Bereavement in the Elderly

(continued from page 7)

other sources of help. Organisations for the elderly or the bereaved can do much to help the withdrawn widow or widower to begin a new life. Short-term psychotherapy may be needed when grief is debilitating, and it is sometimes necessary to explore earlier unresolved losses in a person's life in order to unravel the tang'ed consequences of a recent loss. Drugs may be needed if withdrawal or fear are so pronounced that the individual cannot begin the work of grieving.

Overall, the end result of caring is likely to be good. Whether we are helping the elderly grieve for the loss of a spouse, the loss of a home, a part of their body, or a particular job, we find ourselves involved in a process of growth and change that tends toward acceptance of renewal.

I recently met an old man whom I had previously seen during the course of making a television documentary, "The Life That's Left." At that time, two years after his wife's death, this man had been depressed and negativistic, refusing offers of help and without hope for the future, yet now he appeared suntanned and smiling, slightly plumper, and, he informed me, engaging in a wide range of hobbies and other activities. Eight years had passed, and he estimated that it had taken him five to get back on course. I reminded him that in the film he had asked for euthanasia. "What do you think about that now?" I asked him. "It would have been such a waste," he replied.

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IBCA: A POLICY STATEMENT

The Institute of Burial and Cremation Administ ation has put forward proposals for a common policy of its members to requests for burial or cremation of embryo babies following abortion and miscarriage. Its report was summa ised in 'Funeral Director' November, 1985.

A report on the phone-in from Broadcasting Support Services. Reprinted with permission.

The Shadow of Suicide was made by Mike MacCormack and shown on Monday, 20th January, opening the Open Space season on BBC 2. Broadcasting Support Services provided a helpline, funded by Gulbenkian Foundation.

The film opened with a brief statement—there are some 5,000 suicides and 100,000 suicide attempts per year in the UK—more by men than women—more older people than young—usually preceded by a period of severe depression. But this programme was not about suicide but its impact on the people left behind.

There were no more statistics, no experts. Three families, who had each lost a child by suicide, talked about it. The pa ents of Tom, who hanged himself at school a year ago aged 17. The mother and sister of Mandy, an engineering student, who jumped to her death 2½ years ago when she was 22. The parents of Frances, a nurse, who killed herself 9 years ago, also in her early twenties.

As well as their grief, the difficulty of believing it had really happened, the questioning why, the uselessness "Our love didn't make a blind bit of difference", they talked about other people's reactions "When you say she took her life people think she was a no gooder—but she was a daughter anyone would have wanted". "I feel other people are afraid of me."

BBC TV Presentation mentioned the helpline before the film and at the end said "If you have lost someone through suicide and would like to talk about it and find out about local support groups this helpline number is open for the next three hours. The number is 01-992 5522. If you don't get through the first time please keep trying."

The helpline was staffed by 4 members of Compassionate Friends (the self help group for bereaved parents), 3 members of Cruse (the national organisation for the widowed and their children), and 10 Samaritans.

We felt that those bereaved by suicide would want to make contact with each other, and wished there was such a group we could put them in touch with. Compassionate Friends do link up parents who have lost their children in similar circumstances. But for those who have lost someone other than a child by suicide there is no comparable service, though callers could ask their local Cruse branch to put them in touch with others if possible. Phone answerers were able to offer callers local contacts of Compassionate Friends, Cruse, Samaritans, Organisation for Parents Under Stress and Family Network Helplines, from directories compiled by BSS for the occasion. (As well as calls from people bereaved by suicide we expected other calls about suicide, and calls about other bereavements.)

The Response

Immediately the announcement ended all the phone answerers were hunched over their phones, listening intently, murmuring their acceptance of what they heard. With occasional breaks after particularly difficult calls, they continued like this all evening. This was certainly the quietest, most intensely hardworking helpline we have been involved with. There were few abortive calls—5 silent calls were recorded. 327 people told their experience during the evening; the 16 lines were all busy for the first 2 hours. 30 people phoned the next day when a Samaritan was here to help them.

Of the total of 357 calls 258 people (72%) had lost someone through suicide. Of the other calls, 51 were from those who had attempted suicide or felt suicidal, or from people concerned about others' attempted or possible suicide. The remaining 48 were made up of 15 from people who had been bereaved, but not through suicide, 10 from people who were distressed but not suicidal, 14 from professionals and volunteers wanting to help, and 9 people phoning to comment or contact the programme.

As with any helpline after a programme about emotional crisis, particularly one that breaks a social taboo, phone answerers had to gain callers' trust that they had really heard and understood them and therefore that the local support offered was also to be trusted. And they had to do this as quickly as possible so that as many callers as possible could be helped. By acknowledging many of the feelings involved the programme had already built up trust and callers came straight to the point. Many simply said how and when they had been bereaved, that they felt the grief, bewilderment, uselessness expressed in the programme, and asked for information on local support. Some were trying to be brave and needed to hear that it was alright to cry, to feel guilt and anger. Others needed a lot of time and care before they could trust the phone answerers to accept their suicidal despair, fear that they would re-enact a suicide, hatred, or guilt over feeling relief at a suicide. The average time of a call was 8 minutes, the longest was 1¼ hours.

As we expected many callers wished there was an organisation specifically for those bereaved by suicide, but all except a handful who were already in touch with the organisations, accepted the information we offered on sources of support. Many callers thanked the producer and BBC. "I was amazed it was put on, it was marvellous", "I'll be able to cope better now", "It was nice—upsetting—very worthwhile" and asked for the programme to be shown again. A few drew attention to aspects of suicide not covered by this programme, which they hoped might be looked at in future—including the causes of suicide and the rejection experienced by those who have attempted suicide.

Of the 258 people who had lost someone by suicide, 96 had lost a partner or ex-partner, 59 a child, 29 a parent, 26 a brother or sister, and 34 another relative, friend or client. 14 people had lost more than one person. The most recent loss was a week ago, the most distant 30 years. As usual for helplines on personal problems, more women (281, 79%) phoned than men (76, 21%) and this bias is reflected to different degrees in each group of callers. Among those who had lost someone by suicide, more mothers phoned than fathers, more daughters than sons, more sisters than brothers. Among those who had lost a partner or ex-partner, 10 times as many women phoned as men, which may also reflect the different patterns of suicide among men and women. Of the suicides callers talked about, 206 were by men and 51 by women, twice the bias in national rates. Callers had lost more sons than daughters, more brothers than sisters. But there were more phone calls about the loss of a mother than the loss of a father.

It is difficult to acknowledge the despair of suicide, let alone respond to the anguish of so many so close to it, as The Shadow of Suicide producer and phone answerers did. Many people are very grateful to them, and to the families who shared their grief as a source of strength for others.

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