

logical difficulties following the bomb. She lived with both parents and older siblings. Her mother worked in the local hospital and was in casualty on the day of the bomb.

Jane was standing close to the bomb when it exploded. She was laughing at tourists who were panicking at the bomb scare. Jane was not worried, having experienced previous bomb scares and firmly believing this one was a hoax. She made a light-hearted joke that the terrorist organisation involved would not blow up their 'own people'. She was standing with three of her own friends but had intended spending the day with two of her mother's friends to whom she was very close. At the time of the explosion, Jane was looking towards her mother's friends but had not as yet spoken to them. Both were killed in the explosion. Jane was unable to attend the funerals as she felt she would not be able to cope. She herself was not physically injured in the explosion.

Her mother felt Jane dealt with the bomb and the deaths of those close to her by pretending neither had happened. She refused to talk about either the bomb or the deaths and denied any associated problems. Four months after the bomb, Jane's mother brought her to the doctor because she was aware Jane was having difficulty sleeping, was irritable, withdrawn and seemed depressed.

When seen individually, Jane reported episodes of dissociation, recent recurrent intrusive thoughts, nightmares, flashbacks, hallucinations, sleep difficulties, irritability, mood swings, poor concentration, decreased self-esteem, generalised anxiety and feelings of hopelessness and worthlessness. In addition, she reported strong feelings of self-directed anger that had resulted in self-injurious behaviour (superficial cuts to the abdomen). She had begun to experience thoughts of life not being worth living, death wishes and intermittent suicidal ideation. She said she did not want to die but wanted to stop thinking about the bomb and those who had died. She reported strong feelings of shame and survivor guilt and experienced recurrent images of a man with his head on fire jumping up and down in front of her. Jane also had symptoms of clinical depression. She was identified as presenting with PTSD, an abnormal grief reaction and depression.

In relation to the four tasks of mourning⁴, Jane was blocked at the first stage – that of denial. She unconsciously focused her energy trying to repress memories of the day of the bomb and the associated intrusive thoughts. In so doing, she denied not only the actual fact of the bomb but also the deaths of her

friends and thus prevented herself from processing what had happened.

As we all do, Jane functions on the basis of assumptions that are implicit and not actively thought of in the conscious mind⁴. These assumptions include a belief in personal invulnerability, the perception of the world as meaningful and comprehensible, and the view of ourselves in a positive light. Jane was unable to accept what had happened at a conscious level because the potential threat to her psychological equilibrium was too great. Her sense of invulnerability was significantly damaged in the explosion, as was her view of the world as a meaningful place.

Jane not only lost friends in the explosion, but also experienced a profound sense of betrayal (as did many in Omagh) because of the optimism and sense of hope that had been in place following the Good Friday Agreement earlier that year. In addition, because of misinformation received, the police directed people towards rather than away from the site of the explosion.

Jane's view of herself in a positive light was particularly damaged. She had always viewed herself as a disappointment to her mother and intended to do well academically to prove herself. Her PTSD and abnormal grief reaction interfered with her ability to do so, as she could not study because of her symptoms. Jane was also aware that her mother had seen the bodies of her friends in the casualty department and did not appear to be suffering psychologically, and this re-affirmed her sense of failure and worthlessness.

Jane's difficulties were further compounded by her age and developmental stage. Adolescents are egocentric and

believe they are unique and invulnerable, and this belief can actually heighten their vulnerability in the presence of a stressor. Jane not only had to process the bombing but also the deaths of those close to her.

Jane remained in treatment for approximately 18 months. In addition to individual psychotherapy and sessions with her mother, she required antidepressant medication. She was, with help, able to successfully integrate the trauma of the bomb and negotiate the tasks of mourning. She is now off medication and studying at university.

CONCLUSION

When dealing with trauma and death, it is important to be aware of the extent to which the psychological consequences of one can impact on the other and can distort the clinical presentation. Jane's difficulties were attributed (by those close to her) to the bomb. It was only in therapy that the full extent of her abnormal grief reaction was realised. Once this was acknowledged and addressed, it greatly aided treatment of her PTSD. BC

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BOOK REVIEW

AND THE PASSENGER WAS DEATH

The Drama and Trauma of Losing a Child

Douglas Daher

Amityville, New York, Baywood Publishing Company, 2003, 126pp, \$26.95 pb, ISBN 0 89503 244 9

This is a story of a father trying to come to terms with his adult son's sudden, tragic death. Agonising and uncertainty ensues, and persists to some extent, even after a verdict of accidental death is declared, because the question of how it happened is never fully resolved.

As the title indicates, the book is structured like a drama and divided into six acts, in turn subdivided into scenes whose headings further contribute to theme of a play. Most people who have experienced the death of a person close to them will recognise the inevitable sense of

unreality which engulfs the bereaved initially, and often for some considerable time afterwards. It seems unnecessary, therefore, to add to this disturbing feeling by describing the loss of a child as if it were a staged drama. Although Douglas Daher's story contains universal elements, at heart it describes his unique way of experiencing and dealing with this poignant event.

Certain aspects add to a sense of 'otherness' when reading this book. Based in West Coast, USA, the writer's use of language and rituals – he is also a psychologist and therapist – convey cultural attitudes that will feel alien to many Europeans. Above all, the various legal wrangles arising from this young man's death, and his father's way of dealing with these, strike an uneasy cord, at least with this reviewer. BC

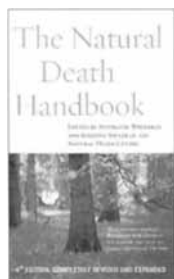
Els Footman

Trainer and Supervisor

Funerals à la carte

THE NATURAL DEATH HANDBOOK (4th edn)

Stephanie Wienrich, Josefine Speyer (eds)
 London: The Natural Death Centre, 2003, 379pp.
 £12.99 pb. ISBN 1 844 13226 9



This highly respected book is for those interested in developing family centered and environmentally-aware funeral practices, and in improving care of the dying. It includes a great deal of information, lists of useful contacts, practical ideas and sensitive advice on looking after a body following death.

The Natural Death Centre supports and encourages dying at home for those who wish it and this book has developed from their work. It begins with informative sections on the emotional, financial and practical preparations for death, whether at home or elsewhere, including a suggested format for advance directives on medical and personal care and on the type of funeral preferred.

The funerals section gives details of inexpensive and DIY alternatives. Many options are discussed, such as a motorcycle funeral with the hearse carried in the sidecar, and 'green burials' where a biodegradable coffin is used and the body is allowed to decompose naturally rather than being embalmed. There is information on suppliers of environmentally-friendly coffins and other body containers. The advice is pragmatic, for example there are some cautionary words for those considering a burial in their garden or paying for a funeral in advance.

Further chapters deal with burial and cremation. One describes more than 180 burial grounds in the UK and Ireland, and some abroad, which are described as 'natural' (ie a biodegradable coffin or shroud is used and a tree, shrub or flowers are planted instead of a headstone). There are lists of 'good' UK funeral directors that will provide an à la carte service, and 'good' burial grounds and crematoria who will deal with DIY funerals. One chapter is devoted to the technicalities of setting up a natural burial ground.

Finally, there is a sound chapter on grief and supporting those who are bereaved, and a thought-provoking one on the politics of dying. The latter makes practical suggestions for

medical, social and legislative changes that could help those who are dying or bereaved. These include, for hospitals, the development of a simple ritual for staff and patients to carry out when a patient dies and, for the State, the instigation of the right to a reasonable amount of bereavement leave from work.

THE DEAD GOOD FUNERALS BOOK (revised edn)

Sue Gill, John Fox
 Cumbria, UK: Engineers of the Imagination, 2004, 196 pp.
 £12.50 pb. ISBN 0 95271 590 2



The authors of this beautifully produced book are founder members of Welfare State International, an arts company committed to the creation of secular ceremonies to mark special events and rites of passage in the life of the individual and community. Their book is a mixture of basic information required to plan a funeral for yourself or someone else, and ideas and encouragement to do this with imagination and respect for the deceased and the mourners.

Although there are references to Christianity and brief descriptions of all the major faiths, especially in the context of death and disposal, there is an assumption that readers will have religious or spiritual beliefs while not subscribing to an established faith. There is an open antipathy to Christianity and Christian funerals, which is unfortunate as, while some of the criticism may be justified, much of it is ill-informed and comes over as prejudice.

Topics covered fall into four main categories:

- the history of the UK funeral industry with a focus on recent trends for more individual and environmentally-aware ceremonies
- the statutory and other practical requirements for planning a funeral, memorial event and memorial objects
- thoughts and feelings around death and bereavement, touching on different philosophies and faiths
- ideas and some examples for using any art form as an integral part of a funeral or memorial event, including some interesting secular poetry.

The book is structured in such a way that topics flow from one to another and, sometimes, back again. While this makes for a lively,

creative read, it could be confusing for someone planning a funeral at short notice. The intended readership is both private and professional. It is for all those who seek more diversity and creativity in funeral practice, and those who wish to plan a personal, artistically rich funeral, memorial or memorial event for themselves or for someone else who is approaching death.

THE FUNERAL HANDBOOK

Giles Legood, Ian Markham
 London: Society For Promoting Christian Knowledge
 2003, 120pp. £8.99 pb. ISBN 0 281 05413 4

This is a reference book for information and advice on coping with death and bereavement and planning a funeral or memorial. It also covers some of the financial aspects of death.

The authors are a Church of England university chaplain and a professor of theology. Their detailed information on, and suggestions for, planning a funeral are quite reasonably based on the assumption that the reader is interested in a Christian funeral. However, what comes over is a genuine respect for other faiths and beliefs. Legood and Markham give their interpretation of a Christianity which is grounded in 'a way of living in the here and now', alongside a thoughtful, brief history of disposal of the dead in various cultures. Along with the other books reviewed here, there is an emphasis on the importance of ritual, rites of passage and remembrance, although unlike those books it does not aim to create radical alternatives to a mainstream Christian funeral.

There is much of value on coping with bereavement and on relating this to planning a funeral and memorial which suits the deceased person and those who are bereaved. For example, the authors point out that when dealing with grief and thanksgiving for a life, 'truth is what works'; also that a memorial service is part of the grieving process and is likely to work less well if it is held too long after the death.

This could be a helpful book for someone pondering their own death, dealing with the approaching death of someone close, or who is a supporter or adviser to those who are dying or bereaved. The authors' experience of death and bereavement is apparent and it is this that would make the book helpful to non-Christians.

Those interested in the development of funerals and memorialisation might like to look at Tony Walter's *Funerals and How To Improve Them* (London: Hodder and Stoughton, 1990) or *The Daily Telegraph's* practical guide, *Funerals and Bereavement*, by Sam Weller (London: Kogan Page, 1999). BC

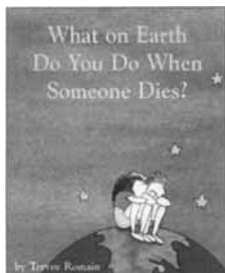
Christabel Hilliard
 Welfare Adviser

Trying to reach out to children and teenagers

WHAT ON EARTH DO YOU DO WHEN SOMEONE DIES?*

Trevor Romain

Minneapolis, USA, Free Spirit Publishing, 1999, 72pp.
\$7.95/£6.95* pb. ISBN 1 57542 055 4



This short book aims to help with some of the questions that children struggle with following a bereavement. Each section addresses a different question, including: Why do people have to die? Am I going to die too? Why am I hurting so much? Is the death my fault? What can I do if I'm angry? Will I ever feel better? Is it still OK to have fun? How can I say goodbye?

The text is written honestly, compassionately and carefully – I wish all clinical work were as well-considered – and the illustrations are lively and sympathetic. It would be most suitable for 6-10-year-olds: older children who do not want to talk might benefit from reading it on their own but it could also be read by an adult to a child (especially a younger one) as a springboard for further discussions.

We asked one of our clients to read the book and tell us what she thought:

I read this book six times because I like it so much. There are lots of things about this book that I like and perhaps if other people read it they might find it quite interesting themselves.

I really liked the chapter 'How to say goodbye' and I had a go at writing a poem about my brother, just like the book suggested. The poem reminded me of fun times with my brother and made me smile.

The book helped me to understand things and it explained that other people are going through the same thing. The book also helped me to understand words that describe different feelings, and the pictures were really good at showing how people look when they feel a certain way.

Katie Palmer

Aged 8

WHEN A FRIEND DIES

Maralyn Gootman

Minneapolis, USA, Free Spirit Publishers, 1994, 109pp.
\$9.95/£7.95 pb. ISBN 0 91579 366 0

This is a book 'for teens about grieving and healing'. It seeks to normalise young people's

reactions and gives them permission to feel just how they feel. More than that though, it also encourages them to think about ways of coping with their reactions. It is inherently optimistic and assures the reader that they will feel better. I wondered if such a strong assertion may be perceived by a grief-struck teenager to be a little condescending, and somewhat invalidating of their feelings and was concerned that this might put potential readers off. Furthermore I would not agree with its statement that, if thinking about seeing a therapist, it 'often helps' to find one who has also experienced the death of a friend.

Ideally, bereaved teenagers would have access to this sort of reassurance and guidance through their family and friends around them. However I realise that many do not have such support, and many others are not willing to accept it. Therefore this book may well be useful for teenagers who are not willing to discuss their reactions, or as a way of opening up conversations.

David Trickey

Chartered Clinical Psychologist

HEALING A TEEN'S GRIEVING HEART

100 Practical Ideas for Families, Friends and Caregivers

HEALING YOUR GRIEVING HEART FOR TEENS*

100 Practical Ideas

Alan Wolfelt

Fort Collins, Colorado, USA: Companion Press, 2001, 128pp. \$11.95/£10.50 pb (both). ISBN 1 887965 124 6; ISBN 1 87965 123 8

These two neatly presented, slim volumes are part of a series and it is helpful to consider them together, as a collective view better demonstrates the author's underlying approach and philosophy.

The book *For Families, Friends and Caregivers* begins with a useful and concise introduction which briefly describes the developmental tasks of adolescence in the context of bereavement, the benefit of support networks, the significance of the manner of death, and grief as an aspect of life. The rest of the book consists of one idea or suggestion per page, numbered one to 100.

The volume aimed at young people ('Teens') unfortunately misses out this useful introductory content. It launches into a confused, and I would say questionable, metaphor of a 'Personal Mourning Account': '...every time you do something good for emotional health you make a deposit...every time you compromise...by

cheating or being mean...you make a withdrawal...'

Both volumes continue in this tone. Wolfelt states his desire to respect each person's pace, to respect individuality and to offer sensitive support. He makes many general recommendations encouraging the bereaved young person to look after themselves, to express feelings in various ways, and to pay attention to mourning. Many of the ideas for adult carers and family are clearly intended to provide a continuing supportive and thoughtful presence for that young person. There are, however, many other ideas which take a different and problematic direction.

Wolfelt repeatedly focuses on religious belief in a way that makes too many assumptions about his audience: 'Visit a place of worship' and 'Believe in God's plan for you and this earth.' He continues by giving general health advice: 'Drink lots of water... And absolutely no alcohol' and 'Go to bed ... earlier tonight'. I very soon got the idea that Alan Wolfelt knows just what each young person needs, if only they would follow his advice.

I find that much of family life and experience is actually complicated and often messy, even if the outward appearance is orderly. Many families experience deprivation, abuse and domestic violence. Young people's lives are surrounded by alcohol and drug use. Families split and are frequently under pressure. Some of these issues are alluded to in these volumes, but are then side-stepped. Of a person who completed suicide we are simplistically told 'Know that he made his own choice'. Wolfelt does not discuss the complexities facing children and families after these experiences.

Literature to share with a young person, a carer or other professional, needs to be compassionate and respectful in keeping with anti-oppressive practice. The text needs to be clear in its therapeutic approach, to support the reader and to help clarify thinking. I would not recommend or use these books, because they are too partial. Rather than offering points for further thought or discussion, the author gives too much advice. While there may be a specific audience in the USA for these books, they do not acknowledge the life experience of the people I meet in my work. BC

Ralph Pettingill

Senior Practitioner, Barnardo's Orchard Project

* Available from Cruse Bereavement Care, 126 Sheen Road, Richmond TW9 1UR, UK; info@crusebereavementcare.org.uk

Picture books for young children

WHERE DO PEOPLE GO WHEN THEY DIE?

Mindy Portnoy

Minneapolis, USA: Kar-Ben, 2004, 24pp. \$15.95/£9.99 hb, ISBN 1 58013 081 X

The author of this stunningly illustrated book is a rabbi in Washington, USA. In it a child, who looks about eight years old, asks father, mother, grandfather, aunt, teacher and eventually 'myself' where people go when they die. Each gives a different answer and the questioner then synthesises the answers. An 'afterword' is aimed at parents with good advice about how to answer children's questions about death. I suspect the synthesis would be quite confusing to a child to read on their own but the book could be useful in a bereavement counselling context.

THE STRONG LITTLE TREE

Helen Peacock, Neil Reed

London, UK: Little Tiger Press, 2001, 32pp. £4.99 hb, ISBN 1 85430 7398 X

This is a beautifully told and illustrated tale of an ancient oak tree uprooted by a storm and cut up for timber, and of a sapling grown from one of its acorns buried by a squirrel which grows up to be a new oak tree. And then a wren finds one of the new tree's acorns and in turn it grows into a sapling, and so on. A lovely way of helping young children to understand about the cycle of birth and death.

SAM'S STORY

Fiona Chin-Yee

Halifax, Nova Scotia: Project Sam Publishing Co, 1998, 29pp. £5.00 pb*. ISBN 0 92145 001 X

This Canadian author has had a cot death and aims her book at the pre-schooler who has had a sibling die this way (called 'a crib death'). There is a pull-out leaflet for parents which is very helpful about young children's questions and how to answer them. The story anticipates many of the emotions and situations they may experience when a sibling dies: Mother's grief, pushing away the sibling, Sam's worry he may have caused the death by his ambivalent feelings, his perplexity about the big ambulance men who took his sibling away, and then Granny's involvement which offers explanations and some closure. It lists only Canadian bereavement organisations but bereavement counsellors could offer it to parents needing help for pre-schoolers bereaved of a sibling by cot-death. It does state that cot-death cannot be prevented and this needs modification in the next edition, given the recent research on placing babies on their back leading to a reduction in the incidence of cot death.

THE LITTLE BOAT WITH THE BIG BLUE EYES

Susan Beal

Adelaide, Australia: Susan Beal, 1996, 30pp. £5.00 pb*. ISBN 0 64627 3469 X

In Malta there are, apparently, little boats with 'eyes of Iris' painted on them. One boat, the narrator here, is injured in a gale, rescued by its parents who are also damaged and loses its best friend (boat) and rival in the races. It deals with grief, guilt, peer and parent support and might be a helpful way of introducing some of these emotions and ideas to a bereaved child. I am always a bit wary of anthropomorphising inanimate objects. The illustrations are delightful but the text is not attractively displayed.

WHERE'S JESS

Joy and Mary Johnson

Omaha, USA: Centering Corporation, 1982, 22pp. £5.00 pb*. ISBN 1 56123 009 X

First published in 1982, and revised ten years later, this is a book for a bereaved sibling wanting to know what 'dead' is. Again aimed at pre-schoolers, and, irritatingly, not really answering the question 'why did Jess die?' The illustrations are rather fey but it is a book for a child to have for their very own and may meet a need.

*Available in the UK from FSID; ☎ 0870 787 0885

THE SILVER SWAN

Michael Morpurgo

London, UK: Doubleday/Transworld, 2001, 29pp. £5.99pb, ISBN 0 55254 6143 X

This is my favourite of this batch of children's books on the subject of death. The writing and the illustrations are both outstanding and it does not make the swans, who mate and produce cygnets, or the fox and her cubs, who eat the dead mother swan, into speaking 'humans'. The (boy) narrator observes the processes of the wild and then feels bereft for the swan he had come to love over the months and sad for her cygnets, but realises the fox must feed her starving cubs after the long winter. A compassionate book for the older primary school child. This book does explain how the swan died, but none of the other books here, where a child dies, attempts to explain that illness or severe injury can lead to a body stopping working so that it can no longer breathe, eat, talk, move, see or hear. Nor do they help the parent to do so. As I have said before (*Bereavement Care* 2003; 2(3): 44-45), many children's authors, setting out to explain death to children, can't even explain it to themselves – a prerequisite for writing for children on the subject, I would think! BC

Dora Black

Consultant Child and Adolescent Psychiatrist

Hospice-based disaster care

COPING WITH PUBLIC TRAGEDY

Marcia Lattanzi-Licht, Kenneth J. Doka (eds)

New York: Brunner-Routledge and the Hospice Foundation of America, 2003, 314pp. \$24.95/£17.00 pb. ISBN 0 415 94601 8

In this book 30 authors, most of them from the USA, give a view of public tragedies which is very much influenced by the events of 9/11.

The book illustrates well both the strengths and the weaknesses of bereavement care in the USA at the present time. On the one hand we have an impressive number of governmental and non-governmental bodies that are able to provide funds and training for professional services in the wake of disasters (these are well-described in chapter 22). On the other, we have very little agreement regarding the efficacy of most of the services described, with enthusiasm, by their proponents.

Readers may be surprised at the roles advocated for hospice staff, who, in most countries, are more usually associated with the

care of the dying than the bereaved. But, in many parts of the USA, in order to obtain the highest quality of bereavement care, it is necessary to die in a hospice. There is no national organisation resembling Cruse Bereavement Care in the UK, which is able to provide a consistent quality of care throughout the country. Consequently it is both reasonable and necessary for hospice-based bereavement services to play a part in disaster care and this book is intended to educate hospice staff to respond appropriately.

In this capacity it succeeds very well. There are useful reviews of recent developments in the field of trauma counselling, support systems for emergency workers, veterans of combat and bereaved children, and ways of working with the media in the wake of disasters.

There is inconsistency in the presumed consequences of public tragedies with Rando warning us that they 'usually generate complicated grief' (p271) and Lamers asserting that 'The grief that follows the death of a public figure usually resolves spontaneously, without

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serious behavioral or psychological sequelae' (p54). This said, there is general agreement that, for those who suffer bereavement as a result of a public tragedy, there is often a need for help from outside their immediate family.

While it is easy to sympathise with the attention given to an event that, thanks to the news media, reached the living rooms of a large proportion of the human race; the book would have done better to attempt to get this in proportion. 3,000 deaths sounds large but, in a country as populous as the USA, amounts to no more than the number of road traffic deaths in a week. It was soon outnumbered by the deaths that resulted around the world, including the USA, as a consequence of military action and people travelling by car instead of air.

Several authors write about the therapeutic value of rituals but there is little consideration of the dangers. That in the Yankee Stadium, in which Oprah Winfrey acted as Master of Ceremonies and Lee Greenwood sang 'Proud to be an American', is extolled, by contrast with the ceremonies of the Anglican 'state church' and the theocracy of Moslem states (p197). Elsewhere a more traditional religious service is described in which the mood of the crowd changed abruptly from solemnity to cheers when 'a formation of National Guard helicopters approached and flew over the crowd' (p167). Such uplifting additions to orthodox rituals are undoubtedly popular but one must suspect that they feed into nationalistic and militaristic sentiments, which may do more harm than good. No doubt the rituals of the lynch mob were similarly enjoyed.

Colin Murray Parkes
Consultant Psychiatrist

SURVIVING WIDOWHOOD

Esther Goshen-Gottstein
Jerusalem, Israel: Gefen, 2002, 191 pp.
\$16.95. ISBN 9 65229 287 7

This is a well-structured, beautifully written book about an experience of widowhood. I say 'an' experience rather than 'the' experience, because the account is markedly class- and culturally-specific. Esther Goshen-Gottstein is the widow of an eminent and prolific Jewish academic: herself a clinical psychologist, they had travelled widely and most of

their married life revolved around highly intellectual circles. The first-hand description of Judaic mourning ritual is fascinating, and offered as an exemplar for coping strategies in the initial period of bereavement. Nevertheless, the narrative portrays piercing and sometimes harrowing insights into emotional and practical aspects of life after the death of a long-term partner. The author relates, with great sensitivity, the reaction of her children and grandchildren, friends and colleagues and their role in her 'reinventing' her life as a widow – a designation to which, at first, she objects strongly. Goshen-Gottstein's delicate balance between personal and professional reflections leads the reader through the process by which the meaning of the term *widow* comes to represent 'resilience' rather than 'loss', a journey which she makes, and shares, in this immensely intelligent and readable book.

Kate Davidson
Lecturer on Ageing and Gender

WHEN ALL THE FRIENDS HAVE GONE A Guide for Aftercare Providers

Duane Weeks, Catherine Johnson (eds)
Amityville, New York: Baywood, 2000,
264 pp. \$504.00 hb. ISBN 0 89503 215 5

The first half of this book describes the development of bereavement support and education services in the North American funeral industry over the past 20 years, while the second half consists of an assortment of contributions about hospital- and community-based bereavement services and 'general aftercare issues'. Funeral directors who wish to develop bereavement support and community education programmes will find it of interest. For others involved in 'aftercare', there are serious omissions, namely bereavement follow-up services offered internationally through the hospice and palliative care movement, and the substantial efforts of bereaved people themselves in the form of self-help groups and mutual aid organisations.

Although the editors appear to use aftercare synonymously with bereavement care, and include funeral services, hospices, hospitals, support groups, schools and churches in their definition, the scope of the book is actually quite limited. To add to the reader's confusion, the term 'aftercare' is interpreted by the contributors in widely differing ways.

One of the most useful chapters is Bob Bendixsen's discussion of ethical guidelines and dilemmas facing funeral

homes when profit motives are in conflict with altruistic and community service motives. Another valuable contribution by Ben Wolfe from St Mary's Medical Centre in Duluth, Minnesota, provides a step-by-step guide to the development of bereavement services in an acute hospital setting.

The book highlights the role that funeral directors can play in caring for the bereaved after the funeral, 'when all the friends have gone'. In the USA 50% of funeral directors provide some form of aftercare, certainly not standard practice throughout the world. Rather than assuming that aftercare is desirable, the editors might have included a stronger argument for offering such services, as well as examples of how funeral directors can work more closely with other service providers in the field of bereavement care

Irene Renzenbrink
Consultant in bereavement support services

ABSTRACTS

Recovery following bereavement: an examination of the concept

Balk DE. *Death Studies* 2004; 28(4): 361-374

The issue of *Death Studies* from which this article is taken was devoted to an examination of the work of Herman Feifel, who believed that appropriate attention to mourning and grieving allows the dead to die and the bereaved 'to redefine and reintegrate oneself into life'. The author takes this central focus on bereavement outcomes as the springboard for a discussion of the concept of recovery after loss. He examines the terms 'recover' and 'bereavement', and considers the centrality of concepts from life-span human developments, the life crisis literature, and existential phenomenology for defining the possibilities of recovery. This, he believes, can be achieved through the greater maturity which loss can give, and the opportunity for reaching out to others, the world and ourselves. 'Recovery from bereavement means we recover ourselves.'

Grieving, mourning, and healing following youth suicide: a focus on health and well being in families

Kalischuk RG, Hayes VE. *Omega* 2003-2004; 48(1): 45-67

The increase in the incidence of youth suicide in recent years is a complex and

disturbing fact of contemporary society; it has been identified as a global mental health problem of epidemic proportions. As one would expect, its greatest impact is on family members. The major theme developed in this study, which the authors describe as a 'journey towards wholeness', is viewed as a process involving the interrelationships between three sub-themes: grieving, mourning and healing in response to youth suicide. The reactions of 11 families (a total of 41 individuals) to the suicide of a young male family member are described, and the journey of the survivors towards wholeness is followed. The role that professionals can play in this process is also discussed. Although the number of people involved was small, the article is thought-provoking, and gives real insight into the grief of the survivors of youth suicide, and into their stratagems to find meaning in life despite the blow the experience has dealt them.

Where do we come from? Where do we go from here? Thirty years of death education in schools

Stevenson RG. *Illness, Crisis & Loss* 2004; 12(3): 231-238

This article examines the evolution of death education through the eyes of a New Jersey school teacher who is considered by some to be a pioneer in the field of death education. It looks at the start of one school's death education course more than 30 years ago and follows the themes that influenced its curriculum: consumerism, control, parenting, loss, and communication. The conclusion examines possible directions in the future, but also puts forward the possibility that, if the topics of death, dying, grief and loss move into the spotlight of enough people, perhaps there will no longer be any need for such courses. Although the article discusses other subjects than bereavement, it should be of interest to any teachers involved with children and students who have experienced loss or are likely to do so.

Micro-sociological analysis of social support following traumatic bereavement: unhelpful and avoidant responses from the community

Dyregrov K. *Omega* 2003-2004; 48(1): 23-44

This article explores the reasons why the social support given to survivors of