13) to

be delivered, which does not determine conclusively what occurred. In addition, in many jurisdictions findings phrased by reference to a crime having been committed or negligence having been engaged in (as found in civil actions) are proscribed (Freckelton & Ranson, 2026 in press), again denying to family members the clear denunciation and categorisation to which they may have aspired.

In some instances, the word "closure" can be an affront to people experiencing ongoing injustice and structural inequality on a daily basis. The term "ideological closure" (Burton & Carlen, 1979) is used by scholars to critique the ways in which official records produced by the state formally conclude matters that, for many of the people involved, are anything but settled. Scholars have recognised how, regarding inquests into the deaths of Indigenous people in state custody or "care", for example, constraints imposed on the institution of the Coroner have prevented coroners from considering the broader history of institutional racism and colonial violence (Klippmark & Crawley, 2018; see also Newhouse et al., 2020; Razi, 2024).[4] The recent inquest in Victoria, Australia, into the death of Tanya Day, a proud Yorta-Yorta woman, saw the beginnings of coronial change regarding scope: Ms Day's family "succeeded in arguing that the inquest scope should include a consideration of the role of systemic racism in her death" (Scott Bray, 2020, p. 11; also see Whittaker, 2019; https://www.humanrights.vic.gov.au/legal-interventions/coronial-inquest-into-the-death-of-tanya-day-apr-2020).

A source of some solace to family members lies in recommendations for change to public health and safety. However, affected entities (e.g., hospitals, government departments, police, correctional institutions) are under no obligation to implement coroners' recommendations and often do not – for diverse reasons, including not accepting the analysis of the coroner, having already undertaken other measures in response, or not being prepared to engage in the necessary expenditure. For family members this is extremely counter-therapeutic: they feel disillusioned, frustrated, and angry (see Jacobson et al., 2024; McCabe & George, 2021; Newhouse et al., 2020).

By not Using the Word "Closure", can we Neutralise its Effects?

A grief counsellor told Rossmanith that she and her colleagues call closure the "c" word and tell homicide detectives not to use it (Rossmanith, 2024, p. 306). Detectives are not to say to families: "Hopefully this arrest will bring you some closure." The family members interviewed by Rossmanith feel grateful when the word is not used. This might prompt us to wonder whether we should simply stop using it. Some coronial professionals have reported how, when speaking with families, they "avoid distressing phrases" such as "I hope you've got some closure now" (Dartnell et al., 2023, p. 670).

However, "[a]voiding the use of the word 'closure'" will not automatically "neutralise its effects" (Rossmanith, 2024, p. 307). This is because words exist within fields of discourse, in patterns of language as well as in attitudes. Closure did not appear from nowhere and does not exist in a vacuum. As noted earlier, the emergence of closure is connected with the 1980s victims' rights movement in the United States, along with therapeutic paradigms, and the West's emphasis on happy, inspiring resolutions (Berns, 2011). Closure's "meteoric rise" as an emotion concept (Bandes, 2009), and the thriving industry it now supports (businesses sell the promise of closure to people), has resulted in many other words standing in for closure. We might actively resist using the word only to find that synonyms of healing and completion flood in to replace it.

In coronial contexts, synonyms for closure can have the same counter-therapeutic effects as the word itself. A discourse of progress and resolution, for example, can easily conjure the idea of closure. The language in the cases we touched upon in the first half of our article contains phrases from judicial officers such as "she can now complete the grieving process", achieving "peace of mind" and how being prevented from "obtaining closure" has "prolonged [a family's] grief." Implied here is the idea that grief concludes, that it has an ending and that inquests can help provide that ending.

Synonyms for closure can too easily be invoked by any of us, even by those who are suspicious of the term. Ideas regarding progress and resolution (and therefore closure) covertly exist in the way different frameworks for grief have been taken up by people – even when those frameworks overtly reject closure as a useful concept. This is in part because, as scholars note, grief has largely been conceptualised as involving a narrow understanding of time (Hughes, 2024; see also Rossmanith, 2024). Similarly, those who critique closure might nonetheless unwittingly gesture towards it. Nancy Berns' (2011) work questions the concept of closure, for instance, yet throughout her monograph she invokes the trope of "a journey" – that a person who grieves is on their own particular journey. Journeys can imply direction, progress and destination.

Even a term such as "healing" can, in some instances, inadvertently imply closure. This is when healing is tethered to an expectation of progress and mastery ("the wound has healed over"); when transformation from "before" to an "after" is stridently implied; when "heal" sounds like a domineering verb, a burden placed on individuals and communities (Tumarkin, 2022) and an expectation that it will occur when certain processes have occurred or a particular time has passed. Not all uses

of healing are necessarily so freighted.[5] In the inquest into the deaths of seven people at a Sydney shopping centre, for instance, the State Coroner thanked a witness, saying that she was confident that the witness's words "will help in … [the] healing" of first responders and bystanders" (Bondi Inquest, 2025, p. 108). Here, healing perhaps refers to an ongoing state of being rather than an endpoint. Because "healing" can be co-opted into the category of closure, though, some researchers have wondered whether, in justice contexts, "feeling better" is more modest an aim and might be preferable to a term such as healing (Ahmed, 2014; Tumarkin, 2022).

Conclusion

Coronial professionals are increasingly viewing the work they do as having a therapeutic function (Freckelton, 2007; Freckelton & Ranson, 2026 in press; King, 2008; Trabsky & Baron, 2016; Roper & Holmes, 2016), as well as to clarify and formalise the public record in relation to the causes and circumstances of deaths. However, what the therapeutic function looks like, and might look like in practice is a matter of ongoing collaboration and discussion (see Dillon, 2024), including where deaths occur in the potential context of suicide (Carpenter et al., 2015; Tait & Carpenter, 2013) and where participants in an inquest may have disabilities (Ryan et al., 2024). It is being influenced, particularly in Australia and New Zealand, by scholarship on therapeutic jurisprudence that seeks ways of maximising the pro-therapeutic effects of death investigations and minimising those that are counter-therapeutic (Freckelton, 2007).

At the very least, investigations into deaths should not have significant or unnecessary anti-therapeutic consequences. Death investigations should be thorough and respectful of families and the dignities and rights of all parties. They should involve sound and sensitive decision-making that makes strong intellectual efforts to clarify, so far as possible, what were the circumstances preceding death and the factors that played a role in bringing about death and, where appropriate, they should probe steps that might be adopted to reduce the potential for comparable deaths to be avoided in the future. They should be trauma-informed and grief-aware, so as not to compound distress and involve unnecessary reliving of traumatic circumstances.

In this article, we have suggested that closure and its synonyms comprise rhetoric that can have unintended consequences; and that the language of closure used during death investigations is something that can be attended to more precisely. While closure' might at first glance be an appropriate term to describe the conclusion of legal processes, even this is not helpful in the context of inquests, which can always be reopened on the discovery of new evidence. However, it becomes counter-therapeutic when referring to an emotional state. We have suggested not only that professionals should avoid this particular use of the term "closure", but that they should also be sensitive to the too-easy ways in which other terms and phrases operate as synonyms or something close to synonyms (e.g. "heal", "move on", "an ability to put this behind you").[6] This is a challenging endeavour: ideas of closure-as-a-feeling and an aspiration are baked into the structures and processes of the coroners' courts and, more generally, into Western contemporary discourses and expectations about grief. To avoid closure language, coroners' courts may need to reframe what they can realistically offer so they do not create expectations that may not be able to be realised.

The uncritical assumption held by Western legal institutions that the justice system can provide emotional closure for people is partly a consequence of the law's discomfort with grappling with the role of emotion (Bandes, 2009). Questions for further study, we suggest, could include the development of a more nuanced understanding of emotion's role in death investigation systems such as coroners courts.

An issue for further consideration, for example, is how coronial professionals might become more aware of their own "epistemic emotions": how subtle emotions of peaked interest, doubt and certainty play a central role in legal decision-making (Bergman Blix, 2022; see also Bergman Blix & Wettergren, 2018; Vogl et al., 2021). Actors involved in death investigations – police, forensic pathologists, grief counsellors, lawyers and coroners – may, in fulfilling their professional duties, experience a sense of completion, and they may assume that the certainty and resolution *they* feel at the conclusion of a particular case will translate into a corresponding feeling for bereaved families – that is, a feeling of closure. Might a better recognition of the role that the feeling of certainty *as* a feeling plays in the working lives of legal professionals result in a greater understanding of how "emotional closure" is inadvertently promised to families?

Another issue for further study is how to converse sensitively with bereaved family members who themselves may aspire to "closure." If the use of closure language by coronial professionals is to be discouraged, how should we respond to family members who might declare "I need closure" or "an inquest will provide me with closure" or "I have found/not found closure?" Might family members be encouraged to reflect on and articulate what they mean by the word "closure" and what they anticipate closure would feel like?

Finally, in what ways might closure language reproduce particular ideas about families' roles in inquests? To what extent might such language frame or limit the role of family members as one of memorialisation? Does the intimate conceptual connection between closure and grief mean closure language conceptually designates families as mourners? Does this designation have the unhelpful effect of downplaying, even failing to recognise, additional roles in which family members see themselves, such as in the role of campaigners and activists?

Our hope is that these questions, and more, will comprise constructive topics for future research on the relationship of closure with coroners courts.

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[1] Rebecca Scott Bray and Marc Trabsky (2024), for example, map how discretionary coronial decision-making around suicide – that is, decisions about whether or not to hold a public inquest – "developed in the historical governmentality of death."
[2] We employ this term to refer broadly to coroners, legal practitioners (solicitors and barristers who represent "interested parties" at inquests), forensic pathologists and other medical death investigators, as well as employees in coroners courts.
[3] Examples of newspaper headlines include: "No closure for Granny Killer victims' families" (*Sydney Morning Herald*, 11 September, 2005); "Kogarah crash victim's mum seeks closure" (*Sydney Morning Herald*, 2 December, 2008); "Victims of a 4.2m swindle find closure" (*The Australian*, 30 April, 2013); " 'No body, no parole' " to bring closure" (*Daily Telegraph*, 16 October 2016).
[4] Evolving digital cultures (e.g., public databases, podcasts, live tweeting of inquests) are supporting an increasingly interactive public dialogue around such deaths in contested circumstances (Scott Bray, 2020). These new sense-making practices, Scott Bray argues, are shaping a public dialogue "where coroners' courts and coronial findings represent anything but ideological closure around death" (2020, p. 11).
[5] The term "healing" is sometimes used by Aboriginal support officers when assisting Aboriginal people and families to navigate the coronial process. This usage of "healing" does not mean "closure", nor does it imply people will be "healed."
[6] In the lead-up to the 2025 delivery of the Territory Coroner's findings in the high-profile inquest into the death of Warlpiri-Luritja man Kumanjayi Walker, a relative of the deceased man stated publicly: "We are heartbroken and exhausted after many long years, but we are hoping change is coming. We have faith that the truth will finally be told, and want to see real change so that we can finally start our healing" (Brennan, 2025).

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