

# EDITORIAL

Colin Murray Parkes

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Cover: detail of *The Great Wave of Kanagawa*, from the series '36 Views of Mt. Fuji' ('Fugaku sanjuokkei') published by Nishimura Eijudo, 1831 (colour wood-block print) by Hokusai, Katsushika. Christie's Images / The Bridgeman Art Library

THE TIDAL SURGE which washed over us all this New Year will long be remembered and its effects will linger for years to come. A million people have lost their homes and about a third of a million their lives. The losses extend from Sumatra to Thailand, to Sri Lanka, to the east and south coasts of India, even to Africa and to the many islands in between. Our hearts go out to all whose lives have been wrecked by this tragedy and we will do our best to help.

Governments and non-governmental organisations from all over the world are providing resources for a huge response which, unless well organised, may turn into another tidal wave. A recent count (on 18 January) by the US government estimated that there were 441 relief workers and 33 international organisations represented in and around one small town, Meulaboh, in Sumatra alone. Experience in other disaster areas suggests that, in all the chaos, some traumatised persons will find themselves inundated with help while others fall through the net.

The situation has been summarised by Dr Julia Suryantan, Indonesia's Church World Service senior program officer for health and nutrition: 'The most urgent intervention now is a psychosocial or mental health one. This is the most prevalent concern.' But this does not mean that foreign psychologists, psychiatrists and counsellors should expect to provide direct service. Dr Suryantan adds, 'I believe that foreign experts are needed in terms of transferring knowledge and building the capacity of local people – including the displaced – and to help local organisations, but not as direct implementers.' This is the challenge to which some of our readers may be willing to respond.

Much can be done by those from other countries who remain at home. In this edition of *Bereavement Care* Amanda Aitken reviews the services available over the web to those who support tsunami-affected families and Debbie Kerslake describes services offered by Cruse Bereavement Care to UK citizens bereaved in the tsunami.

We also consider a challenge, by Kari Dyregrov, to the widespread assumption that it is wrong to 'medicalise' grief. David Trickey focuses on the special problems that arise when children and young people face the awful situation of bereavement by suicide. And, following a stillbirth, should mothers be encouraged to see and hold their dead baby? – systematic research that questions this assumption is reviewed in the abstracts section (p19).

Finally, we hope that you like will the new design of *Bereavement Care* and the fact that we are now a longer and more substantial journal. ●

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