Working with young people

SOMEWHERE OVER THE RAINBOW (training pack)

Maureen Hitcham (producer)

Newcastle-upon-Tyne, UK: Malcolm Sargent Unit, Newcastle Royal Victoria Infirmary, 1993. £40.00

t was a privilege to be asked to review this beautifully presented, sensitively produced video and workbook. Maureen Hitcham's gentle professionalism and creativity in working with families where there is serious illness are well known amongst her colleagues, locally and nationally. (Maureen's daughter was very ill at one time and she and her husband suffered all the torments that parents in this predicament have to withstand.)

The video, taken from film shot for a documentary about children's hospitals, is in two parts. Part I features Graeme, aged six, with aplastic anaemia (not a malignant disease but with treatment and implications similar to cancer) and his sister Rachel. Both are interviewed by Hitcham and talk freely about their feelings in this situation. It is suggested that showing this to newly-diagnosed families may be a way of involving the whole family at an early stage.

Part 2 focuses on bereaved parents Ann and John and their daughter Nicola, aged 13, and shows how a sibling's grief can frequently be overshadowed by the intense reaction of the parents. Excellent notes are provided with the video and it is emphasised that a professional should be present throughout each showing.

The video will be useful to nurses and professionals in training. Teachers who have a child in their school with a life-threatening or serious illness would find it helpful in preparing them for dealing with parents and siblings, as well as the sick child. The supporting pack is also excellent, with advice on communicating with children and direct-work techniques with siblings and children suffering a life-threatening illness. It includes an introduction to the subject, instructions on how to use the video, notes for parents and for teachers, a section on self-support and a recommended reading list.

Congratulations to Maureen Hitcham and the Malcolm Sargent Social Work Department on an excellent resource.

GRIEF SUPPORT PROGRAMME for children and adults (handbook)

St Helena Hospice. Colchester, Essex CO4 4SF: St Helena Hospice, 1997. £5

St Helena Hospice has been running a programme of group grief support for children

since 1993. Their griefwork handbook is intended as an aide-memoire for their own group workers, and all the other professionals and concerned people who have taken an interest in their programme. It is very user-friendly, clearly presented with excellent photographs and graphics. It contains 17 group activities for those aged from five-years-old to adult with sections on the purpose of the programme and information for group workers. Excellent notes are given on facilitating groups for children and adults, support for group workers and debriefing/feedback sessions.

I was delighted to see spelt out in the foreword the use for which manual was designed, that is, specifically to meet the needs of children and families whose lives have been touched by the death of someone through physical ill health. Too many training packs try to be 'all things to all people'. The Hospice also emphasises that the programme needs to be facilitated by experienced and qualified workers, as well as trained volunteers.

There is no copyright on the manual but all proceeds raised by its sale will fund the Children and Families Grief Support Programme. I commend this pack to all professionals working in this area.

SIBLING BEREAVEMENT*

Ann Farrant

London, UK: Cassell, 1998. £14.99

After a child's death, parents are generally so preoccupied with their own grief that all their focus is on the dead child and, as I wrote in Healing Grief* (London, UK: Randon House, 1994), siblings' needs can easily be overlooked. This welcome book illustrates the problems.

Ann Farrant, a freelance journalist, draws on her own personal experience and that of Betty Rathbone, a consultant psychologist. Using real-life case studies and an easily read, non-academic style, she describes the effects, on the whole family, of a bereaved sibling's grief—the repercussions of lack of support, surviving children who act as comforters to their parents, guilt, projected anger, unresolved conflicts and children who cannot or who refuse to mourn.

I highly recommend this much-needed book. Apart from some scenes in the video Somewhere Over the Rainbow (see above), the only other information I am aware of on this topic comes from the newsletter and support group for bereaved siblings (SIBBS), started by the Compassionate Friends.

WHAT IF? (teaching pack) Young people and bereavement

Lawrie Adam

Aston-under-Lyne OL6 9NQ, UK: Cranleigh Communications with St Catherine's Hospice, Preston, Lancs, 1998. £37.00 inc p&p

This pack consists of a 25-minute video and a folder containing work sheets, information sheets and suggestions for discussion. The first part of the video tells the story of Phil, a young teenager and proud owner of his first motorbike, who is killed in a tragic accident. In the second part, different people share their experience of losing someone close to them. Death of grandparents and the common feelings of grief are mentioned, though it is emphasised that experiences of grief are unique to each person.

The aim of What If? is to challenge young people with the implications of bereavement and to suggest healthy ways of approaching the death of a loved one; this aim was best achieved in the second part. The build-up to the accident at the beginning of the video is too long and Phil's aggressive manner to his elderly neighbour and sister do not add to the story or to our understanding of bereavement. In contrast, the comments in the second part from young people about the effects of moving, changing school and divorce are particularly helpful (though I would also always start with loss and end with death, not vice versa as in this video).

There are good suggestions in the work pack for the use of the video and notes on, for example, subject specialism and ideas for a two-week session or a term's work including relevant visitors. The folder and notes are very flimsy and could easily get damaged or lost - a bound folder with pages that could be photocopied would be preferable.

My main concern with this pack is that there are no background notes for teachers or youth workers on 'setting the scene' or the importance of debriefing. Also not mentioned is the need for this subject to be included in an ongoing programme. The danger is that this pack could be used as a 'one off' because someone has died or because the school or teacher feels the issue needs covering. I find that sensitive areas like death are better approached through case studies and small group discussion.

Barbara Ward

Bereavement Counsellor, Advisory Teacher and Trainer

* Both available from Cruse Bereavement Care, 126 Sheen Road, Richmond TW9 1UR, UK.

Death in a violent world

RETHINKING THE TRAUMA OF WAR

Patrick Bracken, Celia Petty
London/New York: Free Association Books Ltd, 1998.
£35 bb. £15 95bb

ave the Children Fund (UK) organised a two-day international conference in 1996 bringing together professionals from all over the world who had been involved in helping adults and children, both during and after war. The conference was the direct stimulus for this book, much of which is based on papers presented there.

The editors point out that models developed in Western psychiatry to describe responses to trauma (for example, post-traumatic stress disorder) may not be appropriate for use in other cultures and societies. They hope that their book will open a debate about 'trauma work' and help international organisations to rethink their involvement in such work so that perspectives from the developing world are included.

The first chapter, by Derek Summerfield, is a fascinating and informative discussion of the collective experience of war and its social and cultural dimensions. The contributions which follow are interesting and wide-ranging, covering such topics as the cultural assumptions involved in Western psychiatric approaches to trauma, illness and healing, child combatants, survivors of rape, refugees, and children separated from their families. There is consideration of the experiences of asylumseekers in the west. Useful reference lists are provided with many chapters.

I have already used this resource in my work, and advised others to do so. The book deserves to be widely read and I strongly recommend it.

Dr Martin Newman

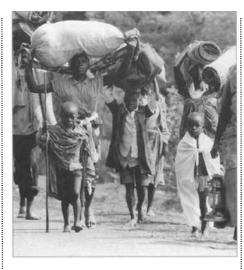
Consultant Child and Adolescent Psychiatrist

DEATH WITHOUT WEEPING: The violence of everyday life in Brazil

Nancy Scheper-Hughes

Bognor Regis, W Sussex, UK: University of California Press, 1992. £35.00 hb, £15.00 pb

'A young mother came to me with a very sick and wasted baby. Seeing that the child's condition was precarious, I rushed with him to the local hospital, where he died soon after, the desperate efforts of myself and two clinic attendants notwithstanding. I was devastated and frightened. How could I break the news to



From Rethinking the Trauma of War © Alan Forster

the child's mother?...I wept bitter and angry tears all along the way. To my great wonder and perplexity, however, the young woman took the news and the bundle from my arms placidly, almost casually. Nancy Scheper-Hughes was to find that this lack of mourning for the death of small babies is the normal response among the poor Nordestinos of Brazil. As one woman said, when she asked if prayers were to be said before the body was taken from the house, 'It's only a baby!'

Scheper-Hughes documents in great detail the lives and deaths of these people in whose lives violence and death are commonplace. Her observations raise important questions about the nature of grief and of human attachments. In the course of long and detailed field work with the Nordestinos she found no evidence of delayed grief and concludes that it is not the grief but the attachment that differs from that found in more affluent cultures.

The reaction becomes comprehensible once we recognise that so many babies die in that society that it is necessary for mothers to have 10 or so babies if two or three are to survive to adult life. Mothers do not get seriously attached to their babies until it is clear that they have a good chance to survive.

How does this influence the personality development of the babies? Scheper-Hughes found no evidence that they are seriously damaged by the lack of maternal attachment in the first few months of life. But this does not mean that mothering is not important or that there is no human psychology that transcends culture. Rather it serves as a challenge to those who have now developed systematic ways to study attachment patterns to carry out similar work with populations having high infant mortality.

This account reminds us that it is not long since our forebears too had large families because they expected that most of their babies would die. In world history our current society is the exception rather than the rule!

Colin Murray Parkes Consultant Psychiatrist

HOMICIDE: The hidden victims Deborah Spungen

London, UK: Sage, 1998. £36.00 hb, £14.99 pb

Deborah Spungen is trebly qualified to write Homicide: The hidden victims. She is herself what she would call a 'co-victim', her daughter having been killed in a notorious murder. She then became the founder of a 'victim advocacy' group, Families of Murder Victims, and reconstructed herself as an expert on the experience and management of traumatic bereavement. Her book clearly lays out many of the major problems which follow in the wake of homicide: issues associated with the abrupt disclosure of news about violent death; the difficulties of dealing with a police force initially suspicious of the co-victim and often illequipped to perform what it may define as 'social work' tasks; the control of anger and bodily disturbance; the stigmatisation and disempowerment of co-victims; the habit of victim-blaming that holds the dead responsible for their own fate; fear, vulnerability, guilt, shame and the disenfranchisement of grief.

Spungen writes about the need to talk frequently and, indeed, sometimes obsessively, about loss and pain, the need to memorialise the dead, the importance of ritual, and the catharsis of victim impact statements in court. She deals effectively with the pitfalls of treating grief as a career with set stages which must be traversed. Particularly well-argued is her analysis of the manner in which homicide can transform family relations, and she includes in those relations the partners of gay men and women, step-parents and grandparents, as well the members of the nuclear family. One of the most harrowing questions which the parent of a murdered son or daughter can be asked is 'how many children do you have?' She recognises, as many in her position have not, the moral contradictions and torn lovalties that can face those who are at once related to the victim and the offender.

It is perhaps inevitable that there are gaps in the book's analysis. Bearing the traces of her own group's separation from Parents of Murdered Children, America's extensive

organisation of support groups for the families of homicide victims, Spungen has remarkably little to say about the practice of mutual aid after homicide, although support groups are probably the most widespread, accessible and, for some, the most efficacious remedy available to the bereaved. She says too little about the almost omnivorous appetite for information which drives co-victims on in their quest for understanding and control in the aftermath of murder. Many co-victims need desperately to comprehend what befell them in order to regain some sense of moral and social purpose. She says something about the anger that can beset those who grieve, but little about the way in which it can furnish a new identity, that of the angry survivor; lead to rifts in organisations established to support and campaign for 'covictims'; and bring about rancour and confusion in encounters between members of those organisations and policy-makers, politicians and people working in criminal justice agencies.

Homicide is a book written by an American for an American readership, and its provenance shows. Not only is murder more frequent in the USA than in the UK and other countries. but its structure and character are also distinctive. There is, for instance, a significantly higher proportion of killings by strangers in America, a correspondingly larger number of unsolved homicides, and attendant problems of uncertainty, fear and lack of closure for the covictim. There is a lengthy section on special issues to consider in the murder of police officers which would not be warranted in an equivalent British book. There is a focus on the burdens of medical and legal expenses which would not occasion as much anxiety in the UK (Helen Reeves, Director of Victim Support, has maintained that the problems of American victims are sui generis for precisely that reason). Yet, in the main, this is a thoughtful and informed book that lays out many of the problems that plague the co-victim. It calmly reviews what are available as remedies in the United States and it is difficult to think of anything comparable.

Paul Rock

Professor of Social Institutions

FORTHCOMING EVENTS

Loss and Bereavement. 12 October 1999. Bristol, UK. Workshop run by Bristol Cancer Help Centre. Contact Heidi Stringer, Grove House, Cornwallis Grove, Bristol BS8 4PG. © 0117 980 9520.

Person Centred Art Therapy. Commencing September 1999. Uxbridge, Middsx, UK. Apply to PCAT Course Administrator, 149 Watling Street, Park Street, St Albans AL2 2NZ. 201727 768921.

The role of mourning in natural selection

THE NATURE OF GRIEF
The evolution and psychology of
the reactions to loss

John Archer

London, UK: Routledge, 1999. £55.00 hb, £18.99 pb

ver 100 years after his death, the implications of Darwin's theory of natural selection for the field of psychology are still largely ignored. This book is an important contribution to our thinking about bereavement which helps to redress this shameful fact.

Archer suggests that the early writings on bereavement were unduly influenced by psychoanalytic theory. This led to an overemphasis on the importance of the repression of emotions as a cause of psychiatric disorder following bereavement. While there may be some justification for this belief, he is wrong to think that explanations based on evolutionary biology are necessarily incompatible with theories of mental illness. Had Stevens and Price's book, Evolutionary Psychiatry (London, UK: Routledge, 1998) appeared before this work was completed, Archer might have concluded that much psychiatric disorder can be explained by the same mechanisms as those to which he attributes grief and its variants.

Those who are familiar with the writings of another psychiatrist, John Bowlby, will find little to surprise them here. In fact Archer's thinking owes much to Bowlby's attachment theory which he reviews with sympathy. Where Archer goes beyond Bowlby is in considering the extent to which biological mechanisms play a part in determining the intensity of the attachments which we make to various family members and friends and, consequently, the influence which these then play in determining our reaction to the ending of these relationships.

In essence, he argues that the strength of attachments is a reflection of their value in the perpetuation of our genes. Thus, we are more closely attached to our children, each of whom carried 50% of our genes, than we are to aunts, uncles and cousins, who carry a smaller proportion. Likewise we tend to be closely attached to spouses, without whom we may not be able to reproduce at all, and to our parents during our childhood since, in the environment of evolution, we were unlikely to survive without them. In adult life, however, we become independent of our parents and our attachment to them, and grief when they die, can be expected to wane.

There is no space here to review the arguments from research that are carefully spelled out in this fascinating work. Suffice it to say that Archer is not unaware of the fact that much of his argument is speculative and that there are dangers in adopting simplistic views of the effects of evolution on human behaviour. This said, he provides us with much food for thought.

He tackles the apparent paradox that, rather than increasing our reproductive fitness, grief may actually reduce, for a while, our chances of reproduction. He also writes intelligently about the attachments which human beings make to other animals, our pets, who, while themselves benefiting greatly from the attachments we make to them, do nothing to perpetuate our genes. In this sense, they may even be regarded as parasitic, a conclusion that is bound to offend pet-lovers! He cites evidence that the death of a pet is sometimes a cause of severe grief.

A high academic standard is maintained throughout and the author's attempt to be impartial and to give weight to various opinions sometimes slows the flow of the text. However, among the 800 or so references that are made to the existing literature are many to literary and other non-scientific sources. This adds to the interest of the book and helps to enliven the drier parts. So does the attention that is given to studies of grief in non-Western cultures.

In conclusion, this is a welcome addition to the academic literature on bereavement. It will be of interest to all serious students and stimulate much further research and discussion. BC

Colin Murray-Parkes Consultant Psychiatrist

BOOKS direct from CRUSE

THE BIRD OF MY LOVING

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Order from Cruse Bereavement Care 126 Sheen Road, Richmond TW9 1UR 2 0181 940 4818 Fax 0181 940 7638 **BOOKS**

MULTIPLE AIDS-RE-LATED LOSS A handbook for under-

A handbook for understanding and surviving a perpetual fall

David Nord. London, UK & Washington DC, USA: Taylor and Francis, 1997. £15.95 pb

This is an historically important contribution to the AIDS saga written largely from the perspective of the gay community in the USA, but also recognising special issues for ethnic communities, drug users and those with haemophilia. It draws attention to some unique aspects of AIDS-related loss.

The author describes his book as combining the poignant experience of survivors with an analysis of the psychological, sociological and cultural implications of this historic experience'. Reviewing it both as a family therapist providing a service to patients with HIV and their close contacts, and as an 'outsider' wanting to learn about the personal impact of AIDS-related loss, I found the author well-informed and the combination successful.

The book is divided into three sections: accounts of personal experience; an historical overview; theoretical perspectives and therapeutic suggestions. Loss, grief and trauma are comprehensively described in general terms, followed by chapters covering those aspects specifically highlighted in the context of AIDS. The work is wellreferenced, and quotes from the sources throughout support the author's views. The personal perspectives from case examples and from Nord's own experience add authenticity and are successfully interspersed with the theoretical material.

The majority of AIDS-related losses worldwide is amongst people from Africa2, living both in their countries of origin and in adopted countries. Many of the experiences and concepts of grief and trauma described in this book will be useful for a better understanding of these losses. Difficulties about family of origin and choice, and the wide range of losses resulting form HIV were documented as early as 19883, but are usefully reviewed by Nord. Other publications have also addressed topics covered here4,5,6,7,8,9,10, 11.12. However, the author has brought together a vast amount of material in a thought-provoking way which should serve those dealing with loss not only from HIV, but also from other illness.

In the well-resourced countries an increasing number of people are now

living for many years with HIV and have benefitted from new treatments as they have become available, so that it is now treated as a chronic infection rather than a death sentence. Many of those infected have had to radically review their perspectives on death, a shortened life span and how to live with the illness. Close contacts have inevitably been affected too, as HIV has been brought more in line with other illnesses, such as cancer, diabetes and leukaemia. Nevertheless the cluster of special aspects associated with it - guilt, stigma, infectiousness and youth - will separate AIDS-related loss from other losses for some time into the future.

Riva Miller

AIDS Counselling Co-ordinator

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THE BIRD OF MY LOVING* A personal response to loss and grief

Mary Sheepshanks. London, UK: Penguin, 1997. £6.99 pb

Mary Sheepshanks has written a direct and moving account of her journey through the loss and bereavements she has faced. It is a story which will benefit any bereavement counsellor to read, since it explores so well the different challenges of each death. She describes the birth and death of her disabled child, her husband's illness and finally his death and the death of her mother. This may

sound like a lot to cover in one book, and there are other deaths which occur, not of any such close relatives, but which also have their impact. What Mary describes, however, is real life; bereavements do not come neatly packaged and nicely spaced.

As a family therapist I was interested in how she highlights the different context of each death, and the importance of the relationships she had at those times. We learn who was helpful to her at those different times, and how, and about times when she could not be helped. Mary's relationship with her mother is documented throughout the book and I was struck by the way in which this relationship becomes a barometer of how Mary is herself coping.

The author is frank about her feelings of estrangement from her husband when their baby died, and we glimpse a rather painful picture of the professionals involved with her at the time. She is honest about her own needs and feelings when facing her husband's failing health, a description which would be of comfort to anyone struggling with feelings of guilt or disloyalty.

The book is rich in its description of living with loss, and there are moments of great humour. The fact that Mary lives a fairly privileged life may make her account less easy for some people, but I would certainly recommend it.

Judith Bevan

Family therapist

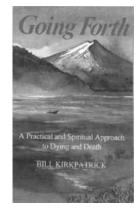
* Available from Cruse Bereavement Care, 126 Sheen Road, Richmond TW9 TUR, UK.

GOING FORTH A practical and spiritual approach to dying and death

Bill Kirkpatrick. London, UK: Darton, Longman and Todd, 1998. £10.95 pb

In this book Kirkpatrick's thoughts on the spiritual, theological and doctrinal aspects of dying and bereavement are readily available to all carers, be they professional or lay. His writing is deeply reflective and based on his thinking around his own journey and experiences of being with people 'as a nurse, a minister and a close friend'. The book is refreshingly 'earthed', stimulating and interestingly written, helping us to see new ways of thinking on these things.

He writes of mystery and of a further quest for reality and truth, sharing many gems on the way that serve to stimulate us in our own search. He has read widely on the subject and gives quotes from a variety of authors. Bill looks at dying, the soul, the hope of life beyond, bereavement



and rites of passage. He relates some of his experiences with people who are dying or who are in pain and makes helpful suggestions on accessing spiritual pain and providing the right support. The chapter on the approaches to dying and death of people from other faiths and cultures is succinct and informative.

Kirkpatrick's examples of funeral services and insights into co-creating them with families and friends of the deceased will be helpful to those who are new to taking funerals and those whose ministry it has been for several years. His anthology offers some new material and a reminder of well-known prose, poems and music. At the back are some useful names and addresses of organisations offering information and support.

A book, I feel, worth having and returning to, not only for practical suggestions but as a spiritual guide. I would also warmly recommend two other fine anthologies – All in the End is Harvest[†] (London, UK: Darton Longman and Todd, I 984) and Remembrance[†] (London, UK: Michael Joseph, 1996).

Christine Gardner Hospice Chaplain

¹ Available from Cruse Bereavement Care, 126 Sheen Road, Richmond TW9 1UR, UK.

DICTIONARY OF MEDICAL AND PHARMACEUTICAL TERMS

For bereavement and palliative care counsellors John Ashfield and Pamela Lockyer-Scrutton. Adelaide, Australia: Mary Potter Hospice, Calvary Hospital, 1998

Medical terminology can be confusing and intimidating, not only for patients, their friends and families, but also for those who are trying to help them. Even where a term sounds familiar, a lay person's understanding of its meaning has often been gathered anecdotally and can be imprecise, or even mistaken.

This simple reference book gives short, clear definitions and phonetic spellings of

REVIEWS

over 500 basic terms likely to be encountered in hospital and palliative care settings. It was originally put together by the counselling department of an Australian hospice for their non-medical staff and volunteers, and is now in its second edition. Anyone wondering what 'pruritus' is, where to find the 'sigmoid' and why 'diathermy' is being used will find the answers here. A number of treatment abbreviations are also explained.

A separate listing of drugs, giving both generic and brand names under symptom headings, could also be helpful though what drugs are prescribed, and indeed permitted, can vary considerably from one country to another. Finally, for those interested in decoding for themselves other cryptic utterances of the medical profession, there are four pages of Greek and Latin prefixes and suffixes which would provide valuable clues.

Some of the definitions seemed overly technical, 'depression', for instance, using unexplained vocabulary like 'psychomotor agitation', and I was surprised by the very conservative (or outdated?) figure for achievable remission rate in Hodgkin's disease of only 50%. But, overall, many people coming into contact with lifethreatening illness will find this little book invaluable.

Rosie Dalzell

Managing Editor, Bereavement Care

* Available from Mary Potter Hospice, 89 Strangways Terrace, North Adelaide SA 5006, Australia. Fax: (8) 8239 9111.

AUDIO CASSETTE

COPING WITH BEREAVEMENT

Anthony Clare (presenter). Wirral, UK: Talking Life, 1998. £13.99

This set comprises two cassettes with an introduction and linking comments by Dr Anthony Clare of the Royal College of Psychiatrists. It claims to be for anyone who has suffered a bereavement, either recently or long ago.

A great deal of emphasis is placed on reassuring the listener of the normality of grief and what it encompasses, and we found it refreshing indeed to hear this endorsement by the Royal College of Psychiatrists. While the personal experiences of different kinds of bereavement are the most affecting, the tapes also contain explanations of the grieving process along with some useful elements of support and advice.

However, we have two main. reservations about these tapes. Firstly, the content are too wide ranging, yet not specific enough. In order to find what is

appropriate to a particular situation, the listener has to wade through material that is at best irrelevant and at worst alarming. For instance, death by suicide or sudden death is not of relevance for someone whose relative has died after a long, terminal illness. Secondly, the tapes are monocultural. There are no references to cultures other than Western ones. This is a serious omission in general terms and particularly given the aims of the tapes. This restricted view of grief should be made clear on the cover.

Given our reservations it is difficult to know how the tapes could best be used. With discretion on the part of trainers, they could be used for teaching purposes as they do contain some useful material, for instance, a very poignant example of a child's perception of death - evoked by a toy - which beautifully illustrates his understanding of death and loss. The main difficulty, however, would be in making use of the tapes with a bereaved individual, particularly as there are no explanatory notes with the set. The lingering question is: who are the tapes for? Their current format does not render them entirely suitable for 'anyone who has suffered a bereavement'.

John Beaumont

Counsellor and Trainer

Els Footman

Counsellor and Trainer

ABSTRACTS

A journey through grief: an analysis of an adult child's grief in the loss of a mother

Bozeman JC. Illness, Crisis & Loss 1999; 7(1): 91-99

When leanine Bozeman was 58, her 87year-old mother was killed in a car accident. Six years later she describes her intense grief, self-reproach and bitter hatred of her sister-in-law (the driver of the car), and the attempts she has since made to come to terms with her sorrow and sense of guilt. Her anguish, she believes, was heightened by her ambivalent relationship with her mother. by the remembered shock of her first encounter with death as a small child, and by her bitterness towards her sister-inlaw, whom she has still not forgiven, though in other areas she has accomplished some of the tasks of a grieving adult child in seeking to come to terms with her loss. She hopes the article will enable professional workers to develop therapeutic strategies to help other bereaved adults.

Treasure weekend: supporting bereaved siblings.

Potts S, Farrell M, O'Toole J. Palliative Medicine 1999; 13(1): 51-56

The importance of allowing a bereaved child to be involved in, and mourn, the loss of a sibling has gained increasing recognition. However, there are often few services to support bereaved children, and frequently they are excluded from participation by parents who are trying to protect them from the pain of bereavement. In this moving article the authors describe how a group of children were invited for a weekend to the hospice which had cared for their dead siblings. and they discuss the rationale, aims and programme of these weekends. The children involved seem to have been greatly helped by the experience. What especially emerges from the article is the honesty of the children, and their need to be involved in the painful process of their sibling's death.

Enhancing the concept of disenfranchised grief

Corr CA. Omega 1998-99; 38(1): 1-20

Disenfranchised grief can be defined as grief which is experienced after a loss that is not publicly acknowledged or mourned, or socially supported. For instance, the bereaved person may appear to mourn too long, in an inappropriate way, or for the loss of a relationship which is not totally sanctioned by society. The author of this article contends that enfranchisement in bereavement may have a potentially broader aspect than this, and he explores further the implications of the concept in terms of the ways in which it can affect both the bereaved and those associated with them. He concludes that 'a caring society ought to respect the complexities and the individuality of each bereavement experience.'

Perhaps one could question whether society as a whole is as judgmental of disenfranchised mourning as he implies, or so lacking in empathy for those who have lost a precious person. The article is also somewhat wordy. However, it is thoughtful and thought-provoking, and a valuable addition to the literature on bereavement.

Communicating with bereaved children: a drama therapy approach

Curtis AM. Illness, Crisis & Loss 1999; 7(2): 183-90

The author of this article is responsible for a six-week programme which uses drama to help bereaved children to come to terms with their loss. Activities are described which help them to see death as a natural part of the life cycle, to recognise and handle the phases of grieving, and to learn to integrate the loss into their lives. The children are encouraged to work creatively with their emotions through music, movement. dance, puppets, reading and art. In addition to the sessions with children, the author gives workshops to teachers, counsellors and students of expressive arts therapies, in the hope that drama therapy will be more widely recognised as an effective strategy in grief work with children.

Longitudinal changes in mental and physical health among elderly, recently widowed men Bennett KM. Mortality 1998; 3(3): 265-273

Mental and physical health, morale and social functioning were assessed in a sample of elderly widowers. Measures were taken before they were widowed and again four years after their bereavement, and the results were compared with a sample of age-matched. still-married controls. The men who had been recently widowed showed a decline in mental health, morale and social functioning, though the decline in physical health was observed in both groups. The evidence suggests that the impact of widowhood is greater among men than among women: the author puts forward the reasons which she believes may contribute to the discrepancy.

Older people, crisis, and loss.

Thompson S, Thompson N. Illness, Crisis and Loss 1999; 7(2): 122-33

Older people are no less prone to experiences of crisis and loss than any other age group. However, the tendency is to stereotype them, and fail to realise they are unique individuals with real feelings and life experiences. The form of discrimination known as ageism can be just as damaging as any other kind of 'ism', depriving older people of the help and understanding which is their due if they suffer bereavement - through loss not only of loved objects but also of their jobs, their independence, their physical and mental powers, their status, and so on. This article seeks to redress the balance by discussing their problems, and stressing the need to recognise and challenge the significant role which ageism plays in society's attitude towards them.

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