

Editorial

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Few of you while reading the spring 2020 edition of *Bereavement Care* would have projected yourselves into the future we now find ourselves in. We are in a radically changed world, a world defined by loss and grief experiences on a societal and global level, a world where all we held close has been ruptured – our safety, our goodbyes, our funerals, embraces and handshakes of condolence. Our hearts have been opened at the thoughts of people grieving alone in prolonged physical isolation. Our core concept of social support has needed reshaping. Our carefully developed bereavement care services have been faced with almost overwhelming challenges – shifting very rapidly the way they deliver services from primarily face to face to telephone and web-based support. As this aggressive first cycle of crisis moves on, we are more likely to question, reflect and review.

For readers of *Bereavement Care* some of those core questions might be ‘What do we actually understand about grief and bereavement?’ ‘How can we be sure our supports are helping?’ These are certainly very important questions for how we emerge from the pandemic crisis and begin to cope with bereavement and loss. However they are also very good questions to use in ordinary time. The authors of papers in the current issue of *Bereavement Care* have, in various ways, sought to expand our understanding of bereavement (e.g. Whiting’s touching reflection of a son’s experience of his mother’s death and Hussin and Aho’s enlightening study of fathers’ experience of a child’s sudden death). Other papers in this edition examine the ways in which we provide support – Ali and Lucock explore the additional benefit of peersupport for suicide bereavement; a study on how psychologists support bereaved people with intellectual disability is contributed by Irwin et al; Wallace et al provide a consideration on how continuing bonds may be prompted and enhanced through technology; and Hewison and colleagues offer a review of the published studies on bereavement support seeking to determine its effectiveness.

Hewison et al’s review concludes that still the evidence for bereavement care remains weak, primarily because research quality is poor. More specifically, the absence of strong research literature for working with bereaved people with intellectual disability is the spur for Irwin et al’s study in this edition, gathering practice experience from psychologists. In a way this lack of formal high-quality research is a call to arms for researchers and practitioners

to work together, to question what they do and to devise ways of tracing and assessing its impact.

An important contribution of Hewison’s review is the critical question of what aspect of bereavement is being studied and they highlight a theoretical continuum of phases – anticipatory bereavement; bereavement at the time of death; and bereavement following death. Other articles in this edition echo and validate this perspective. In particular David Whiting’s account of grieving for his mother stretches very naturally across this temporal frame, while the studies on traumatically bereaved fathers (Hussin and Aho) and suicide bereaved (Ali and Lucock) focus on bereavement at the time of sudden traumatic death and the long path of bereavement following death.

While research tends to examine only one intervention at a time, the complexity and dynamism of grief can require a multi-faceted approach. This point is well made in the case of peer support which meets different functions to professional counselling. Again alluding to the shifting nature of grief through time, Ali and Lucock make the point that peer support is ongoing while counselling operates in a defined short term. Choice and a combination of supports over time may best serve bereaved people.

‘Ongoingness’ is a term introduced by Wallace et al to build upon the continuing concept. Their article projects some potential uses of technology, including engaging with the person facing death in the anticipatory grieving phase and considering ways they might plant memories or connections to be accessed in the post bereavement phase. A stimulating article with futuristic undertones.

Above all, the articles in this issue highlight the interpersonal and social nature of grief, we grieve important others, and we make sense of our grief through interaction; we yearn to gather with others in informal and organised ways (e.g. peer support). We utilise professional talking therapies to help in our coping. Covid may have shifted some of our physical connections, but our emphasis going forward must be on creatively preserving social and interpersonal supports. Kitty O’Meara’s poem leaves us with some optimism.

‘And when the danger passed, and the people joined together again, they grieved their losses, and made new choices, and dreamed new images, and created new ways to live and heal the earth fully, as they had been healed.’

<https://the-daily-round.com/2020/03/16/in-the-time-of-pandemic> ■