

ARTICLES

Figures of grief: metaphors from a bereavement writing groupMurphy E. *Omega* 2007-2008; 56 (4):359-367

This paper describes a community-based writing group that helps members identify and deal with death, dying and other forms of loss. A model is used that encourages the expression of difficult emotions in several ways. The leader makes a suggestion and group members write in response to this. They are

asked to read their first drafts to the group immediately and this often allows raw feelings to show.

This can be a risky process. However, the group members are asked to react to the writing by simply telling the writer what they remember and what struck them about the work. All are asked to discuss this as fiction, taking the emphasis off the writer's personal identity. This may seem contrived but it keeps discussion on the writing and communication rather than on the writer, with the aim of making everyone feel less vulnerable.

The case examples focus on a variety of

metaphors around death and dying. The author divides these in two with one connoting breakage, eg a ripped page, and the other erasure, eg empty chairs, fading clouds. Then she describes metaphors of grieving using natural forces, technology and fibre arts (like spinning wool into yarn) to make grief transformative into something useful or to help integrate it into the life of a bereaved person. Some moving and complex metaphors emerge.

An outline of a seven-week programme is provided including, for instance, writing on anger, on humour, and composing one's own obituary.

INDEX TO BEREAVEMENT CARE**Volume 27 Spring 2008 – Winter 2008**

**Key: A = article Ab = abstract
O = obituary R = review**

**No 1 = Spring issue
No 2 = Summer issue
No 3 = Winter issue**

Aitken A (R); No 1: 6
Aitken A (R); No 3: 58
Aldridge A (A); No 2: 23-26
Always and Forever (R); No 2: 38
Anderson D (R); No 1: 16
Antidepressants and the treatment of clinical depression (A); No 2: 33
Archer N (R); No 3: 60
Art of Grief, The (R); No 3: 61
Assessing grief and bereavement: observations from the field (Ab); No 2: 40
Ayres H (R); No 2: 38

Baron Sorensen J (R); No 1: 16
Barton Ross C (R); No 1: 16
Bereaved parents' perspectives on their needs (Ab); No 2: 39
Bereavement in Buddhist teaching and practice (A); No 2: 31-32
Bereavement in Schools (R); No 1: 6
Berger J (R); No 1: 17
Black D (R); No 2: 32
Boelen P (A); No 2: 27-30
Bolton G (R); No 3: 61
Boritzer E (R); No 2: 38
Brady D (Ab); No 1: 20
Brady D (Ab); No 2: 40
Brady D (Ab); No 3: 59-60

Centre for Crisis Psychology (A); No 1: 13
Chaplin D (R); No 3: 55-57
Cognitive behaviour therapy for complicated grief (A); No 2: 27-30
Cognitive behaviour therapy to prevent complicated grief among relatives and spouses bereaved by suicide: cluster randomised controlled trial (Ab); No 1: 20
Counselling Children and Adolescents Through Grief and Loss (R); No 1: 15
Crisis intervention in Finland; support after traumatic bereavement at the Vantaa Crisis Centre (A); No 1: 10-12
Death Abroad (R); No 2: 38

Death and Dying (R); No 2: 37
Does social support help with marital bereavement?(A); No 1: 3-6
Doughty C (R); No 1: 18-19
Durrant A (R); No 2: 38
Dual process model of coping with bereavement, The (Ab); No 3: 60
Dying, Bereavement and the Healing Arts (R); No 3: 61
Dyregrov A (A); No 1: 13

Eighth International Conference (R); No 3: 55-57
Empowering Children through Art and Expression (R); No 3: 62

Figures of grief (Ab); No 3: 59
Forini J (R); No 1: 15
Forrest G (A); No 1: 14-15
Forrest G (A); No 2: 34-35
Fullana M (R); No 2: 36

Gamino L A (R); No 2: 40
Gentle Keeping (R); No 2: 40
Get Sad When Somebody Dies (R); No 2: 38
Glasscock G (R); No 3: 55-57
Goble P (A); No 2: 31-32
Grandad's Ashes (R); No 2: 38
Grant Us Peace (R); No 2: 40
Grebler D (A); No 3: 51-54
Grief (R); No 1: 18-19
Group work with adolescents after violent death (R); No 2: 35
Guidance for Bereavement Needs Assessment in Palliative Care (R); No 3: 60
Guide to Pet Loss Resources, The (R); No 1: 16-17

Health outcomes of bereavement (Ab); No 1: 20
Heegaard M (R); No 1: 18-19
Holloway M (R); No 2: 38
Hotopf M (A); No 2: 33
House C (R); No 2: 38
Howarth G (R); No 2: 37

If There's Anything I Can Do (R); No 1: 18-19
Impact of peer death on adolescents girls, The (Ab); No 3: 60

Kerslake D (R); No 3: 55-57

James A (R); No 1: 18-19
Janney J (R); No 2: 39
Johnson P (R); No 3: 62

Johnson T (R); No 3: 59
Jokinen A (A); No 1: 10-12

Katz R (R); No 3: 59
Kelly J (R); No 2: 38
Klug R (R); No 2: 40

Leeds Animation Workshop (R); No 1: 15
Living with Bereavement (R); No 1: 18-19
Loss and Grief (R); No 2: 26

Negotiating Death in Contemporary Health and Social Care (R); No 2: 38

Machin L (R); No 3: 60
Mahoney B (R); No 2: 40
Marks I (R); No 2: 36
Michael in the clouds: talking to very young children about death (A); No 1: 7-9
Milly's Bug-Nut (R); No 2: 39
Mitchell M (R); No 2: 37
Mourners and mediums (A); No 3: 47-50
Mullen J A (R); No 1: 15
Muma P (A); No 1: 10-12
Music of the Soul; composing life out of loss (R); No 1: 16

Nehari M (A); No 3: 51-54

O'Brien M (R); No 2: 40
Outside the therapy room (Ab); No 3: 60

Parkes C (A); No 2: 33
Parental Suicide – the long-term impact on children and young people (A); No 3: 43-46
Perinatal loss – a life changing experience (A); No 2: 23-26
Pet Loss and Human Emotion, 2nd edition (R); No 1: 16-17
Psychotherapy for complicated bereavement (Ab); No 2: 40
Portrait diptych of John the Steadfast and his six year old son, John Frederick (R); No 2: 32
Poverty of death: social class, urban deprivation, and the criminological consequences of sequestration of death, The (Ab); No 2: 39

Relf M (R); No 3: 60
Remember Me (R); No 2: 37
Rogers JE (R); No 3: 61

Rynearson E (R); No 3: 59

St Thomas B (R); No 3: 62
Salloum A (R); No 2: 35
Schwiebert P (R); No 2: 38
Self-help for phobias and panic disorders (R); No 2: 36
Shinada-Izotov T (R); No 2: 38
Silent Grief, The (A); No 3: 51-54
Simone C (A); No 3: 43-46
Sjöqvist S (R); No 3: 62
Smith H I (R); No 2: 40
Smith W (R); No 2: 38
Some issues in the provision of adult bereavement support by UK hospices (Ab); No 1: 19-20
Still Here with Me (R); No 3: 62
Stroebe W (A); No 1: 3-6

Taylor Cooney A (R); No 2: 40
Teenage Grief (R); No 1: 15
Tengbom M (R); No 2: 40
Therapies for children and adolescents; part 1: individual therapies (A); No 1: 14-15
Therapies for children and adolescents; part 2: family and group therapy, parent training, medication (pharmacotherapy) and diet therapies (A); No 2: 34-35
Tree Fell in Paradise, A (R); No 2: 38
Tuzeeo-Jarolmen J (R); No 1: 16

Violent Death (R); No 3: 59

Walter T (A); No 3: 47-50
Way P (A); No 1: 7-9
We Were Gonna Have a Baby, but We Had an Angel Instead (R); No 2: 38
What has become of grief counselling? An evaluation of the empirical information of the new pessimism (Ab); No 1: 20
What is Death? (R); No 2: 38
When a Family Pet Dies (R); No 1: 16-17
When Professionals Weep (R); No 3: 59
When Your Baby Dies (R); No 2: 40
When Your Friend Dies (R); No 2: 40
When Your Parent Dies (R); No 2: 40
When Your Spouse Dies (R); No 2: 40
Where did Grandad go? (R); No 2: 38
Working with lesbian widows (Ab); No 2: 39
Wright B (R); No 2: 26

ARTICLES

The dual process model of coping with bereavement: overview and update

Stroebe MS, Schut H. *Grief Matters* 2008; 11(1): 4-10

This is an updated review, by the original authors, of the dual process model of bereavement first published in 1999. They emphasise that theirs is a model of how individuals *cope* with bereavement, ie it refers to the processes, strategies or style of managing bereavement by any one individual. Comparisons are made with the psychological models of Bowlby and Worden. The model is illustrated by a diagram showing how bereaved people oscillate between grief work and having to attend to changes in their lives, ie the loss-oriented aspects and the restoration-oriented aspects of coping with loss (see below).

The authors consider various ways in which their model could be applied to enhance scientific understanding, eg in relation to complicated grief, gender differences, the social and cultural context of grieving, and the element of coping over time. They then describe how they themselves have used it in research studies since 1999, and refer to a variety of studies by other researchers based on their model. Finally they consider that, like other models such as the phase and the task models, 'it has been subjected to too little stringent investigation'. Continued work by a variety of researchers in different fields would further validate its use as a tool in assisting bereaved people.

Outside the therapy room

McLeod J. *Therapy Today* 2008; 19 (4):14-16

This article brings to our attention the importance of acknowledging and supporting the counselling role that already exists in many disciplines not normally

considered psychotherapeutic. In fact, the author suggests that the majority of episodes of counselling actually take place outside any recognised counselling practice. He considers that the concept of 'counselling skills' in a variety of professions does not do justice to the complexity and reality of what he terms 'embedded counselling'. This form of psychological support often involves a willingness to be flexible and, for instance, hold a conversation in a busy hospital or school, and in the face of other pressing demands.

Teachers and nurses are continually embedding counselling in their work. This is not a shallow addition to their main role but a skill that should be acknowledged and developed so that it is recognised as therapeutically equivalent to that of qualified counsellors. Accredited counsellors could provide consultation, supervision and training that is appropriate to many occupational roles.

Consider the many job roles that involve dealing with bereaved people, for example nurses, funeral directors, probate solicitors, emergency service workers, newspaper marketing personnel dealing with death or memorial notices. Embedded counselling is undoubtedly a useful concept in developing many of these occupational roles to meet the needs of bereaved people.

The impact of peer death on adolescent girls: a task-oriented group intervention

Malone PA. *Journal of Social Work and End of Life Care* 2007; 3 (3): 23-37

Here is a practical article that describes an often disenfranchised aspect of bereavement, that of a friend or peer of an adolescent. The author chose to study girls because she considers that generally they are involved in a wider network than boys, with not

just best friends but also close friends and acquaintances: 'Their connection with others is a central organising feature in their psychological make-up'. Hence they are affected by a wider group of fellow adolescents who have died.

A task-orientated group intervention was devised. Groups of 6-10 girls met weekly for 60-90 minutes over 12 weeks, which was considered the right amount of time to attend to three main phases: a) creating and relating, b) coping; c) transitioning. There are two useful tables. One describes the detail of each session as well as the homework given between sessions, eg each girl was asked to create a ritual to remember and honour her deceased peer before session 8, and in session 9 they were asked to show or perform their rituals. The other table sets out the implications of each task, eg rituals can help to 'master cycles of disruption while remembering, integrating and transforming the loss'.

So often when one reads an article, one wants to know more. The issue of an adolescent with co-occurring disorders such as substance abuse or an eating disorder is mentioned. Sometimes an adolescent with such problems was excluded from the therapeutic group after a few sessions and the loss for that individual and for the group is recognised, but it would have been useful to hear more precisely how group cohesion and care of the individual was managed after such a split. *

Denise Brady

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The dual process model of coping with bereavement (Stroebe MS, Schut H. *Death Studies* 1999; 23: 197-224)



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