

COUNSELLING BEREAVED CHILDREN

be redressed by voicing feelings and having them heard. Although not a wholly cathartic experience, this can release some of the emotional tension associated with the event.

The fourth level is for bereavement-related worries and these may be continuing to have a powerful effect upon the child. For example, the child may be profoundly troubled by anxieties about the welfare of a surviving parent. This anxiety may be most apparent in an inability to tolerate unpredictable or extended separations, or be manifested in angry reunions when parents return home or come to collect children who have been waiting for them. What we see is a cross child who continues to be grumpy and fractious long after the time of the parent's return. In the circumstances it may appear quite reasonable either to reprimand children for moodiness or send them to their room. Unfortunately either of these responses only serve to increase the child's anxiety because the underlying cause has not been

understood. The sequence of anxiety, inappropriate response and anger swiftly creates tensions the child is obliged to contain - and so the emotional pressure increases.

The final layer is for the experiences which trigger off the behaviour which has been defined as 'angry'. Maybe another child has said something relatively innocuous but, because the bereaved child is already having to contain so many other stressful thoughts and feelings, this otherwise unremarkable comment triggers off an eruption of anger. The angry response often far exceeds the event and can frighten both children by the intensity and level of the angry child's behaviour. It is at this point that the lava of anger boils to the surface and spills down the sides of the volcano, destroying everything in its path and making everyone around run away. In this way children can see that explosive anger drives people away, and isolates them at a time when they need more friends and support, rather than less.

By understanding the ways their anger has built up, children can begin to explore what they want to do about it. Some issues may, with help, need to be discussed with the parent; others the child may need to think through with a social worker or counsellor. There may be some things which children cannot look at and others which they want to think about for themselves. The volcano metaphor enables children to locate the different levels of their anger and emotional life and be helped to construct strategies to manage them.

Although I am here describing work with a child, the applications of this metaphor are unlimited by age and it is equally useful in working with teenagers and adults. The volcano image lends itself to analysis of the process and effects of anger, allowing the individual to explore the personal elements that go to make up this complex emotional state and then go on to construct ways of controlling the repercussions. BC

NEWS AND VIEWS

WELCOME

New Editor for *Bereavement Care*

In March this year, the Editors were pleased to welcome Martin Newman as a new member of the Editorial Board of *Bereavement Care*. Dr Newman is consultant and honorary senior lecturer in child and adolescent psychiatry with the South West London and St George's Mental Health NHS Trust and Medical School.

His varied experience includes service as a medical officer with the Royal Navy in the Falklands, and a placement at the Traumatic Stress Clinic (London) which originally stimulated his interest in working with young people. Widely-published, he co-edited *Psychological Trauma* (London, UK: Gaskell, 1997) and has contributed a paper to *Bereavement Care*, 'Helping children after a traumatic bereavement' (1995; 14[2]: 18,19).

LETTER TO THE EDITOR

Dear Editor

Whilst I was interested to note your abstract of my article from *Mortality* in the Spring edition of *Bereavement Care* (1999; 18[1]: 16), I was concerned to see that there were four significant errors in your text:

My name, which was given as McAllen J, is McLaren J;

Para 2, line 9: you quote 'emphatic understanding' whereas the article was concerned with empathic understanding, which is an entirely different concept;

Para 2, lines 2-3: your text states that I am 'a bereavement counsellor, though with no formal training'. What I state in the *Mortality* paper is, 'I believe I am at an

advantage in not having trained as a bereavement counsellor' (p280, last para). The emphasis in this sentence is on bereavement which is obvious when placed in the context of the paper. I have, in fact, received extensive professional training over a 16-year period in counselling and psychotherapy.

Whilst I recognise an abstract cannot summarise all areas addressed in a paper, a substantial part of the *Mortality* paper argued that, in my experience, the bereavement counsellor works in a diverse way. In particular, I challenge Walter's assertion that the main purpose of the counselling process is 'the working through and resolution of feelings' (p285, para 3). In focusing upon whatever clients choose to bring to our sessions, I state that 'this may be feelings associated with their loss but equally, much of our time is spent addressing cognitive issues. Feelings and thoughts merge on a continuum' (p285, para 3). This was ignored in the abstract.

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We apologise to Jan McLaren for incorrectly printing her name and the word 'emphatic', and for omitting part of the argument from her original paper. Eds.

FORTHCOMING EVENTS

Bullying, Suicide and Self-harm. 11 November, 1999. London, UK. Kidscape conference. Speakers include Michael Kerfoot, Richard Graham, John Coleman, Alison Hall, Alison Weisselberg. Apply to

Lisa Flowers, 2 Grosvenor Gardens, London SW1W 0DH. ☎ 0171 730 3300.

Children and Death. 5-8 September 1999. Bristol, UK. 4th international conference, chaired by Peter Fleming, with over 20 speakers. Details from EMAP Healthcare, Greater London House, Hampstead Road, London NW1 7EJ. ☎ 0171 874 0294.

'Saying Goodbye?': Current issues in bereavement research and practice. 26 November 1999. Southampton, UK. Multidisciplinary day with lectures and workshops. Speakers: Tony Walter, Margaret Stroebe. Contact Jo Mai, Palliative Care Dept, Portsmouth HealthCare NHS Trust, c/o The Rowans, Purbrook Heath Road, Waterlooville, PO7 5RU. ☎ 01705 250001.

Challenges in Bereavement into the 21st Century. 4 September 1999. Manchester, UK. Manchester Bereavement Forum's 6th annual conference. Speakers include Colin Murray Parkes, Jack Morgan, Kevin Kendrick. Write to 362 Manchester Rd, Droylsden, Manchester M43 6QX. ☎ 0161 3718860.

Mole Conferences Events. London, UK. **Post Traumatic Stress Disorder.** 22 October 1999. Conference organised by Stuart Turner of Stress Studies UK. **Death and Dying: Facing grief.** 8 November 1999. Training course with Lyn Franchino. **Gone but not Forgotten: The impact of past trauma in later life.** 21 February 2000. Conference. **Suicide: The ultimate abuse.** 29 March 2000. Conference. Contact Mole Conferences, 26 Church Road, Brighton BN41 1LA. ☎ 01273 242634.