Centre can assist you or your organisation, please feel free to contact us.

Other groups for young people have grown out of the Centre's programme. Our SIB's group, for children aged 7–13 who have a sibling chronically or terminally ill or with special needs, has been meeting monthly for the past six years. A six-session programme called 'Kids Can Cope' helps young people aged 8–16 who have a family member or friend with cancer, or any serious medical condition. For the siblings of children with special needs, we also run day and weekend workshops.

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REVIEWS

BOOKS

DEATH, DYING AND BEREAVEMENT

Donna Dickenson, Malcolm Johnson (eds). London: Sage Publications (in association with The Open University), 1993. £35.00 hb, £12.95 pb.

Neither a clinical guide nor an academic critique, this unusual book is a scholarly compilation of 65 separate writings expressing diverse viewpoints on the complex human issues surrounding death. These range from historical to modern, professional to personal, and scientific to literary. Indeed, the collection is a set text for the newly created Open University course *Death and Dying* – another indication of a growing national interest amongst many different groups in the subject of 'death studies'.

The book is divided into four logically sequenced parts, each with an initial and very helpful overview. The first part, Life and Death, has perhaps the most formidable task – namely of introducing a variety of contexts within which the contemporary meaning of dying and death are embedded. The result is a poignant, sometimes bewildering, juxtaposition of accounts. The second part, Preparing for Death, addresses the personal questions and uncertainties of those facing death and the professional and moral dilemmas of those who care for them. There are no easy answers to be found here but many valuable viewpoints on difficult issues such as euthanasia, living wills and organ procurement. The third part, Caring for Dying People, has a more pragmatic focus with a particularly emphasis on palliative medicine. A key theme emerging here is the importance of open communication. The fourth and final part, Bereavement: Private Grief, Collective Responsibility, explores the experiences of those left behind and how they can be helped. Here are some of the book's most personal and stirring accounts of loss.

The layout of the parts, along with the introduction and index, not only makes casual exploration easy but also lends the collection a sense of coherence, even completeness, for which the authors should be commended. My only criticism, necessarily personal but still I hope noteworthy, is the omission of any reference to childhood bereavement.

In summary, by approaching their subject through many perspectives – historical, medical, sociological, legal, theological and personal – Dickenson and Johnson have created a thoroughly readable, informative and enjoyable book which, at an affordable price, will hopefully open up new avenues of inquiry for a very wide readership. For those trying to help the dying and bereaved, this volume will inspire and move you as much as it will inform and guide your work.

Dr Bill Young
Senior Registrar in
Child and Adolescent Psychiatry

GOOD GRIEF (1 and 2)

Barbara Ward and Associates. *Uxbridge: Good Grief 1: Exploring* Feelings, Loss and Death with Over 11s and Adults, 3rd edn 1992. Good Grief 2: Exploring Feelings, Loss and Grief with Under 11s, 1st edn 1989. £25.00 each, spiral bound.§

There are children in every school who experience major loss through death or divorce. Yet there is little discussion about these issues, and teachers often feel unsure how to assist such children. Many different types of loss, including positive loss (eg moving house), can lead to grief and sorrow. When these are recognised and young people helped to work through the process of grieving, this provides not only immediate help but also a preparation for the major losses we all encounter.

Good Grief, described as a teaching pack, was developed as a response to teachers' needs for information and guidance. There are two books – one aimed at children under 11 years old and the other for over 11s and adults – and each divides into three sections.

The front section contains a series of short papers and articles, which aim to inform teachers about various aspects of loss. Some are written by mental health professionals, others by teachers giving their own experiences of coping with death and disaster, and yet others give practical advice.

The second section, which is the most extensive, contains a wide range of activities and teaching ideas arranged under several headings, eg feelings; what is death?; living with loss. Within each group the objectives are clearly stated and the teacher is referred to other parts of the book and to additional books for background reading. Ideas are then given about teaching approaches, content and activities. In the under-11s pack, ideas are often presented by describing successful school projects, and examples of children's work are included. In addition to teaching ideas, the over-11s pack contains many photocopiable work sheets for use in schools or other pastoral settings.

The final section of each book, the appendices, is a collection of reprinted newspaper and magazine articles, further short papers and extracts from books, book lists for students and teachers and useful addresses. The activities and teaching ideas draw on these materials as appropriate.

Marianne Urbanowicz
Educational Psychologist

§Available from Cruse—Bereavement Care, 126 Sheen Road, Richmond, Surrey TW9 1UR. £25 + £3.75 p&p.

TEEN PACK

Northern Ireland Cruse. 1992. £3.00.*

This well-presented, slim pack contains leaflets for teachers and counsellors of bereaved teenagers, guidelines on what to do after a death (information that seems to be aimed at adults rather than teens), and a series of leaflets that aim to explain grief and mourning in simple terms for teenagers. The topics include a look at the effect on friends at school, the emotions one feels, and changes in the family. Some poems and a book list are aimed at younger children as well. Although there is a special sheet on bereavement in Northern Ireland, which will be of special use and interest in that setting where violent death is far too common, the rest of the pack will have universal application and should prove a useful addition to the aids already available from Cruse to help counsellors, parents, teachers and others who have the task of helping young people to cope with a bereavement.

Dr Dora Black
Consultant Child Psychiatrist

*Available from Cruse—Bereavement Care, 126 Sheen Road, Richmond, Surrey TW9 1UR. £3 + £1 p&p.

FREDDIE. A DIARY OF A COT DEATH

Sarah Key. London: Heinemann, 1991. £10.99 hb.

THE FRUIT OF THE TREE

Jacqueline Luben. London: Nelson Houtman, 1992. £6.95 pb.

These personal accounts describe what happened when each author experienced a cot death – a baby dying from sudden infant death syndrome.

Sarah Key starts with the death and, in the months following the tragedy, uncovers through her diary the events leading up to the birth, the death and her reactions. This is a painful, honest book, which brings the reader face to face with many of the raw emotions that parents experience at such times. There is little about the emotional reactions of the other members of the family, but perhaps, bearing in mind the self-focusing that grief brings, in a personal diary this is not surprising. Particularly poignant is the epilogue.

Jacqueline Luben starts her story with her marriage, the struggle with a new baby and no money. She is able to share the trials of her early marriage humorously – the pain of living in a house that was being constructed around her, away from her family and friends, miscarriages, illness and the loss of a close friend. Her attachment to the house and garden grows while she is carrying Amanda. It is not until more than halfway into the book that Amanda is born. The author's readable style and the background setting to the trauma make the emotional pain easy for the reader to bear.

REVIEWS

COT DEATHS: COPING WITH SUDDEN INFANT DEATH SYNDROME

Jacqueline Luben. London: Bedford Square Press, revised edition1989. £6.95 pb.

COPING WITH COT DEATH

Sarah Murphy. London: Sheldon Press, 1990. £4.95 pb.

These two books will help parents and professionals cope after a cot death. Both draw on the experiences of others, giving illustrations of reactions to events and circumstances, and both are worth reading. If I could afford only one, I would buy Sarah Murphy's book, which I feel offers a broader range for professionals to draw on. Of particular value was her advice on what to do when newspaper headlines announce yet another new cause of cot deaths to reawaken parents' guilty feelings.

WHEN A BABY DIES

Nancy Kohner, Alix Henley. London: Pandora 1991. £6.99 pb.

This book will assist the reader in understanding what it means to lose a baby through miscarriage, stillbirth and neonatal death. The authors start with accounts from different parents, then describe the reactions and needs of parents after the loss, and finally discuss a further pregnancy and the next baby. The book ends with appendices of detailed medical explanations and principles of good practice. As in the other books reviewed above, extracts from parents' accounts graphically convey the feelings that many parents experience not only at the time of tragedy but also in the years that follow. The authors also pay attention to reactions after the birth of the next child and beyond.

PSYCHOLOGICAL ASPECTS OF STILLBIRTH AND NEONATAL DEATH; AN ANNOTATED BIBLIOGRAPHY

Stanford Bourne, Emanuel Lewis, Ian Vallender. London: Tavistock Clinic, 1992. £10.00 pb.

This annotated bibliography is likely to appeal to professionals more than parents. The authors' painstaking research has resulted in a book that will enable professionals to find easily what was written between 1960 and 1990 on stillbirth and neonatal death. Even more valuable is their introduction, which gives a broad outline of the history of attitudes towards and the long-term problems that can result from these deaths. This is the only book reviewed here that looks at the long-term problems that can follow baby death.

Hazelanne Lewis
Social Worker/Family Therapist

VIDEO

NOT TOO SMALL TO MOURN: CREATING MEMORIES FOR PARENTS

Liz Hopper. London: St George's Hospital Medical School, 1991. £47.00 VHS. Running time: 20 minutes.

This sensitively produced training video starts with a mother fearing that something is wrong, and continues through inducing, delivery, handling of the dead baby to the burial decisions. Throughout, it emphasises the importance of giving parents time, choice and clear, consistent information. What I felt was missing, especially in a training video, was the importance of offering support to staff during and after the stressful time of helping the bereaved parents.

Hazelanne Lewis
Social Worker/Family Therapist

ABSTRACTS

THREE YEARS LATER: GRIEF, VIEW OF LIFE AND PERSONAL CRISIS AFTER DEATH OF A FAMILY MEMBER

Kallenberg K, Soderfeldt B. *Journal of Palliative Care* 1992; **8**(4): 13–19.

This is a Swedish study of grief felt during the first year after a sudden death of a family member and again some three years later. The participants were divided into four groups: those experiencing boundless grief, whose lives basically were seriously impaired by the bereavement; those feeling suppressed grief, which was low or moderate at first, but who after three years showed no traces of grief; those experiencing spontaneous grief, which was at first intense; and finally those experiencing emerging grief, which, after a low or moderate grieving, increased for a period. In the last two groups, grief gradually lost intensity and was replaced by reflection, adjustment and reorientation. The study found that people in these two groups had high ego strength and a view of life characterised by trust. Their personality therefore played a large part in their ability to adjust to bereavement.

The only doubt about the validity of this study is that the group was a very small one – only 17 people were involved in the follow-up study in the third year.

A COMPARISON OF DEPRESSION IN WOMEN BEREAVED OF A SPOUSE, CHILD OR A PARENT

Leahy JM. *Omega* 1992/3; **26**(3): 207–17.

To investigate depression following bereavement, 255 middle-aged women (117 widows, 58 mothers and 80 daughters) completed the Beck Depression Inventory (BDI) short form. The intensity of the level of depression was analysed across the three types of bereavement. Bereaved mothers had significantly higher levels of depression than both widows and bereaved adult daughters. More than 60 per cent of the mothers had depression scores in the moderate or severe depression range. Widows had significantly higher levels of depression than adult daughters. Early intervention in the form of counselling may help the bereaved mother to grieve the loss of her child and promote a more effective resolution of the loss, but the results of this study, carried out in New York, neither support nor negate this conclusion.

PARENTAL GRIEF REACTIONS AND MARITAL INTIMACY FOLLOWING INFANT DEATH

Lang A, Gottlieb L. *Death Studies*1993; **17**(3): 233–55.

This study involved 57 couples (wives and husbands) who had lost an infant greater than 20 weeks' gestation and less than one year of age. The grief reactions of these mothers and fathers were examined especially in relation to the marital intimacy. The authors conclude that these mothers and fathers experienced their loss differently. Mothers who experienced a sudden loss rated their grief higher than that of their spouse, while fathers with lower ratings on the various components of marital intimacy (emotional, social, sexual and recreational) reported more intense grief reactions compared to those with a more intimate marital relationship.

SOCIAL CONTEXT OF POSTSUICIDE BEREAVEMENT

Van Dongen CJ. *Death Studies*1993; **17**(2): 125–41.

In this study, carried out in an American mid-western state, 35 adult survivors of the suicide of a family member were each questioned, in a 90 minute interview, about their social relationships since the death and about the support they had received. The interviewees reported that the immediate support from friends and relatives had been great, but that as time passed they had felt increasingly uncertain about how to behave in social situations, which had led a number of them to withdraw socially. For some interviewees, talking individually to other survivors was helpful while, for others, suicide support groups were often useful. In general, there was much less stigmatisation than has often been assumed to be the case.

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