

# Rocks and pebbles: a post-bereavement sibling's support group using music to explore grief.



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**Abstract:** Shooting Star CHASE is a children's hospice service with two hospices: Shooting Star House in Hampton and Christopher's near Guildford, Surrey. Since 2004, Christopher's has run groups for bereaved siblings. In the summer of 2008 an innovative collaborative approach to this group was piloted, joining the skills of the Music Therapist, Family Support and Bereavement Counsellor and musicians from the Royal Philharmonic Orchestra Community and Education team. The original model of working was adapted to create a musical framework, and music was used as the therapeutic medium of expression. This group was named 'Rocks and Pebbles', in reference to an analogy of grief becoming less painful over time.

This article outlines the development, implementation and evaluation of this innovative group. It goes on to report on a research project which explored the experiences of the professionals involved in this model of collaborative working, and examined their views on what contributed to the efficacy of the group.

**Keywords:** Bereaved siblings/music/therapy/group work

Children's palliative care evolved from the adult hospice movement in recognition that the specific needs of children and their families required a different and separate service. The Association for Children with Life Threatening or Terminal Conditions and their Families and the Royal College of Paediatrics and Child Health (2003) summarise the philosophy of paediatric palliative care in the following definition:

'Palliative care for children and young people with life-limiting conditions is an active and total approach to care, embracing physical, emotional, social and spiritual elements. It focuses on enhancements of quality of life for the child and support for the family and includes the management of distressing symptoms, provision of respite and care through death and bereavement.' (ACT 2008).

Christopher's children's hospice, part of Shooting Star CHASE, offers short breaks, end of life care and a hospice at home team which provides support for families in their

own homes. There is a strong multi-disciplinary team ethos at Shooting Star CHASE, in which working holistically together to meet the very individual physical, emotional, social and spiritual needs of the children and families is central to the work. This team approach has led to considerable cross-over between professions and innovative collaborative work which inspired the group discussed in this article. Warr (2007) summarises the importance of collaborative work in a children's hospice in the following statement: 'There is an urgent need for professionals and services to work collaboratively in order to enhance the quality of client experience and the effectiveness of support to life-limited children and their families. Working together is a continuum that incorporates multi-disciplinary, inter-disciplinary and trans-disciplinary cooperation. At each point along the trajectory of the children's illness, there is scope for professionals and service providers to work together to enhance the quality of experience for families.' (p 34).

## Sibling grief

Over the last two decades there has been an increasing awareness and interest in the needs of bereaved children, and the available literature has grown considerably alongside the development of specialist childhood bereavement support services. These developments recognise the need for intervention in order to prevent complicated grief in adulthood and reflect the current economic and political climate of prevention rather than cure.

The influential work of Bowlby (1999) illustrates the significance of early emotional bonds and the effects that attachment and loss have on our psychological well-being. Bowlby's research extends to bereaved children when he suggests that 'a child's ego is too weak to sustain the pain of mourning'. He proposes that grief which is not explored in childhood will inevitably have repercussions in adult life, for example resulting in difficulties in building relationships, psychiatric illness or underlying depression and anxiety.

Literature on the long-term effects of bereavement on children includes Fanos (1996), Davies (1999) and Brown (1999, 2008). According to The National Children's Bureau and The Childhood Bereavement Network (2007) when children and young people's support needs go unrecognised, bereavement and the changes that accompany it can make them more vulnerable to poor outcomes, particularly when there are disadvantaged circumstances.

Brown (2008) considers inter-related factors such as children's individuality, the family situation and the home environment to be central to shaping how a sibling may grieve. The importance of interventions aimed at preventing the development of difficulties in later life which offer opportunities to explore and express feelings, increase understanding of bereavement and develop coping skills are emphasised throughout.

Fauth *et al* (2009) confirm that bereaved children often report feeling alone and different and may lose confidence following a significant death. In their research parents reported that their children had difficulty making or keeping friends and were less likely to join clubs or participate in activities post-bereavement.

Ribbens McCarthy (2005) undertook a wide ranging review of the literature on the implications bereavement has on young people's lives. This reported the need to take a much longer term perspective in understanding the significance of bereavement in the lives of young people and how the bereavement will be revisited at different periods as the young person's life unfolds. Major themes included the search for meaning, the struggle to deal with overwhelming feelings, the implications for social relationships, the possibility of isolation and the young person's lack of power in terms of decisions made by those around them. The review points to the importance of peer support groups which may have a particular relevance in dealing with

specific bereavement difficulties as well as other issues in young people's lives.

These groups offer a shared experience and therapeutic space in which to explore the children's grief and the impact this has on themselves and other members of their families. Group work can enable children to find ways of coping with their grief and celebrate memories of their brother or sister. Doka and Martin (2000) suggest that: 'Groups can provide opportunities for education and ventilation, a place to bond with supportive others, suggestions for adapting, and hope that one can survive as others have done or seem to be doing.' (p 154)

## The Rocks and Pebbles Model

Rocks and Pebbles was developed from the post-bereavement siblings support groups which have taken place at Christopher's children's hospice since 2004. The original format used was similar to those which take place across the country in children's hospices or child bereavement organisations using arts and crafts as the medium of expression. In 2007, this group was facilitated by the Family Support and Bereavement Counsellor and co-facilitated by the Music Therapist at Christopher's. During this group, similarities and cross-over between the professions were recognised and the potential of using music to achieve the aims and objectives of the group was considered.

A review of the available literature focussing on the use of music with bereaved siblings revealed a significantly under-researched area. Music is used predominantly for scene setting and providing background accompaniment or relaxation rather than as a direct therapeutic medium. Ryan has explored the use of music and other creative arts mediums with paediatric bereavement support groups run by a music therapist and a social worker (1995). Ryan suggests that children use the arts as their first modes of expression and makes useful reference to the work of McIntyre and Raymer (1989) who highlight the role of music in facilitating grief. This work looks at how music can assist in evoking memories, promoting the commemoration of a loved one who has died and creating new memories.

Pavlicevic (2003) provides the most relevant research in this area, with references to the importance of interventions with bereaved siblings throughout. A chapter is dedicated to the findings of Mayhew's research dissertation (2003, 2005) which focuses on the development and implementation of a music therapy group with bereaved siblings. Music therapists are increasingly recognising the benefits of using music with bereaved siblings and more children's hospices are now developing such groups.

Following the success of two collaborative groups between the Music Therapist and the Community and Education team from the Royal Philharmonic Orchestra (RPO) working with the life-limited children using the

service, it was felt that there was considerable scope for joining their skills with the Family Support and Bereavement Counsellor to work therapeutically with bereaved siblings using music as the medium of expression. As a result, in 2008 the post-bereavement siblings support group was adapted to create a musical framework and drew on elements from each of these professions to create the model explored here.

## Rocks and pebbles analogy

The model of working was named 'Rocks and Pebbles', which makes reference to an analogy of grief becoming less painful to manage over time. During the group the children are asked to squeeze a rock in the palm of their hand and encouraged to talk about how this feels. Words such as sharp, painful and raw are often cited, which we liken to the initial feelings of grief. The children are then asked to hold and squeeze a pebble and again encouraged to describe this feeling. Grief is then described as becoming more like a pebble over time; still there but not so painful and raw.



**'Grief is like a jagged stone  
The edges wear away but the stone remains'  
The Compassionate Friends**

## Aims and objectives

The collaborative aims and objectives of the group are:

- To provide an opportunity for bereaved children to meet individuals in a similar situation to themselves.
- To provide a safe, contained environment in which bereaved children can share their experiences.
- To explore thoughts and feelings around bereavement and to make sense of them.
- To develop an understanding of how other family members cope with the death of a family member.

## Referral and assessment

Prior to each group, invitations are sent out to bereaved families known to Shooting Star CHASE with children

between the ages of five and nineteen who have been bereaved for more than three months before the proposed group. Once families have indicated they wish their children to attend the group, a home visit is arranged to provide the families with an opportunity to meet the group therapists, find out more about the group and ask any questions they may have. This also provides the group facilitators with the opportunity to meet the families and assess the referred child's suitability for the group. The assessment framework is adapted from the Winston's Wish children's grief support programme (2006). This assessment covers:

- story of what happened
- parent's understanding of what the child understands about the death and death in general
- child's understanding about the death and death in general
- child's grief reactions
- any specific issues/concerns regarding how the child is coping with their grief
- other professional support the child/family has sought/is receiving
- recommendation regarding attendance of group.

The information gained through assessment is used as a basis for compiling the group's content and programme, as well as a measure of assessing change in the emotions and behaviours of each participant.

During the visit each child is asked to bring to the group a photograph of their sibling who has died, a small rock and a piece of music/prose or poetry or special object which holds significant memories of their sibling. It is emphasised to the families that it is not necessary for the children to be able to play an instrument as everyone has an innate ability to respond to music, which is why this medium of expression is so beneficial. We aim to alleviate any particular fears about needing to be musical.

A general overview is provided to the child and family regarding the content of the group. It is explained to the children that they will have the opportunity to explore their grief with other bereaved siblings through therapeutic musical activities and song-writing workshops where they can compose a song about their sibling and create a CD together.

Between six and fifteen siblings aged between five and nineteen take part in the group each year. This ensures quality of time is provided for each child whilst ensuring their isolated position is not compounded.

## Structure of group process

- Referral
- Assessment
- 3-day group
- Post-group parents meeting

- Evaluation/report
- Follow-on individual work highlighted and referrals made

## Group programme

It is important at the beginning of each group to be clear about why the children are all together and what they have in common. When asked, most of the children are able to articulate the reason they are all there, which often leads to an immediate sense of support between the children as they begin to realise how many other children are in the room that have also experienced the death of their brother or sister.

The themes of the group are: me and my family; my sibling and memories; feelings and coping; the future. The first day focuses on helping the children to get to know each other and relax into the group setting using therapeutic activities and song-writing workshops to begin sharing memories and expressing their feelings both verbally and musically. These activities are based around the themes of Me and my Family and My Sibling and Memories.

The second day centres on enabling the children to explore the different feelings they have experienced around their bereavement and look at strategies for coping with these. Work continues with the song writing, some of the children creating individual compositions and others working collaboratively. Control and choice are key elements of this process in order to provide the children with an experience they may well be lacking in the rest of their lives.

The third and final day focuses on looking to the future, finishing and recording song-writing workshops and sharing and reflecting upon their work as a whole group.

## Case Studies

### Andrew

Andrew was six when he attended the Rocks and Pebbles group at Christopher's. His younger sister, Cathy, had died a year previously following a cardiac arrest, aged 11 months. Cathy had spent long periods of her short life in hospital and so Andrew had not only experienced the separation from his only sibling but from his mother as she cared for Cathy in the hospital. Andrew's mother was struggling to cope with his anxiety and demands for attention whilst managing her own grief. The group gave Andrew an opportunity to express his feelings of loss and focus on the special memories he had of his sister. He created a piece of music around these memories including the placing of his precious Action Man toy in his sister's coffin. Developing the words and music for this piece enabled Andrew to gain a sense of control over what he was expressing and a sense of pride in the finished composition which he shared with the rest of the group

and with his parents. A further benefit for Andrew in attending the group was the time spent with his mother travelling the long distance from home to the group each day the workshop was held. This gave him a time to talk to her about his experiences within the group and enabled his mother to gain an insight into Andrew's own unique experience of grief.

### Teenage group: Carl, Annie and Laura

Carl (15), Annie (16) and Laura (16) had been bereaved of their siblings a year before attending the Rocks and Pebbles group. Carl's sister died of a rare genetic degenerative condition; Annie and Laura both had brothers who had died of cancer. The group provided these teenagers with an opportunity to express their feelings of loss and their focus became their shared experience. All three teenagers had felt previously isolated in their grief. Carl found it difficult to talk about his feelings, which manifested in aggressive behaviour eventually resulting in him attending a pupil referral unit. Annie had a history of bullying which had heightened since her bereavement and Laura found it difficult to talk to her family about her grief for fear of upsetting them.

When sharing memories and feelings, a strong sense of strength developed between the teenagers and a realisation they were not alone. They decided to make a track together and quickly defined their own roles in the group. Carl wrote the lyrics based on his own poetry and their shared experiences, Annie read and recorded these and Laura played the piano. Upon reading Carl's words there was an unspoken agreement that they shared these feelings as they nodded and shed tears together.

The music gave the teenagers a focus for their grief which made it possible to verbalise and express their feelings. They gained strength from one another and their confidence and self-esteem grew throughout their creative process. Annie was not used to being exposed, yet was able to take the role of solo voice. Laura, after being initially reluctant to play the piano, played confidently in a recording studio environment and Carl was able to express their shared feelings through his beautiful and moving lyrics. The facilitators withdrew as much as possible to allow this creative process to evolve. This unshakable bond was based on their insight into each other's grief.

## Evaluation

The group is evaluated through feedback forms, a post-group parents meeting and direct conversations with the children, parents, facilitators and musicians. In addition, a musical assessment tool is used to provide a more creative and accessible means of evaluation for the children. At the beginning and end of the three days the children are encouraged to select a musical instrument to express how they are feeling at that precise moment, verbalising this if

they choose. The choice of instrument and feeling expressed are noted and compared. This provides a valuable insight into how membership of the group has impacted on each child's individual experience of grief.

Below are some examples of quotes from children, parents and musicians involved in the group derived from these methods of evaluation:

'Music speaks 1000 words'

'I enjoyed being around other kids in the same situation as me'

'I found it helpful spending time with other siblings because they felt the same way'

'It was really fun using music'

'Music helps a lot'

'I found it very helpful using music to express myself, it was excellent'

'It's better than talking'

'The music made me happy'

'I found it helpful for my child to have the opportunity to bring this issue to the fore, away from the family'

'He has been able to talk a little more about plans we have for his sister's ashes'

'He feels now that he doesn't feel he was the only one and was able to express his feelings'

'The CD was lovely – it was great to hear and know that the kids were able to express their feelings and keep their loved ones memories going'

'She has been able to talk more about her sister'

## Outcomes

Following the evaluation of the initial group it was concluded that the aims and objectives had been fully met and enhanced by the use of music. Some of the outcomes included:

- Relationship building often continuing beyond the life of the group.
- Providing a safe space in which thoughts and feelings concerning grief are explored. Made apparent through use of the musical assessment tool.
- Opening up conversations within children's families concerning feelings and experiences associated with their bereavement.
- Providing a sense of control for the children over how their grief was expressed. For example choosing whether or not the music and CD were shared with their family and wider social network.
- Highlighting the need for individual therapeutic work

for some of the children subsequently referred on for counselling, music or play therapy.

- Length of group extended by one day in order to create more time for song writing workshops.
- Successful collaboration between therapists and musicians which led to further joint work and development of the existing group
- Successful bids for further funding for the group to take place annually as a result of thorough research and evaluation.
- Raised awareness by presentation of this model of therapeutic group work by the professionals involved to a wider audience of associated professional groups and child bereavement organisations.

## Research project

In 2008, when planning the first Rocks and Pebbles group using music as the expressive medium, it was decided that it would be essential to carry out an in-depth research project which would measure this innovative way of working. When embarking upon the research project, we were most vitally interested in exploring the effectiveness of this model of working through the experience of the bereaved children. However, it became apparent that this would pose difficulties both in gaining ethical approval and in measurement of effectiveness. As an alternative, because this model of collaborative working had not yet been piloted, it was decided that the exploration of this model via the perspective of the professionals involved would provide a research project in itself, and this model of groupwork would benefit from the rigors of research and placing it within the context of the hospice movement.

The exploration of the model from the professional's experience took place through interviews with the Music Therapist, Family Support and Bereavement Counsellor and Workshop Leader from the RPO. The motivation lay in developing an evidence-base for the practice of this model and for future development and funding purposes. A qualitative research methodology using semi-structured interviews as the research method was selected as the most appropriate choice for this inquiry, in order to closely analyse the experience of the professionals involved in the group and explore individual perspectives. In order to analyse and interpret the data, the method of Interpretative Phenomenological Analysis devised by Smith (1995) was used. Verbal data was categorised into meaningful themes regarding psychological phenomenon of interest, in order to offer description rather than an explanation of the meanings in the data. This method of analysis was selected as most suitable for exploring the professional viewpoint of this one model of working and offering a description of the findings which enabled the researcher to discuss possible interpretations. Recurrent themes were identified across

the interview transcriptions and then grouped into broader domains in order to interpret the work.

Twenty-three themes emerged from the data and these were subsequently grouped into four domain headings:

- Domain 1: Role of music
- Domain 2: Impact on the professional of collaboration and how this influenced the work
- Domain 3: Overall professional experience of the model
- Domain 4: Future development of the model

The following discussion will focus on the first two domains. Of particular interest was whether the therapeutic use of music would enhance the group, and if working collaboratively would achieve synergy, a term used to describe the 'interaction or cooperation of two or more agents to produce a combined effect greater than the sum of their separate effects' (Compact Oxford English Dictionary 2005).

### Unique role of music

The research concurred with the evaluation of the group in the suggestion that the music brought the children together in a shared experience, created a safe environment and allowed the children to directly engage with their feelings. The findings revealed that music was perceived as a unique therapeutic medium which provided a sense of confidence and control and a means of building relationships.

As previously suggested, bereaved siblings have complex feelings as a result of losing their brother or sister. Mayhew (2005) suggests that the world may seem like an unpredictable and unsafe place in which the surviving sibling may feel out of control, relying entirely on adults for information. In addition adults may find it difficult to be honest and feel it is important to protect their child from the harsh realities of death. Stokes (2004) suggests that children do not always have the language or understanding to express how they feel, therefore having safe and creative ways to help express feelings concerning bereavement is vital.

The unique role of music was noted by all participants and described as the 'gateway in' to the group. It is interesting to further consider the significance of music in the hospice environment. Bunt (1994) suggests the role of our connection to music links with our inner-most emotional, spiritual and most private selves. He considers music as bringing us into close and immediate contact with people around us and at the same time connecting us both with images from the past and predictions of the immediate future. This concept was fundamental to the planning of the group's aims, objectives and programme which incorporated the themes of the value of the shared experience, continuing connections with deceased siblings and planning for the future.

The research indicated that the respondents felt music enabled the children to gain a sense of control over their loss through choices and decision making in song-writing workshops and gain confidence from their achievements. The music was cited as enabling the children to directly engage with their feelings and emotions and in turn aided the grieving process as their loss was explored. The 'power' of music to help aid the grieving process was a common theme in the overall experience of the model. The inquiry suggested that the therapeutic use of music not only addressed the aims and themes of the group but enhanced the work through a medium identified as unique.

Table 1 provides a more detailed domain and theme table which presents this theme accompanied by one illustrative verbatim quote from the participants and the number of times this theme emerged in the interviews:

### Collaboration

A review of the literature focussing on music therapy in collaborative and childhood bereavement work was very limited and indicates that this area would benefit from further research and publication in order to develop and encourage further practice.

The inquiry suggested that working collaboratively had a significant impact on the professionals involved which directly influenced the work. The most significant findings were the support that was derived from the team environment, the value of the different perspectives informing the work, and increased confidence both in the practitioners own work and working with other disciplines.

The need for support in this environment is reflected in the literature by authors such as Munro (1984), Lee (1995) and Ibberson (1996) who discuss the emotionally challenging nature of this area of clinical work and the importance of maintaining an 'emotional equilibrium' (Munro 1984).

It could be suggested the significance placed on support found in this research is linked to the emotionally challenging environment of the hospice and suggests a need for collaborative work both in terms of supporting the practitioner and meeting the needs of the children and families using these services. O'Neill (2008) confirms this notion when citing the importance of joint working in providing the emotional support necessary in order to work with children and families who are coping with the challenges of life-threatening conditions. Twyford and Watson (2008) suggest that collaborative work can provide a sense of identity and belonging and help professionals cope with the emotional impact of the work.

It was evident from the research that the professionals involved in the group particularly valued the different perspectives and wider expertise provided by the collaboration. It was recounted that having three different disciplines, perspectives and personalities

<b>Domain 1: Role of music in meeting group aims and themes</b>			
	<b>Themes</b>	<b>Quotations</b>	<b>Frequency</b>
1	<b>Enabled / enhanced group aims and themes</b>	<i>'I think the use of music really enhanced and enriched the group aims and themes'</i>	8
2	<b>Provided confidence and sense of control</b>	<i>'...that warm up piece really showed that, the ones who really weren't sure what they were playing, were suddenly a part of a fantastic piece of music and I think that gives them the confidence to then sort of go a little bit further and trust you and express feelings you probably wouldn't get at other times'</i>	10
3	<b>Created safe environment</b>	<i>The music 'created a safe environment that wasn't threatening'</i>	2
4	<b>Enhanced shared experience</b>	<i>'I do think the music brought the group together in a shared experience, I think this really pulled people together from the beginning'</i>	6
5	<b>Unique role of music</b>	<i>'I think the music side of it is really crucial....people are used to music, it's around them all the time and that's the important thing, it's not a strange concept...if it was a juggling workshop, I guess it would be quite difficult as it would be something they would really struggle with'</i>	11
6	<b>Helped build relationships / sense of trust</b>	<i>'There was a lot of mutual respect and understanding between the siblings...the music definitely helped to build relationships between the children and the staff'</i>	6
7	<b>Enabled expression of feelings</b>	<i>The music 'was so powerful at accessing the children's feelings and allowing them to express how they were feeling'</i>	10

Table 1: Domain 1 Themes

<b>Domain 2: Impact on the professional of collaboration and how this influenced the work</b>			
	<b>Themes</b>	<b>Quotations</b>	<b>Frequency</b>
8	<b>Learnt from one another</b>	<i>'It was really exciting to introduce new ways of working to one another, which meant moving out of our comfort zone and really maybe challenging ourselves and bringing more depth to our work'</i>	7
9	<b>Derived support from team environment</b>	<i>'This has been really important for me to move from sometimes quite an isolating practising position to having this support and opportunity to discuss the work'</i>	17
10	<b>Different perspectives informed work</b>	<i>'I think working collaboratively has given me a greater awareness and appreciation of other disciplines and of course to consider the work from different perspectives has been really enriching'</i>	12
11	<b>Increased confidence</b>	<i>'I think it's given me confidence to work with other disciplines'</i>	10
12	<b>Validation of work</b>	<i>'It was great to hear what they thought had worked well which mirrored mine and Hannah's thoughts I think, and this felt really helpful, again going back to validating the work and saying yes this really worked.'</i>	6
13	<b>Strong working relationships</b>	<i>'...very quickly we established a good rapport and there was a trust in each other's abilities and a respect in each other's abilities. That we knew that when we were handing over a bit, that that would be handled well, that would be handled sensitively, that it would be managed well, so just that handing over and building up that trust I think was really, really important'</i>	5

Table 2: Domain 2 Themes

considerably informed the planning and the work. Working collaboratively provided an opportunity to consider the work from different perspectives which in turn enriched the process. Twyford and Watson (2008) suggest that

'rather than dilute what we do in adopting other frames of reference, we gain from and add much to such collaborations'. (p 9)

As most professionals in hospices work within a holistic

philosophy, it could be argued that this environment is well positioned to initiate successful collaborative partnerships and may be particularly conducive to such work.

Table 3 provides a more detailed domain and theme table which presents this theme and is accompanied by one illustrative verbatim quote from the participants and the number of times this theme emerges in the interviews.

## Conclusion

Rocks and Pebbles was developed from the post-bereavement siblings support groups which have taken place at the hospice since 2004. This model of working was developed following a review of the literature which revealed limited research and practice based on collaborative partnerships in palliative care, in particular with bereaved siblings and the therapeutic use of music in post-bereavement support groups.

This article has focussed on exploring the development, implementation and evaluation of this group and, through the accompanying research, the professional experience of this model of collaborative working.

Both the evaluation and the research concluded that using music therapeutically provided the children with a creative medium which felt familiar and safe, gave them a sense of confidence and thus enabled the expression of feelings. The outcomes of the group and the results of the accompanying research suggest that the aims and objectives were fully met and enhanced by the use of music.

Essentially it was illustrated that in the experience of the professionals involved, the final outcome of this collaboration was indeed greater than the sum of its parts and therefore ‘collaborative synergy’ was achieved. ■

Association for Children with Life Threatening or Terminal Conditions and their Families and the Royal College of Paediatrics and Child Health (2003). *A guide to the development of children's palliative care services* (second edition). Bristol and London.

Bowlby J (1999). *Loss, sadness and depression: attachment and loss, Volume III*. London: Pimlico.

Brown E (1999). *Loss, change and grief – an educational perspective*. London: David Fulton.

Brown E (2008). *Supporting the child and the family in paediatric palliative care*. London: Jessica Kingsley.

Bunt L (1994). *Music therapy: an art beyond words*. London: Routledge.

Children's Hospices UK [www.childhospice.org.uk](http://www.childhospice.org.uk).

Davies B (1999). *Shadows in the sun: the experiences of sibling bereavement in childhood*. Philadelphia: Brunner/Mazel.

Doka K, Martin T (2000). *Men don't cry, women do – transcending gender stereotypes of grief*. USA: Taylor and Francis.

Fanos J (1996). *Sibling Loss*. New Jersey: Lawrence Erlbaum Associates.

Fauth B, Thompson M, Penny A (2009). *Associations between childhood bereavement and children's background, experiences and outcomes: Secondary analysis of the mental health of children and young people in Great Britain 2004 data*. London: NCB.

Ibberson C (1996). *A natural end: one story about Catherine*. British Journal of Music Therapy 10(1) 24–31.

Kammin V (2008). *Collaborative synergy? An exploration of a model of collaborative working with a siblings post-bereavement group in a children's hospice*. Unpublished Masters Dissertation.

Lee C (ed) (1995). *Lonely waters: proceedings of the international conference on music therapy in palliative care*. Oxford: Sobell Publications.

Mayhew J (2003). *A creative response to loss: developing a model of music therapy for bereaved siblings*. Unpublished Masters Dissertation.

Mayhew J (2005). *A creative response to loss: Developing a music therapy group for bereaved siblings*. In Pavlicevic M (ed) *Music therapy in children's hospices: Jessie's fund in action*. London: Jessica Kingsley Publishers.

McIntyre B, Raymer M (1989). *Expressive therapies in paediatric hospice care: What helps?* Los Angeles: Children's Hospital of Los Angeles.

Munro S (1978). Music therapy in palliative care *The Canadian Medical Association Journal* 119.

Munro S (1984). *Music therapy in palliative hospice care*. St Louis: Magnamusic-Baton.

National Children's Bureau (2007). *Grief matters for children: support for children and young people in public care experiencing bereavement and loss*. London: National Children's Bureau.

O'Neill N (2008). Collaborative working in an acute paediatric hospital in Twyford K, Watson T *Integrated team working: music therapy as part of transdisciplinary and collaborative approaches*. London: Jessica Kingsley.

Pavlicevic M (ed) (2005). *Music therapy in children's hospices: Jessie's fund in action*. London: Jessica Kingsley.

Ribbens McCarthy J (2005). *Young people, bereavement & loss: disruptive transitions*. London: Joseph Rowntree Foundation/National Children's Bureau.

Ryan K (1995). Access to music in paediatric bereavement support Groups. In Lee C (ed), *Lonely Waters*. Oxford: Sobell Publications.

Stokes J (2004). *Then, now and always: supporting children as they journey through grief: a guide for practitioners*. Cheltenham: Winston's Wish.

Twyford K, Watson T (2008). *Integrated team working: music therapy as part of transdisciplinary and collaborative approaches*. London: Jessica Kingsley.

Warr B (2007). Working Collaboratively. In Brown E (ed) (2007) *Supporting the Child and the Family in Paediatric Palliative Care*. London: Jessica Kingsley.

Winston's Wish (2006). *Completing a Family & Child/Young Person Assessment: Guidelines for Practitioners*. Cheltenham: Winston's Wish.