REVIEWS



MAKING THE MOST OF A FUNERAL
Jenny Hockey.
Richmond, Surrey, UK: Cruse—Bereavement Care, 1992.
£3.25 + £1 p&p.

What happens at, or around, the funeral plays a large part in the process of bereavement, and here the role of the minister of religion is crucial. Jenny Hockey of Teeside Polytechnic (whose 'Experiences of Death: Anthropological Account' is also reviewed in this issue) has carried out a pilot study in Sheffield to see what lessons might be learnt.

The study was carried out on a small (and not necessarily statistically random) data-base: interviews with two ministers each from the Roman Catholic, Anglican, and Methodist churches; questionnaires answered by 65 Anglican, 16 Methodist, and four Roman Catholic ministers; and interviews with 22 recently bereaved people contacted via the minister who took the funeral. The conclusions of the study should therefore not be generalised, but they make very nutritious food for thought which needs to be digested both by the clergy and also by those responsible for their training and continuing ministerial education.

It is honest about criticisms which could be made of the minister, realistic about the emotional strain of being professionally 'religious' in a stressful situation, and aware of the constraints upon the minister who is usually short of available time and needs to manage it to best advantage. Despite all this, the ministers in Sheffield come out of their examination with considerable credit.

The study is descriptive rather than evaluative, but the reader will easily be able to distinguish between good practice and pastoral disasters, and the final section of 'Summary and Reflections' will be laid to heart by any ministers who read it. Funerals need to be personalised, and an address which combines the Christian message with personal details of the deceased need not be an hypocritical eulogy. Follow-up after the funeral is important (can members of the congregation be trained to do this, since there are not enough ministers to go round?). Many of the clergy are unfamiliar with recent literature about grief and the grief process.

Dr Hockey is to be congratulated on a study whose lessons, if learnt, could help even the most conscientious member of the clergy to do better by the mourners who seek consolation through the ministry of the Christian Church.

MICHAEL PERRY
Archdeacon of Durham

EXPERIENCES OF DEATH: AN ANTHROPOLOGICAL ACCOUNT.
Jennifer Hockey. Edinburgh: Edinburgh University Press, 1990. £30.00 hb; £12.95 pb.

'Neither the sun nor death can be looked at with a steady eye'. In order to give death meaning we have to approach it through a system of cultural metaphors which mediate and control our thinking. This is the theme of Jennifer Hockey's excellent and remarkable book.

It is based on her fieldwork as a 'participant observer' in three settings, a residential home for the elderly, a hospice and a branch of Cruse. She compares the two very different approaches to dying, in the residential home and the hospice: in the former death was never mentioned openly, although all the residents had reached such a state of physical incapacity and dependence that their deterioration and death were inevitable. The residents were largely cut off from all their former roots and were allowed only minimal personal belongings. Though they seemed to be treated with loving care, their control by the Matron and her staff was absolute. They were in a kind of limbo with few landmarks; they were given no help towards defining their final passage from life to death and any attempts which they made to provide their own rituals, to create their own metaphors which might help them to face death, were ignored or obstructed.

By contrast the thinking behind the hospice movement depends on public recognition of our passage towards death as the 'final act in the human drama'; every attempt is made to maintain linkages with the individual's past life and to make the final parting pain-free and dignified. In order to achieve this, the ideologies of Christianity and modern medicine meet, not always comfortably, for it has to be ad-

Two recent books by
SUSAN WALLBANK, bereavement counsellor
with Cruse—Bereavement Care

NEW

THE EMPTY BED
Bereavement and the Loss of Love

While we can share some aspects of the pain of bereavement with others, the sexual dimension often remains a taboo subject. In this long-awaited book, Cruse counsellor Susan Wallbank breaks the conspiracy of silence and addresses with sensitivity the many repercussions of losing a sexual partner.

The book covers both the practical and emotional difficulties of sexual loss and there are sections for the young, the middle aged, the old, those who have been living together but are not married, and partners of the same sex. Both the practical and emotional difficulties of sexual loss are addressed.

FACING GRIEF
Bereavement and the Young Adult

At last, a book aimed specifically at the 18-28 age group and those around them. In this book, Susan Wallbank deals frankly and compassionately with the confusing and often unrecognised needs of this vulnerable age-group after what is often the first major bereavement they have encountered.

Both books are available from Cruse—Bereavement Care, 126 Sheen Road, Richmond, Surrey TW9 1UR. THE EMPTY BED £7.95 plus £1.75 p&p; FACING GRIEF £6.95 plus £1.75 p&p.

FINAL GIFTS

UNDERSTANDING AND HELPING THE DYING

By Maggie Callanan & Patricia Kelley

The book for everyone who has been or ever will be close to someone who is dying.

'By being alongside sick people we learn our kinship with the frail and the wounded, our shared humanity and our common worth.'
Dr Sheila Cassidy

Communication can break down and the dying may need reconciliation with someone or something, or may feel the need to pass on some vital message before they can let go. This confusion can lead to the failure of expressing one's feelings honestly.

Maggie Callanan and Patricia Kelley draw on their many years of hospice nursing to show that by keeping an open mind and by listening carefully to dying people, we can begin to understand not only what they need to tell us, but also what the experience is like.

' Since death is a part of life, it is not specialist reading but for everybody.' *Rabbi Lionel Blue*

Hodder & Stoughton *Publishers*

mitted that medicine is always in the end defeated by death, whereas Christianity, for those who accept its ideology, offers a set of metaphors which can give meaning to the process of dying.

The author's approach to these issues is anthropological; the first half of the book is largely theoretical and some knowledge of anthropological concepts is assumed. Inevitably some readers may find this section indigestible, but it is to be hoped that they will persist, since the theory is brilliantly illuminated by the author's penetrating observations of 'Highfield' and 'Strathcarron Hospice' in the second half. Her analysis of these institutions, their physical and administrative structure, the roles of the staff and the residents and the way that all these fit together into a coherent metaphorical system is brilliant and at times almost merciless.

Perhaps Cruse is more necessary in a society such as our own which has no generally accepted metaphorical system which can give meaning to death. Cruse does not offer such a system, there are no right answers, no easy conclusions either to the experience of dying or to this book. We are still unable to look at death with a steady eye; all that Cruse counsellors can do is to help the bereaved find their own set of metaphors which may give meaning to their experience.

My serious criticism of this book is its price, £30*.

HYLA HOLDEN, MA, MRCPsych
Medical Anthropologist and
Bereavement Counsellor

Reference

1. La Rochefoucauld F. Maximes. Paris: Editions Garnier Freres, 1967 (Originally published 1678).

* *Since this review was written, the book has also become available in paperback, price £12.95.*

LAST THINGS: SOCIAL WORK WITH THE DYING AND BEREAVED

T. Philpott (ed). Wallington, Surrey: Community Care, 1989. £5.95 paperback.

Working with loss is a a central task of social work practice. This slim volume aims to introduce social workers to loss which involves death and bereavement. A secondary aim is to emphasise the multidiscipinary nature of this work, while specifying a clear role for social workers.

The chapters tend to fall into three categories: practical and sensitive suggestions on ways of working with the dying and bereaved; descriptions of services set up to help; and personal experiences of bereavement. The book is worth buying on a human level for Bel Mooney's moving exploration of her feelings ten years after the death of her second son at birth.

The practical chapters are genuinely helpful. Oswin emphasises the importance of preparation and the need to pace change for those bereaved who have learning difficulties. Hanvey is good on the 'mixture of bureaucratic, practical and emotional requirements' of dealing with death in residential care, though she does not discuss the powerful effect that a personal bereavement may have for a member of staff on her ability to continue caring in this intimate way. Reilly is very clear on the tasks of parents who have lost a baby and the role of the helper, and Hildebrand offers useful suggestions on ways families can be helped to grieve for a loss.

The chapters on services are more mixed. Earnshaw-Smith discusses thoroughly and sensitively ways to set up and run a bereavement service. Franklin conveys the pleasures and challenges of multidisciplinary work with the dying, but Pritchard's chapter on teamwork in the community is too general for this book.

The most disappointing chapter is the overview by Sylvia Poss. Her section on communication is good but her apparently uncritical acceptance of Kübler Ross will not help those struggling to understand the changing emotions of those who are dying. Her own religious conviction is intrusive and leads her to a one-sided discussion of the spiritual aspects of death and bereavement. This is in marked contrast to the excellent chapter on spiritual issues by Hollings, who, despite his own convictions, conveys an ability to value and respect the spiritual struggle of those without any religious belief.

The editing is not always as good as it should be. For instance, in the introduction Alison Wertheimer is described as losing a father through illness, when it is her mother's death of which she writes with passion.

Much of the material in this book is available in other books or articles by the same authors. However, its strength is that it offers social workers searching for help a good place to start. It is also cheap enough for every social work department to have a copy.

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OLDER BEREAVED SPOUSES: RESEARCH WITH PRACTICAL IMPLICATIONS

Dale A Lund (ed). New York and London: Hemisphere, 1989.

In most non-specialist organisations for bereaved people the largest group who seek help are widows over the age of 60, yet there has been little satisfactory research into the special needs of elderly widows and widowers. This book sets out to fill this gap. It reports the results of 14 research projects carried out in the USA by 13 contributors, as well as summarising much additional work. Sadly, much of this copious research is flawed. It is hard to draw firm conclusions from samples which only succeed in interviewing 18 per cent to 39 per cent of the target population. Similarly, postal questionnaires which were used in several studies are a poor method of obtaining reliable research findings.

Hence, it is not possible to know whether the claim that only five per cent of elderly bereaved developed clinical levels of depression (Chapter Four) means that elderly bereaved seldom get depressed, or that those elderly bereaved who *do* get depressed seldom agree to take part in research projects. With these caveats it is still interesting to find that 72 per cent of the widows and widowers sampled said that their spouse's death was the most stressful event they had experienced and that 70 per cent saw loneliness as their worst problem (Chapter 16).

As might be expected, most studies indicated that the greatest distress occurs in the first few months of bereavement, with very few differences between bereaved samples and married control groups remaining after the first year of bereavement. Among the minority who had more lasting problems, these did tend to persist. Widows reported more anxiety, phoblic and obsessional features than widowers (Chapter Two), but overall measures of physical and mental health showed no lasting differences between the sexes.

Among the elderly bereaved, untimely deaths seemed to be more traumatic than unexpected deaths. Three studies, Chapters 12, 13 and 14, enabled comparisons to be made between conjugal bereavement and divorce. Since the divorced tended to be younger in age than the widowed, these results need to be treated with caution. Widowed and divorced reported comparable grief, emotional shock, helplessness, and avoidance. Divorced, on the whole, reported more anger, guilt, and confusion; while the widowed reported more depression. In both groups the more autonomous the person before the loss the better he or she coped afterwards.

Other factors tending to good outcome in the elderly bereaved include high self-esteem, more sharing of tasks before bereavement, belief in one's own ability to control events, participation in religious observation, good social support, and good prior mental health. While none of these studies enable an assessment to be made on the effectiveness of bereavement counselling to this age group, it does appear that most elderly bereaved neither want nor need support. Bereavement services are most needed in the first few weeks, but long-term help may be required.

This book is a rich source of research information, and will be of interest to all serious students of bereavement.

C MURRAY PARKES
Senior Lecturer in Psychiatry

Please remember Cruse when you make your Will. We want to go on caring for the life that's left.

BEREAVEMENT CARE

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