

## A B S T R A C T S

## Adult bereavement in five English hospices: types of support

Reid D, Field D, Payne S, Relf M. *International Journal of Palliative Nursing* 2006; **12**(9): 430-437

This study is the latest in a series of articles on in-depth case studies of five English hospices that provide bereavement services. The article enumerates the relatively wide range of services provided by the hospices. These are categorised as initial telephone contact, written information, counselling, one-to-one support from paid staff, befriending (volunteer support), therapeutic group work, social groups, drop-in events, spiritual support, remembrance services, anniversary cards, and referral to other agencies. There is a brief discussion of each element of these services. The research also suggests that hospices have their own 'local recipes' for bereavement support. For instance, only one hospice offered telephone support and only one ran a therapeutic group. There was no reference to social work support *per se*.

The article offers some implications for practice though there was not clear evidence as to what is 'best' practice. The case studies are an invaluable resource for discussion and understanding of services that are established, but under-examined.

## Academic constructions of bereavement

Valentine Christine. *Mortality* 2006; **11**(1): 57-78

This is a highly academic journey through psychology, anthropology and sociology taken to increase understanding of bereavement issues, especially as they have been researched and considered over the past 60 years. A main thrust of the argument is that the psychological theories of grief that were emphasised during much of this time have, in the last 10-20 years, been complemented by increasing qualitative research on social aspects of bereavement using a variety of sociological methods. The author considers there is a 'growing cross-disciplinary debate in which disciplines can draw from each other's insights'. Implicit in this is a deeper understanding of the real situation of bereaved people and one can readily agree with this statement. However, I think the review is so broad that it does not always do justice to the themes it highlights. It would have been more satisfying to take a few of the themes and develop them in greater depth, eg that of the continuing presence of dead people in the lives of their loved ones, or the tension between vulnerability and control in accompanying dying people who need both general guidance as well as recognition of their very individual needs. The denial of death

theories, for instance, were brought together very succinctly by Zimmermann and Rodin (2004).

Nevertheless, even though it is not systematic, the literature review alone is enough to warrant being aware of this article as it draws together an excellent bibliography of major British writers on the subject over the period. It is also a sound starting point for anyone interested in an academic history of the subject.

## Research with bereaved parents: a question of how not why

Hynson JL, Aroni R, Bauld C Sawyer SM. *Palliative Medicine* 2006; **20**(8): 805-811

The overall objective of this study was to improve understanding of the palliative care needs of families who have a child with a life-limiting illness. However, a major focus of the article was to examine bereaved parents' reactions to being involved in research sometime after the death of their child.

Out of 64 families who had attended a hospital in Victoria, Australia, 45 agreed to be interviewed. An ethics committee had been concerned about the vulnerability of these parents. Thus, part of the interview involved asking parents about the timing of the interview *vis-à-vis* the length of time since their child died, the initial approach of the researchers and the skills of the interviewer. Most parents participated on the basis that it might be helpful to other families if they agreed to be interviewed. However, many found it a helpful experience in itself, even if they occasionally experienced some distress. The authors do not refer to journals such as *Death Studies* or *Omega*, where evidence has already been published to suggest that bereaved parents can find a research interview helpful, if carried out with empathy and sensitivity (Milo EM 1997; Riches G, Dawson G 2002). This article clearly confirms that this is the case.

## Metaphorically speaking: the use of metaphors in grief therapy

Nadeau, JW. *Illness, Crisis and Loss* 2006; **14**(3): 201-221

The aim of this article is to give some examples of metaphors used by grieving people and to show how they can be used in grief therapy to understand bereaved people's experiences and to facilitate grief. The author provides a brief literature review and some examples of rich metaphors, eg the family life raft metaphor, the motoring metaphor, the family sacrifice metaphor. 'Speaking metaphorically, it is important for grief therapists to "tune in" to the metaphors clients are "broadcasting" and to work with clients to improve the quality of the "signal".'

## Grief support groups used by a few – are bereavement needs being met?

Stenier Carol. *Journal of Social Work In End-of-Life And Palliative Care* 2006; **2**(1): 29-53

The author is employed as a bereavement coordinator in a US hospice group comprising a number of agencies. She carried out an exploratory study with people involved in bereavement services in these organisation, looking at two focus groups: a) 10 bereaved people who attended a bereavement support group, and b) 12 bereavement professionals. Telephone interviews were also carried out with 10 bereaved people who had not attended a support group though they would have been informed that these were available in their area.

The data was analysed to identify major themes, and responses were synthesised from all three groups. Results were presented under the following headings: what was, and what was not helpful during bereavement; views on grief support groups; barriers to attending support groups; and suggestions for improvement.

This is a small study. However, the author states that a striking point is that support, validation and opportunities for expression of grief available immediately after the death of a loved one, often dry up quickly. Support groups have been found very helpful at this time but they are not well utilised. The importance of public education on bereavement is stressed. ●

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- MILO EM (1997). Maternal responses to the life and death of a child with a developmental disability: a story of hope. *Death Studies* 21(5): 443-475
- RICHES P, DAWSON G (2000). Shoestrings and bricolage: some notes on researching the impact of a child's death on family relationships. *Death Studies*, 26(3): 209-222.
- ZIMMERMANN C, RODIN G (2004). The denial of death thesis: sociological critique and implications for palliative care. *Palliative medicine* 2004; **18**(2): 121-128.

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