Editorial

Colin Murray Parkes

This issue marks a turning point in the history of *Bereavement Care* and we hope it also marks a turning point in the care of bereaved people. Our journal, which started as a small, in-house publication for Cruse, has grown into a respected source of information and inspiration for all who commit themselves to the service of bereaved people across the world. We are now in a position to extend our international access by joining with Routledge to increase the size and scope of the journal and to publish this, and, eventually, all past editions, online. Henceforth it will be possible for readers to download single articles, or the entire journal, from the Routledge website.

Although Routledge now publishes the journal, the management will remain in the hands of Cruse Bereavement Care and its independent editorial board, who will continue to decide its content. The existing board will be enlarged to reflect these developments.

This year also marks the Golden Jubilee of Cruse Bereavement Care, which will be celebrating 50 years of service to bereaved people. It too has grown to become the most respected and well-loved bereavement care service in England, Wales and Northern Ireland, and, with its close companion, Cruse Bereavement Care Scotland, in the United Kingdom. As part of the celebrations, Cruse will host a formal relaunch of *Bereavement Care* and a Jubilee conference on 16–17 July at Warwick University, at which participants will have an opportunity to meet leaders in the field of bereavement.

We have much to celebrate but should not let this go to our heads. Well-conducted research has thrown doubt on the lasting value of many traditional bereavement services. Most bereaved people, it appears, do not need, and will not benefit from, services that provide little more than a shoulder to cry on. On the other hand, other research has shown that, for the minority with severe and lasting distress, or with manifest psychological complications, the right help, given at the right time, can be most valuable. Clearly bereavement care is not easy. It requires special knowledge and understanding of the problems to which the loss of a loved person can give rise. This is what *Bereavement Care* exists to provide.

In this edition Tirril Harris reviews John Bowlby's *magnum opus*, the three volumes in *Attachment and Loss*, and reminds us of some of the important lessons to be learned from him. Bowlby was a child psychiatrist and showed that children can be at special risk following a family bereavement, but that lasting damage is not inevitable. Elsewhere Julie Stokes discusses how, at the Winston's Wish child bereavement charity, resilience can be fostered: '... the brain is a muscle and we are lifelong learners'.

There can be no greater challenge to bereavement care than genocidal killings and we need to learn all that we can about them if we are to respond to such horrific losses and, if possible, to find ways of preventing them. Three recent films about Rwanda help us to understand this ongoing tragedy and are reviewed here.

Another situation in which multiple traumatic deaths are common is the Arab/Israeli conflict. In the winter 2003 (volume 22(3)) edition of *Bereavement Care* we reported some of the services provided to bereaved people, on both sides, who were affected by this conflict. Such interventions require a range of responses, such as those described here by Ruth Anne Sadeh and Chaya Possick in their Israeli retreat.

Other contributions reflect the wide range of problems that we must tackle if we are to ensure that all those who need and will benefit from help do get it. Breffni McGuinness points out that most bereaved people who are in employment look to their managers at work for support, but do not always get it. He reports the results of a survey conducted in Ireland and outlines a bereavement policy for adoption by employers to guide line managers and ensure clarity about what the organisation can offer bereaved staff.

Add to these keynote papers our usual reviews of significant books, articles and websites and you have a journal that should be read by all those who give bereavement care.