

Death in children's lives

NEVER TOO YOUNG TO KNOW

Phyllis Rolfe Silverman

Oxford: Oxford University Press, 1999, 304pp, £19.95 pb. ISBN 0 195 10955 4

This unique book brings a multifaceted approach to understanding and helping bereaved children. Phyllis Silverman knows that the real experts on the meaning and impact of death in children's lives are the grieving children. For too long their needs and feelings have been ignored; more recently, they have been studied, researched and clinicised, but rarely have they been heard. Silverman listens, and writes as their advocate using, whenever possible, their own words. The strength and power of her book comes from her empathy with the children and her delightful gift of presenting their stories and responses and those of their parents.

The book opens with a wonderful range and satisfying depth of theoretical material, using results from the Harvard/MGH Child Bereavement Study, on which the author was a co-principal investigator with William Worden. The next section, 'Stories people tell', covers the death of parents, siblings, friends and other key people in a child's life, as well as the emotional care of children before a death, and feelings and responses of dying children and their parents. One (very tiny) quibble about this last chapter is that it is mainly the parents who speak about the dying and death of their child, and this slightly jars with the tone of the rest of the book.

Finally there is a thoughtful and thorough exploration of key themes in working with bereaved children, themes that we have also identified in our work at Winston's Wish. These include information to help children and families understand the meaning of death for them, the importance of remembering the person who has died, and encouragement to explore, express and share feelings within the family and with others who have had a similar experience.

Never Too Young To Know is highly accessible, frequently touching, always engaging. It will be of great value to those who work with children, both professionals and other concerned adults. As a practitioner, trainer and also as a parent, I am very glad to add it to my bookshelf.

Julie Stokes

Consultant clinical psychologist, Winston's Wish

HEALING CHILDREN'S GRIEF

Grace Hyslop Christ

Oxford: Oxford University Press, 2000, 264pp, £17.95 pb. ISBN 0 195 10591 5

This book was a joy to read and would be a most welcome addition to any collection of

books about bereavement in childhood. The author, a former director of social work at Memorial Sloan-Kettering Cancer Centre, relates the stories of 88 families and their 157 children who participated in a parent-guidance intervention through the terminal illness and death of one of the parents from cancer. The value of the book lies in the depth of scholarship and attention to detail, the author's vivid writing style and the powerful way she portrays the families.

The first section of the book provides an excellent and impressively thorough description of the theoretical background and methodology. The author first reviews studies of childhood bereavement, and describes a model of stages of cancer from a psychosocial perspective, and then child development taking into account the cognitive, emotional and ecological aspects^{1,2,3}. The families were interviewed several times during the terminal stage of the illness and several times more during bereavement, ending about 14 months after the death.

Christ admits that in the study sample the criteria for participation resulted in a homogeneous population of mainly middle-class families, all of whom consisted of two parents. The families were 80% white and most were Catholic, which is similar to the group in the Harvard child bereavement study. Christ recognises the limitations of this, and also asks in her conclusion that more work be done to consider the effect of bereavement in children from single-parent and poor families, and where the bereavement was sudden or unexpected.

The second section consists of detailed descriptions of the developmental themes for the five age groups into which she assigned the children (three-five, six-eight, nine-11, 12-14 and 15-17). Then follows their responses to the illness, death and bereavement and, for each age group, a useful summary of recommendations for professionals and care-givers. The author tells the stories of two families from each age group, one where a mother has died and one a father. This structure illustrates the themes, so that the reader's desire for the personal as well as the theoretical is satisfied.

Outcomes are assessed for each age group, defined according to how close the children came to achieving their previous levels of functioning in the following areas: psychological state; relationships at home; academic, athletic and after-school activities; and developmentally appropriate peer relationships. This she terms 'reconstitution' which was determined as timely, delayed, compromised or symptomatic. The last of these involved the presence of symptoms that

warranted a definition of a psychiatric disorder according to DSM IV⁴. The fact that the great majority of children in each age group (83%) had achieved timely or delayed (ie one area still affected) reconstitution at the 14-month assessment was reassuring, and the findings serve to support the Harvard study's findings that bereavement itself was less stressful than other concomitant events.

The therapeutic impact of this intensive intervention from very experienced social workers cannot be underestimated, and is left unassessed in the study. Nonetheless, Christ and her colleagues have made an important contribution to the field of childhood bereavement, which is a timely illustration of the value of social work in palliative care.

1. Piaget J (Cook M, trans). *The Origins of Intelligence in Childhood*. New York: Universities Press International, 1952.
2. Erikson E. *Childhood and Society*, 2nd edn. New York: Norton, 1963.
3. Bronfenbrenner U. 'Ecological systems theory'. In: Vesta A (ed). *Six theories of child development*. *Annals of Child Development* 1989; 6: 187-249.
4. American Psychiatric Association. *Diagnostic and Statistical Manual of Mental Disorders (DSM IV)*. Washington DC: 1994.

THE MAGICAL THOUGHTS OF GRIEVING CHILDREN

James A Fogarty

New York: Baywood Publishing, 2000, 194pp, \$25.95 pb. ISBN 0 89503 206 6

I was intrigued by the title of this book, but having read it with care and attention was very disappointed.

The author is a national lecturer with the American Academy of Bereavement and the book resembles a transcription of a series of lectures, in a loose and careless style with confusing grammatical mistakes and repetitions. The title refers to the author's 'model of magical thought', in which a destructive magical thought related to mourning may have the potential to damage a child's personality, leading to personality disorder. Fogarty distinguishes three types of 'power-based catalysts' that result from magical thoughts, which incidentally seem to be the fairly common beliefs held by many children that they are in some way responsible for the death. I found the model and the case descriptions both confusing and unhelpful. Fogarty has a tendency to re-define psychological terms in an idiosyncratic manner. I also found the book over-emphasised the need for professional involvement, with several lengthy descriptions of complex psychotherapeutic interventions to be undertaken only by qualified grief therapists.

I was disappointed to note that the author's references only extended to just over a page and that, although he quotes William Worden's *Grief*

*Counselling and Grief Therapy*¹, he fails to mention that same author's study, *Children and Grief: When a parent dies*², which is a significant oversight from someone who, according to the publisher's information, has been actively offering grief counselling for 20 years.

Frances Kraus

Candle Project Leader, St Christopher's Hospice

1. Worden J. *Grief Counselling and Grief Therapy* 2nd edn. New York: Springer, 1991.

2. Worden J. *Children and Grief: When a parent dies*. New York: Guilford Press, 1996.

THE FORGOTTEN MOURNERS

2nd edn

Susan C Smith

London: Jessica Kingsley, 1999, 112pp, £9.95pb. ISBN 1 85302 758 8

Newcomers to bereavement work with children and families will find the second edition of *The Forgotten Mourners* a useful guide to both the typical and complex emotional and behavioural reactions of bereaved children. The author is a social worker who developed with the co-author of the first edition, Margaret Pennells, a service offering counselling groups for bereaved children.

In exploring complicated bereavement this edition goes much farther than the original, considering many of the issues surrounding traumatic bereavement (though the features of this are not always well described) and the effects of secondary losses on the bereaved child. However, like the first edition, it is, primarily a guide to behavioural symptoms and what bereaved children need. It makes suggestions as to what should be done and by whom, but provides little guidance as to how. There are no case studies and the text draws on other people's work, often without attribution, though the reader is pointed to some of the useful literature and resource books. The book omits any mention of depression in adolescents and the danger signal of suicidal thoughts and feelings, and does not cover differences arising from other cultures or faiths, or when it would be important to seek more specialised help. The editing is sloppy: many of the references are inaccurate, making it difficult for texts to be found and the word 'affect' is used when 'effect' is meant and *vice versa* (pp31, 76).

This is, nonetheless, an accessible short introduction to the main issues of bereavement in children for informing carers and others directly supporting them but it cannot, in our opinion, replace Dyregrov's handbook* as a guide for working with bereaved children. **BC**

Simon Eedle

Social Worker, Barnardo's Orchard Project

Dora Black

Consultant Child and Adolescent Psychiatrist

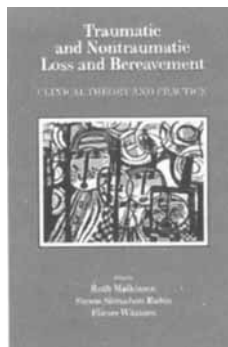
* Dyregrov A. *Grief in Children*. London, Jessica Kingsley, 1991.

The interface of bereavement and trauma

TRAUMATIC AND NONTRAUMATIC LOSS AND BEREAVEMENT

Ruth Malkinson, Simon Shimshon Rubin, Eliezer Witztum (eds)

Madison, CT: Psychosocial Press, 2000, pp 275, \$29.95. ISBN 1 887 84130 X.



In this interesting volume 19 contributors, mainly psychologists from Israel and the USA, have brought us up to date on their thinking about a wide range of clinical issues in the treatment of problematic bereavements. The Israeli focus means that many of the contributions come from people who are attempting to help victims of the Arab-Israeli conflict and several have gone beyond the clinical field to examine the cultural issues and the place of ritual and symbol in the face of war and other collective disasters.

The editors, in their introduction, express an interest in incorporating in the book '... both an openness to and an interest in the interface of bereavement and trauma'. Despite this emphasis, which is both timely and important, your reviewer was disappointed to find that the book did not succeed in clarifying the underlying meaning of these important terms. Rather, the lack of agreed definitions and the wide range of viewpoints taken by contributors meant that too many cooks ended by spoiling the broth.

One could argue that the strength of the book lies in the range of views expressed but here too there were some disappointing lacunae. I looked in vain of any mention of the use of EMD (eye movement desensitisation) which, on present evidence, seems to be the most effective treatment for post-traumatic stress disorder, and those in search of evidence-based therapies will not be satisfied with the clinical reports given here. Similarly, no adequate consideration was given of the roots in non-human species of reactions to trauma and loss.

One of the most challenging, interesting and frustrating chapters is by Neimeyer, Keesee and

Fortner. This highly articulate account of a 'constructivist' theory of grief builds on my own concept of the ways on which bereaved people change their assumptions about the world. This is a valuable contribution although I cannot agree with the authors that it conflicts with or replaces other ways of viewing bereavement. Human beings are sufficiently complex for us to be able to make use of a variety of theories when faced with clinical problems.

Indeed, the strength of this book lies in its clinical focus and some of the case studies are very fascinating and enlightening. Witztum & Roman's account of their use of leave-taking rituals in therapy and Malkinson and Ellis's description of the use of rational-emotive behaviour therapy (REBT) are of particular interest. Both approaches deserve serious attention and it is to be hoped that their authors will carry out proper research evaluations of these promising techniques.

In conclusion, like most multi-contributor books this would have benefited from tighter editorial control. This said, it is a valuable addition to the literature with important clinical implications.

Colin Murray Parkes

Consultant Psychiatrist

WHEN A COMMUNITY WEEPS Case studies in group survivorship

Ellen S. Zimmer, Mary Beth Williams (eds)
Philadelphia, PA: Brunner/Mazel, 1999, 280 pp, £24.95 hb. ISBN 0 87630 953 8

This book addresses the important question of how whole communities react to major loss, looking at ten recent case studies. The editors emphasise that different socio-cultural traditions have to be acknowledged, and that communities should try to anticipate high risk situations and plan ahead to deal with the unthinkable as far as possible.

The account of reactions to the fatal disintegration of the space ship, Challenger, underlines the need for affected people to receive accurate information. The sinking of the Estonia ferry in 1992 with tremendous loss of life illustrated both the quick and effective international co-operation in the Baltic States and the need to provide separate emergency support for survivors and rescuers. Other chapters describe the aftermath of an Australian bus accident, one of the many projects that were set up to help survivors of the Armenian earthquake, and a project in Kobe following that devastating earthquake which talks about 'bearapy' – the use

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of teddy bears to help traumatised children. The bombing in Oklahoma city was a focal point in galvanising American services to respond to trauma and grief; the chapter on this describes how rescuers and other officials found it especially hard to break bad news to children. The second part of the book deals with the impact of loss of leaders and heroes, such as the Israeli leader, Rabin, and an American basket ball player, Mickey Mantle.

The editors freely acknowledge that these are descriptive essays rather than scientific studies. Each makes interesting, at times compelling reading – we can all learn something from how other communities react to major events. The chapter describing the bombing at Enniskillen is a model, providing both a moving and clear account, drawing lessons from what happened in that deeply divided community. However, few of these chapters link the description of specific projects to published studies of other work undertaken in the same disaster.

The editors have veered too much towards trying to find the positives within each incident and so underplayed the realities as I have witnessed them. Communities struggle, at times, to cope with disaster: schools can be so devastated that all the staff leave within a short time, and emergency agencies and care providing agencies can get into unseemly fights that prejudice their co-operative working for years afterwards. Unless we face up to these grim realities, we will never really improve our psychosocial responses to community disasters. The Cruse Working Party* recommended much greater advanced planning to avert such complications. The editors of this book illustrate just how far we have to go before governments the world over heed that message.

William Yule

Professor of Applied Child Psychology

*Disasters: Planning for a caring response. London: HMSO, 1991.

TRAUMATOLOGY OF GRIEVING

Charles Figley (ed)

Philadelphia, USA; Brunner/Mazel, 1999, 734pp, 250pp, £25.00 pb. ISBN 0 876 30973 2

Trauma and grief often co-exist. The relationship between these psychological experiences is one which, until relatively

recently, received little attention. However, over the past few years, research has attempted to improve our understanding, and this book, from the USA (the fourth in the Brunner/Mazel series, 'Trauma and Loss') covers both theoretical and conceptual issues and practical applications. The text includes discussion of often over-looked groups, such as police spouse survivors and the elderly. Each chapter contains plenty of references to research though, unfortunately, it is not always possible to be sure of the validity of the research quoted except by seeking out the original paper. Most of the references are from American literature. There is an author index and subject index at the end of the book.

Overall, the book is well laid out, although with a few spelling mistakes and a reference (p150) to the *Journal of Effective Disorders* – surely this should be 'Affective'? I found it rather difficult to read the book from cover-to-cover and it would, perhaps, be better used as a reference text and as a starting point for further reading. Nevertheless, this book is a useful and timely contribution towards our developing understanding.

WHEN FATHER KILLS MOTHER Guiding children through trauma and grief 2nd edn Jean Harris-Hendriks, Dora Black, Tony Kaplan

London: Routledge, 2000, 281pp, £16.99 pb. ISBN 0 415 19628 0



The authors of this revised edition of a book first published in 1993 are all well-known child and adolescent psychiatrists who have made a special study over the last 15 years of children who have experienced the killing of one parent at the hands of the other. They have now seen over 425 children so bereaved. I should admit to having played a minor role in the revision of a couple of the chapters.

The authors cover a wide range of issues, including intra-familial violence, grief and the particular difficulties that

arise when one partner kills another. There is advice on therapy and discussion of the legal and other interventions that are usually appropriate. The need for careful planning and appropriate placement of children bereaved in such circumstances is emphasised.

The text is well referenced, with useful appendices and a glossary, and case vignettes are used effectively to illustrate themes and clinical situations. The authors refer to their research findings, and include the findings from a follow-up postal questionnaire sent to the referees of the first 95 children seen (data on these was presented in the first edition, and is again provided here).

Whilst sample or referral bias makes it difficult to extrapolate to all children who find themselves in this situation, the authors' findings and recommendations for practice here are important and will no doubt form the basis of on-going clinical work and research. This is an attractively presented book and should be read by all those who work, or may be called upon to do so, with children where one parent has killed the other.

Martin Newman

Child and adolescent psychiatrist

FUNERAL AND MEMORIAL SERVICE READINGS, POEMS AND TRIBUTES

Rachel R. Baum (ed)

North Carolina: McFarland & Co, 1999, £22.50 hb. ISBN 0 786 40699 2

Rachel Baum, the editor of this handy and often illuminating anthology appears to have been inspired by the reading of Auden's poem, 'Funeral Blues', which was so moving and effective at the funeral of Simon Callow's character in the film *Four Weddings and a Funeral*.

So moved indeed was she that she is unaware of Cruse's own anthology, *Remembrance*, for which I had the pleasure of writing an introduction, when she writes 'No reference tool currently exists that collects, in one accessible resource, poems to meet those needs.' *Remembrance* was published in 1996 and has plainly not crossed the Atlantic. (Ms Baum's publishers are based in North Carolina.)

She welcomes suggestions for her anticipated second edition. I cannot help her much in her 'famous person' index – she cites readings at the funerals of Frank Sinatra, Diana, Princess of Wales, Olivia Wordell(?) Holmes and Richard Burton – but she might check *Remembrance* for some of the most

famous and frequently used texts. If you hope to honour your loved ones with Shakespeare's 'Fear no More', Canon Henry Holland's 'Next Room', Khalil Gibran's 'The Prophet' or Noel Coward's 'When I Have Fears', you will look here in vain. And that wonderful poem of Brian Patten's, 'How Long is a Man's Life?' (after Pablo Neruda) which I see regularly in the memorial columns of *The Times*, has also escaped her notice.

Rachel Baum's book is more complementary than comprehensive.

Ned Sherrin

Writer, Director and Presenter

SPIRITUAL, ETHICAL AND PASTORAL ASPECTS OF DEATH AND BEREAVEMENT

Gerry Cox, Ron Fundis (eds)

New York: Baywood Publishing, 1992, 277 pp, \$40.95 hb. ISBN 0 89503 100 0

First published nine years ago, this book seeks to cover a wide range of topics relating to pastoral care for people who are dying or bereaved. It is an edited work and as such I found that not all the chapters were of equal standard.

The first of the six sections begins by looking at ethical issues and discusses the relevance of death education in the light of much criticism in the USA, examining some of the assumptions inherent in many of the curricula. The chapter on self-healing explores the enhancing effect of this approach for the quality of life for some cancer patients, but also the distress and impaired coping it can bring for others. The authors argue for a person-centred approach that looks at the whole patient, rather than caregivers allowing themselves to follow their enthusiasm for one particular approach. The strengths and weaknesses of the Christian charismatic movement are presented in a refreshingly honest way, tackling the question of whether or not one should expect God to heal.

I found the chapters on key pastoral situations – the dying and the bereaved, those with AIDS, clergy and lay co-operation, the Church as a model for coping with dying – less satisfactory, patchy with no fresh insights. They read, at times more like published sermons. A more interesting section looks at the Canadian experience, beginning with an overview by a funeral director of some of the cultural influences on attitudes to death and dying. There are useful and reflective vignettes here highlighting the importance of knowing what 'baggage' you bring with you: 'There are many

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problems that individuals must deal with when a death occurs. The caregiver should not be one of them'. In a chapter describing visualisation as a way of handling grief, Ted Creen uses the 23rd Psalm as a very good illustration of how effective this approach might be for some. Other topics covered include the relevance of previous losses in life to how we cope with the final loss, children and death, and social and historical perspectives. There is a chapter on spiritual care in a hospice, which is both critical and sensitive to the way this is handled. In conclusion, a section on bio-ethical issues focuses on neonatal and adult euthanasia, and consent issues around transplantation.

Overall this is a book that carers would probably browse through and discover some interesting areas for further reflection. However, readers conversant with recent publications in the UK would not necessarily find a great deal that would be new to them.

Peter W Speck
Trust Chaplaincy Team Leader

PERSPECTIVES ON LOSS

John H Harvey (ed)
Philadelphia: Brunner/Mazel, 1998, 352, £31.95 pb. ISBN 0 876 30910 4

John Harvey's latest book covers a wide range of losses, including not only loss through death, but job loss, illness and disability, relationship loss, and losses related to body weight. It was designed to collect in a single volume the writings of distinguished scholars, representing psychology and related fields, to address ideas on the dimensions of loss. Of the 45 contributors, the majority are American professors in psychology.

There are 26 chapters, well-written and well referenced, divided into four sections: theoretical perspectives, losses within close relationships, losses faced by survivors and caretakers, losses related to social identity, and synthesising commentaries on loss theory and research. In many of the chapters, reference is made to interpersonal dimensions and making sense of meaning, which I particularly welcomed.

For those working in the generalist counselling field I see this as a useful book to consult. For those working specifically in the bereavement field, I am unsure as to its value, as authors on loss through death in this source book are included in other bereavement publications. However, those who are

seeking a wider perspective on loss will find that this book offers interesting material and insights with good references, although I believe that Viorst's book *Necessary Losses** is a better starting point.

Ann Dent
Research Fellow
*Viorst, J. (1989) *Necessary Losses*. Positive Paperbacks, London

COMPANION ANIMAL DEATH

Mary F Stewart
Oxford: Butterworth-Heinemann, 1999, 188pp, £14.99 pb. ISBN 0 750 64076 6

This is an extremely useful little book for new or recently qualified veterinary surgeons and, since family members come in all shapes and sizes, for many bereavement workers. Its methodical and well-structured layout will appeal to a logical mindset, which is important for veterinary students as it deals with a completely non-scientific subject which may otherwise cause them to simply 'switch off'.

The wisdom in this book would normally take years of experience to gain. Without doubt it should be compulsory reading for all final year veterinary students and also would benefit counsellors offering help to adults or young people who have lost a companion animal. **BC**

Robert J Wallace
Veterinary Surgeon

ABSTRACTS

Adolescent parent mourning reactions associated with stillbirth or neonatal death

Welch KJ, Bergen MB. *Omega* 1999; 2000; 40(3): 435-51

Adolescent parental loss of a newborn through stillbirth or neonatal death is a tragic experience equivalent to no other loss. In this study, six adolescent mothers who had lost an infant in this way were interviewed at various intervals during their pregnancy and after the loss of their babies. Typically, this form of bereavement is minimised by society, and the mothers are excluded from an active role in grieving the death of their children. Bereaved adolescent mothers experience extreme fluctuations in their emotions, as well as losses associated with development and their successful transition to adulthood. The authors of

this article, writing from Kansas State University, say that at present no support programmes exist for these adolescent girls, whose grieving is of a different nature from that of older mothers. They thus face potential harmful impacts on their future well being. The need for appropriate support and education for them cannot, the writers believe, be overstated.

Death rites in the San Francisco gay community: cultural developments of the AIDS epidemic

Richards TA, Wrubel J, Folkman S. *Omega* 1999-2000; 40(2): 335-50

This interesting study of rituals of dying and death is based on narrative accounts of 52 gay men whose partners died of AIDS in San Francisco between 1991 and 1994. Although much of the article is devoted to descriptions of the final stages of the sufferers' lives, it is also concerned with the rituals performed by the survivors after their partners had died (all of them had been in long-standing and committed relationships). The death rites in which they took part involved culturally unique rituals which were very important to the bereaved, and which reflected the need of members of a stigmatised culture to care for their own in ways that they found meaningful and important.

Older people's attitudes towards death in England

Field D. *Mortality* 2000; 5(3): 277-97

The Mass-Observation Archive at the University of Sussex seeks to involve members of the British public in the recording of everyday life. A panel of several hundred correspondents responds regularly to open-ended 'directives' asking them to write about topics of contemporary interest. The April 1994 directive asked panel members to report their personal experiences of death and bereavement and to respond to questions about 'death and society'. A sample of 54 correspondents in the 65-80 age range (28 men and 26 women) was selected for detailed analysis of their personal experiences of death and bereavement and their views of changing social attitudes towards death. Experiences of the Second World War appear to have been of particular importance in shaping reactions to death and dying. All the correspondents acknowledged societal changes in behaviours and attitudes to death in contemporary society as compared to their childhood, but varied

in their assessment of these changes. The persistence of memory and loss is strikingly revealed by vivid accounts of deaths and bereavements in childhood, adolescence and young adulthood.

When a baby dies: a standard of care

Gensch BK, Midland D. *Illness, Crisis & Loss*; 8(3): 286-95

Health care provider support and grief after perinatal loss: a qualitative study

Ujda RM, Bendiksen R. *Illness, Crisis & Loss* 2000; 8(3): 265-85

This issue of *Illness, Crisis & Loss* is entirely devoted to perinatal bereavement. Of the seven articles included, the two listed above have a similar approach to helping parents who face such a loss. Both emphasise how important it is for health care providers to understand the particular needs of such parents, who are often young and overwhelmed by their sudden and unexpected bereavement.

Gensch and Midland provide a historical overview of the RTS (formerly Resolve Through Sharing) perinatal bereavement programme, established in 1981 in a Wisconsin hospital. It is based on the premise that there is still too little understanding of, and support for, parents suffering such a bereavement, and this can make it more difficult for them to cope with their intense grief. Ujda and Bendiksen base their article on the answers to questionnaires sent to a small number of parents who had suffered perinatal loss, with the aim of determining whether health care provider support has a positive effect on the parents' grief resolution. The article reports on the data from interviews and makes recommendations for improving patient care.

The guidance offered by these two articles is clearly written, practical, and sensitive. As Gensch and Midland conclude, 'When a baby dies, parents' hopes and dreams for that child die. Instead of planning a nursery, they must think about burial or cremation.' **BC**

Sheila Hodges and John Bush

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