#### BOOKS

common sense. Or you could use the opportunity to draw upon the author's 15 years' experience in pet-related grief counselling to help you guide your children through the terrain of grief and prepare them for adult bereavement.

#### Tania Woods

Psychologist and researcher for the PBSS

### Paddy's Peace Stephanie Raubitschek



Twickenham, Surrey, UK: Athena Press, 2004, 52pp £5.99 pb. ISBN 1 84401 204 2

This is a simple story about Ben, who acquires an old donkey called Paddy. Paddy is in a sorry state but is brought back to health and he and Ben live happily as friends for some years, and then Paddy sickens and dies. Ben's reactions and his mother's care of him are well shown and his grief is not glossed over – described as a great wave sweeping over him. He is helped by his talks with his mother and finally by a happy dream about Paddy. This is an attractive book with pastel illustrations.

I have one reservation. Ben went off to school one day, having seen a very sick donkey. When he came home the donkey had died and the vet had taken Paddy away to be buried. It would have been 'good practice' for Ben to be shown the dead Paddy who probably looked better than he had alive that morning; but this is a story. It is perhaps suitable to be read to children, say four to six, as there are some rather adult words and phrases. Older children reading it themselves might find the material a bit young. However, it could be a good talking point for any younger primary age children who have lost a pet or possibly a person.

# The Great Blue Yonder Alex Shearer



London: Macmillan Children's Books, 2001, 192pp £4.99 pb ISBN 0 33039 700 1

Twelve-year-old Harry was killed when he and his bike collided with a lorry. Just before he left home

he and his sister had angry words: 'You'll be sorry when I'm dead', and 'No, I won't, I'll be glad'. Any other book about bereavement would be about his sister coming to terms with this situation. Not Alex Shearer's!

This is the tale of Harry's experience in the `other lands' after he is dead. It is Harry who is going through the stages of adjustment to being dead! He and a new friend who died of a fever 150 years ago do a spot of haunting. They return to the world to see how life is progressing without him. Unheard and unseen, Harry visits his school to find another boy has his peg, his place in the football team, and his desk where he expected a plaque and a shrine in his memory. How could the football team be managing without him?

Then his disappointment is lessened when he sees a display of work on the wall about 'Our Friend Harry', and finds his sworn enemy has suggested a tree be planted in his memory. He visits his home and finds his parents and sister missing him and, by a process of thought transference, manages to make peace with his sister. This is perhaps the least convincing part of the story. Finally he realises life has moved on without him, and he comes to terms with no longer being alive. Having done this he can move on to 'the great blue yonder' for those who have dealt with their unfinished business.

It is hard to do justice to this subtle and sensitive story in a brief summary. It is certainly valuable for the general education of children about death. It would need to be used with caution with bereaved children, but they are often more resilient than we think, and it really does speak the language of children of about Harry's age. It is a very good read and it made me laugh but, like all the best comedy, it deals well with a serious theme.

#### Mary Bending

Teacher and Bereavement Counsellor

#### VIDEO

# In the Same Breath Elspeth Penny, Paul Wells



Holbrook, Ipswich UK Alpha Films, 2003 11 mins £19.95

In this short video, a widower, Quentin, whose wife has taken her own life, gives us a gentle master

class of his experience. He describes his thoughts, emotions and actions with a simple clarity that will allow those working with the bereaved, and the bereft themselves, to hear and recognise echoes of their own feelings. We follow his experiences and self-development on his journey through grief.

Quentin talks of being powerless, helpless, filled with guilt, self-blame and self-judgement. He explains how he tackles life day by day, recognising the value of support systems and trying to accept his situation, sometimes unsuccessfully. A friend tells us about the breathing techniques Quentin has taught him to achieve calmness and balance, and yet Quentin himself, in the grip of grief, describes sometimes being tight-chested and unable to breathe.

This video is not only a useful tool for training counsellors and bereavement support workers but also for many other agencies, eg the police, education, health and social care professionals. It raises awareness of the issues, so that such agencies can be more informed in their responses to bereaved people.

#### Alan Casselden

Counsellor, Supervisor and Trainer

#### ABSTRACTS

# Working systemically with grief

Moloney B. Grief Matters 2005; 8(2): 26-29

# Psychodynamic therapeutic approaches with people who are grieving

Chandler R. Grief Matters 2005; 8(2): 30-34

# Contemporary Gestalt: the application of key principles to grief work

O'Shea L. Grief Matters 2005; 8(2): 35-39

It is not often one reads about three distinct theoretical ways of working with bereaved people, as happens in this issue of *Grief Matters*. All describe the essential core components of their theoretical perspective in relation to a variety of themes.

The article by Moloney on systemic theory emphasises working with the varying and conflicting needs of individual members of a family. In a case study she describes how she listened to the concerns of each family member, across and within generations, while also suggesting how they could support one other. In describing psychodynamic approaches to grief work, Chandler considers the

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case study of a middle aged man for whom the death of his wife had triggered the necessity to talk about previous loss experiences. The author considers that she needed specific trauma therapy skills to help him and references a variety of resources that assisted her in this. O'Shea suggests various Gestalt models that could be applied in helping bereaved people. One is the cycle of awareness: a person may feel unpleasant physical sensations and tracking these can lead to identifying an emotional need which can then be verbalised and worked through.

The articles by Chandler and O'Shea also describe issues for the therapists as they assist their clients. The editor points out that while these authors seek to inform us, they all refer to 'not knowing' or 'uncertainty' as part of the practitioner's perspective. He strongly advocates the adoption of a theoretical perspective rather than a 'commonsense' approach because of the danger in the latter of insufficient questioning and reflection on therapeutic work.

There would seem to be some merit in an eclectic approach depending on the presenting situation. The ways of helping people described in these articles can be complementary, as in the case studies outlined in the articles on the Gestalt and psychodynamic approaches, or contrasting, as in systemic theory with its focus on family needs. Overall it is helpful to read these articles side by side to gain an understanding of these psychological perspectives in relation to bereaved people. Each article contains relevant bibliographies.

# Internet based treatment for complicated grief: concepts and case study

Wagner B, Knaevelsrud C, Maercker A. Journal of Loss and Trauma 2005; 10(5): 409-

Cognitive-behavioural therapy to treat complicated grief via the internet is an innovative intervention. Here a literature review is followed by a protocol for such an approach, illustrated by a case study of a mother whose son had committed suicide. The mother was invited to write ten essays over a five-week period. These included detailed accounts of her son's death, with two essays on his traumatic last moments; later a letter to an imaginary friend who had experienced a similar loss; and, finally, a letter of farewell which she chose to address to her son. The amount of input from the therapist is not clear. After completing the treatment, the mother reported that it had helped her to feel more comfortable with her memories. Various psychological tests indicated considerable improvement in her mental state immediately after

the intervention and at three months.

The article points to some benefits, for example anonymity and lack of formal referral criteria, as well limitations such as the potential for misunderstandings in the absence of spontaneous clarification. The authors are currently testing this form of bereavement intervention in a randomised control trial.

# Evaluation of the Bereavement Risk Index (BRI): a community hospice care protocol

Kristjanson LJ, Cousins K, Smith, J, Lewin G. International Journal of Palliative Nursing 2005; 22(2):610-618

This study tested the validity, reliability and feasibility of a version of the Parkes (1993) Bereavement Risk Index in an Australian home hospice care setting. The index was modified slightly for the Australian language context. The 172 bereaved adults who were invited to take part had all had a relative cared for by the hospice and this may account for the high response rate (87%). A researcher completed a form in each family home three and six months after bereavement. Various statistical tests did indeed confirm that this is a helpful, easy-to-use tool, but that a shorter version would show greater reliability, ie a scale assessing four points (pining, anger, self-reproach and perceived coping ability) rather than eight. The article also provides details of the risk index as well as protocols for bereaved individuals at high, moderate and low risk.

## Adaptation to bereavement

Dutton YC, Zisook S. Death Studies 2005; 29(10): 877-903

Using a multidimensional model of bereavement adaptation, this article reviews literature on paths to resilience among bereaved individuals. It suggests many ways in which widows in a study in San Diego have adapted to cope with their loss, exploring the effects of continuing bonds, the development of practical skills, new close relationships, and increased positive self-perceptions. All these coping mechanisms are illustrated by quotes which speak both of the pain of widows as well as their resilience. As the authors indicate 'painful and devastating as it can be, bereavement can also be associated with improved coping, personal growth and a new appreciation for life'.

# Personal transformation in midlife orphanhood: an empirical phenomenological study

Pope A. Omega 2005; 51(2): 107-123

This is another study on the positive aspects of bereavement. However, it is important to say that a condition of entry to the study was that the participants should feel transformed by their loss. In-depth interviews were conducted with four adults. These were qualitatively analysed, yielding 74 themes. Eight main headings were identified: caring for aging parents; emotional response to the parent's death; adjusting to the loss; changed relationships within the family; shifting roles; confronting mortality; interconnectedness with others, as in feeling part of a family heritage or having a wider perspective on life; and transformation of self including, for example, feeling a greater sensitivity or responsibility to others. The author suggests that while there was a continuing bond with their parents and a tendency to adhere to the parents' expectations, bereavement had also given a deeper sense of autonomy.

# The experience of Chinese bereaved persons: a preliminary study of meaning making and continuing bonds

Chan, C, Chow AYM, Ho SMY et al. Death Studies 2005; 29(10): 923-949

Grief counselling sessions with 52 bereaved Chinese Hong Kong residents were audio- and video-taped. The authors identify significant rituals around the time of death and the funeral and the participants indicated what aspects of these they found helpful or not. A number of themes connected with the concept of continuing bonds emerged. Of particular interest is the fact that the majority considered that the bonds had been initiated by the bereaved. People outside China are not likely to have heard of some of the rituals and will not experience similar continuity with their dead. However, the author has grounded them in a way which others can understand, yet which provides understanding of some unique Chinese experiences of bereavement.

#### Denise Brady

Librarian, St Christopher's Hospice, London

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