

Fourth international conference on children and death

Bristol, UK, 6-8 September 1999

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This event, organised by an international steering committee, is held every three years in a different location. This year it was at the University of Bristol and supported by nine UK organisations connected with children's health and bereavement, including Cruse Bereavement Care. It brought together people from a wide variety of countries and professions for what was, on the whole, an excellent four days.

The conference opened with the sad news of the death of David Baum, President of the Royal College of Paediatrics and Child Health, while on a sponsored cycle ride in London. He would have been one of the speakers and during the conference there were many mentions of his work and, in particular, of his attitude to helping. He had a favourite story about a man who walked along a beach picking up stranded starfishes and throwing them back into the water. Someone asked him how did he think that he could make any difference, when there are hundreds of starfish and thousands of beaches. The man picked up a starfish, threw it into the water, and said, 'I made a difference to that one.'

With around a dozen plenary lectures, 23 posters and some 50 parallel sessions and workshops, one person could not possibly summarise everything; instead, I shall draw out what I took from the meeting, in terms of five themes.

PROBLEMS WITH GENERALISATIONS

Throughout the conference, we were constantly reminded of the complexity of everything we were dealing with and the limitations of 'experts'. Myra Bluebond-Langner, an anthropologist whose book, *The Private Worlds of Dying Children* (Princeton, USA: Princeton University Press, 1978), is known to many, questioned whether adult and child views of death are really so different. She also talked about the way in which we can hold several views simultaneously, an idea taken up for discussion by Richard Obershaw during his plenary the next day. This is a vital concept for anyone working clinically, who may at first be bemused by the apparent inconsistency in what people say. Myra also added some valuable insights into situation specificity: a researcher may obtain different answers from a mother on

separate occasions; a child will respond one way in school but another in church, and so on.

Some of these ideas found expression in a play, *Two Weeks with the Queen* by Mary Morris, from a novel by Morris Gleitzman, about an Australian boy who does not accept that his brother's cancer is incurable; his distraught parents send him away to London to stay with unsympathetic relations, but he decides to contact the Queen for help. The play explored many themes including serious illness, death and growing up, combining compassion, understanding and humour effectively to bring home a powerful message about the importance of good communication. It was performed as part of a pre-conference programme by members of the Bristol Old Vic Youth Theatre, two of whom were themselves bereaved of a sibling.

Another thread to this theme, powerfully explored by Ann Bury and Phil Smith in a parallel session later, was the impossibility of putting children, or adults, into categories by age, or even by psychological developmental stages. Do we ever really stop being children all the time? Are there not occasions when we need a hug, a pat, a wordless comfort, an unconditional understanding, just as children do?

Further illustration of this theme came in several of the parallel sessions. At one of these, given by Julie Semmens, it was pointed out that one size does not fit all, we have to tailor our help to the culture or individual. The example given was that of the Aborigines, who never mention a dead person's name: using a memory book in Australia could be quite tricky. Similarly, Diane Crossley of Winston's Wish, Gloucestershire, in a workshop on the use and misuse of resources, encouraged us to think beyond the books and games specially developed for bereavement work, and devise something more appropriate for a particular child or family, showing us how she had used, for instance, a cabbage, box of chocolates, set of Russian dolls, and a stacking game as metaphors for emotional situations. Shirley Potts described her Treasure Weekends of residential support for bereaved siblings, and the imaginative gift of a mirror to each departing child, to remind them of their own individuality and worth.

EVERYONE NEEDS TO BE HEARD

The play, *Two Weeks with the Queen*, in which so many adults tried so hard not to listen to the children's anxiety, set the scene for this theme too, and the conference organisers put it into practice by introducing the Open Space concept. This concept encourages the delegates themselves to contribute to the conference programme and meant, for instance, that discussion groups were set up on any topic in which enough people were interested, and that all sessions, even the plenaries, were broken up by short discussion breaks. These arrangements were both popular and successful.

This theme was the subject of a well-attended Open Space session on the ethics of decision making. One of the conclusions was that the best way to avoid conflict in a team is not necessarily to ensure that everyone shares the same ethical views but that everyone has an opportunity to say what they think.

Ineke van Essen from Utrecht's session, so popular that it was repeated at the final lunch break, concluded that we have more to learn from young people than they from us, that we need to recognise and listen to children's own creative and varied language. She demonstrated how she uses her Blue Suitcase, a treasure chest of colourful, tactile materials which invite expression, to communicate with children both with and without words.

Linda Dowdney and Richard Wilson found that families in two outer London Health Authorities were not getting the help they wanted or needed. Service provision was not significantly related to parent or child disturbance, or to parent's wishes. Help was more likely to be offered to older children, especially if the death had been expected or if the parent had committed suicide, and least likely to be offered to under-fives and those not in touch with services before the death.

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CONFERENCE REPORT

GRIEVING DOES NOT STOP

Phyllis Silverman talked about the continuing process of grieving, the importance of remaining connected to the dead rather than striving to let them go. **Children need to construct a relationship with the person who has died which can continue and change** as they grow, and as their understanding develops of who and what they have lost.

LOOKING AFTER OURSELVES

Danai Papadatou, from Athens, described the **different grieving responses of health care professionals** in Greece and Hong Kong. She presented a model of their grieving process, fluctuating between experiencing grief reactions and containing or avoiding them, similar to the Utrecht dual process model. The grieving process of the study group was found to be affected not only by personal factors, but by the nature of their work and the ethos of their work unit: doctors and teams working in intensive care tended to avoid emotions, distancing themselves by depersonalising patients; nurses and those involved in oncology or palliative care units were much more engaged emotionally with patients and their families and so could experience problems with

boundaries. These different coping strategies affected the needs and the ways in which the health professionals were able to support one another. After discussion, contributions from the rest of the conference included a number of ideas for looking after ourselves, including some more light-hearted suggestions, such as shopping therapy and 'taking the scenic route'.

WORK TOGETHER FOR CHANGE

This was the topic of Dame Rennie Fritchie's plenary, taken up later by Louise Rowling who spoke about **the Health Promoting School** and how work on death and bereavement can be brought into a whole-school curriculum and Elizabeth Capewell who described ways in which **resistance to bereavement work in school systems can be transformed**, with reference to Northern Ireland in the aftermath of the Omagh bomb. Barbara Monroe also focused on this her talk on preparing for a death, emphasising the necessity to involve the family fully in any bereavement work with children. Her message was **children need their families, who will be around long after the professionals have disappeared**.

There were two sessions which seemed to

contradict this. Lady Limerick, former Chairman of British Red Cross, presented data and photographs of **children involved in war**, not just as refugees or the victims of land mines, but as child soldiers. The presentation was bleak: 7-year-olds are brutalised, programmed to carry out atrocities; children are trained to be killers by making them watch other children being killed and then getting them to walk on the bodies. David Southall spoke of the **appalling state of health care in many countries**, with soaring child and maternal death rates. In hundreds of children's hospitals there is no functioning equipment, no medication, no hope, and this in a time when most childhood mortality is easily prevented.

It was pointed out that some children can be rehabilitated, not by in-depth psychotherapy but by trying to give them back a normal life of school and play. There are also hopes that the United Nations will take some action to implement statements about child rights. And there is always the starfish.

I have no doubt that everyone benefited from the time spent at this conference – certainly the feedback at the end supported this notion – and am sure that the next one will be eagerly anticipated. BC

OBITUARY

Margaret Torrie OBE 1912-1999

Founder of Cruse Bereavement Care



A dynamic and charismatic lady with wide interests and strong convictions, Margaret Torrie was a Quaker and pacifist who, in her youth, ran lectures and seminars on peace and world affairs in London. She also began and directed an International Arts Centre. When World War II broke out she opened a Dick Sheppard Club in Paddington where she worked to help families in poverty.

In 1959 she founded Cruse Clubs for widows and their children. Margaret was born of a generation in which most women saw it as their main function to marry and rear a family. They chose, or

were chosen by, older men whose role it was to earn a living and 'look after the little woman'. Consequently the 'little women' faced a major crisis when, in the course of time, their children left home and their husbands died. Left with no central purpose to their lives they turned to Cruse for help in discovering new purpose and direction. And this is what Margaret, and the volunteers with whom she worked, were well able to provide.

Margaret was impatient with grief, describing it, in a letter to me, as 'purely personal and selfish. It does no good of any kind and little to those who remain but cripple their courage.' She was against the 'philosophy of death, grief and bereavement so encouraged in our secular society'. For her, death was not an end to be mourned but a transition. Bereavement, she saw as a 'practical situation where we learn to stand free of dependence'.

In keeping with this point of view the Cruse which she created, and the book, *Begin Again: A book for women alone**, which formulated her viewpoint, provided sound practical advice on how

to live as a widow together with a strong feminist message that 'women themselves are not yet sufficiently articulate and have been too sheltered in marriage and in the home, and too little concerned in continuing education and training for life in the world.'

But with all her suspicion of 'the philosophy of death and grief' she was not unaware of the need for us to understand the psychology of grief and loss. Her husband, Alfred Torrie, was a well-known psychiatrist who had played a part in the inception of the Marriage Guidance movement and his influence, though discreet, enabled counselling to develop as an integral part of the work of Cruse.

When Alfred died, Margaret, whose own health was not good, was ready to pass on the responsibility for running Cruse to a man, Derek Nuttall, who respected the great value of the work which she had done but also recognised that it was time to broaden the base of Cruse to take account of recent developments in the prevention of psychiatric problems in bereavement and to include widowers and others who had suffered losses by death.

Margaret's retirement was not a quiet one. She continued to express her views on developments in Cruse, which were

not always to her liking, and she remained a busy commentator on the problems of the world at large writing long letters to the Prime Minister and Her Majesty the Queen (who, in 1984 had become the patron of Cruse). Her writings in both prose and poetry cover a wide range of contemporary issues and she enjoyed painting in pastels. It is her poems, more than anything else, which reveal the combination of sensitivity, intelligence and compassion that made her worthy of respect. She had a great love of the natural world which she saw as the most convincing and glorious evidence of the goodness of God and her poems are full of the symbolism of the seasons:

'Where nature turns invading pain
To beauty and delight' (*Selected Poems*.)

She is survived by a daughter and two grandchildren. BC

Colin Murray Parkes
President, Cruse Bereavement Care

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