REVIEWS



RECOVERY FROM BEREAVEMENT

by Colin Murray Parkes and Robert E. Weiss, Harper & Row, £15.95

The publication of this book is an important milestone in our contemporary efforts to understand, to explain and, if we may, to help with bereavement and loss. Perhaps some of the research, literary and clinical attempts of the latter half of this century on behalf of those who face loss can be seen as going towards repairing the neglect which our culture and society had come to impose upon them.

All of us who work in some capacity, professional or through befriending or self help, are increasingly aware of the need for information and education, if attitudes are ever to change. This need for education, not only at the professional level but also of individuals, the friends and neighbours and relatives of the bereaved, is dependent on enthusiasm to inform and to disseminate ideas and methods of 'good practice'. All of this hinges on solid, well conducted research.

This book marries, not only the talents and skills of two distinguished academics in the field, but also those qualities of enthusiasm for imparting knowledge and its derivation from firm research grounds.

Although it documents further aspects of the Harvard Bereavement Study in some depth, it is nevertheless surely accessible for the interested non-professional reader, as well as those who for further reference or research comparison will need to consult details of statistical or clinical method.

The book is organised into sections dealing with approaches to the general study of bereavement, the derivation of much of the content from a ten year review of the Harvard data and subsequent literature, patterns of normal and complicated grief, with helpful examination of the factors which distinguish them: 'unanticipated', 'conflicted' and 'chronic' grief. The section on the recovery process will be read with gratitude by many of those who are engaged in trying to assist bereaved clients or patients beginning to adapt to loss and who have often puzzled, as the authors themselves indicate in their introduction, over the ways in which human beings accomplish this. Much of the thoughtful reappraisal in this book comes from the insights which the authors have gained, and wish to share, into the importance of recent work in attachment and separation behaviour, and in particular the light this sheds on the difficulties some encounter in facing new and repeated losses.

Both the consequences of failure to recover (of importance in identifying those in need of specialised help) and the prediction of outcome are dealt with in depth. The necessity to be realistic in the provision of services, in order to give help only where it is most needed, is underlined, and the often-forgotten issue of *primum non nocere*—(first do no harm)—in other words, that inappropriate counselling of people who do not need it—is not ducked. The authors make the point that there will probably never be enough properly selected and trained counsellors to help all bereaved people, so that sensible selection, based on the best evidence we have, is vital.

The final section deals with the implications for care, with discussion of the lessons to be learned, for themselves and those whom we try to help, from other kinds of loss and their implications in terms of preparation, outcome and later impact on health and behaviour. In view of the frequency in our society of separation and divorce, the similarities to and differences from other losses more commonly seen as irrevocable are pertinently discussed. This chapter ends with the reflection that making contact with people facing loss is one way of preparing realistically for the inevitable losses in our own lives, not, as might perhaps be suggested, in order to somehow desensitise ourselves, but to help to create a 'community that cares and is to be trusted,' to promote mutual trust in life and in ourselves.

The final part of the book consists of appendices containing the research instruments used, and includes one on the application of work by Colin Parkes to the development of a Bereavement Risk Index for relatives of patients dying at St. Christopher's Hospice, and the way in which this has influenced after-care.

The book is liberally, and for my taste, helpfully illustrated with verbatim material from the original taped interviews—many of which confirm my experience of the great similarity of human reactions and responses in loss.

The book is in summary, an extremely helpful collection of existing and further work in the field, as an amalgam of clinical, bibliographical and research instruments. While non-professionals who read it to expand their knowledge and understanding will find it absorbing and readable, they may find the statistical analyses and methods difficult; this is unimportant, since there is more than enough 'meat' to sustain and absorb, while for those versed in the scientific aspects, it is usefully here collected. As a further bonus, references and quotations from important and relevant sources in history and literature are not forgotten. They heighten the interest and raise the literary standard of an excellent book.

I hope that it will soon, like 'Bereavement: Studies of Grief in Adult Life', become available in a paper-back edition in order that it can be accessible to all those concerned with bereavement and loss.

KERRY BLUGLASS

HOW IT FEELS WHEN A PARENT DIES

by Jill Krementz, Gollancz, £5.95

Eighteen children aged seven to 16 tell of their experiences and feelings when their mother or father died. Each story stands simply and without editorial comment save for the photographs, the smiles of the children and young people contrasting with the sadness of their narrative. Perhaps the most telling picture is of Gardner, 16, larger than his elderly father, with a protective arm around dad.

The theme that one hears again and again is the isolation these bereaved children feel. They hate to be different and don't want their peers to know or express sympathy. They fear to talk about their dead parent in case they upset the live one. They can't bear the grief around them and in particular feel that the constant round of visitors—of comfort to the adults—is useless to them. The noise, the confusion, the resulting restriction of contact with their nuclear family are all resented.

There is a remarkable uniformity in these children's responses although they vary in background, wealth and colour. Those who were lucky enough to find a counsellor or sympathetic psychiatrist (far more in USA than would be the case here, one suspects) are united in their gratitude. Helen, now 16, lost her mother from multiple sclerosis when she was 11, but before her death Helen looked after her in her wheelchair when the parents parted. Her childhood was lost. Then Helen acquired a 'big sister'. Mary, a guidance counsellor, befriended her a month later. 'We see each other every weekend and we do things like go to movies, and we go shopping. I have a big collection of stuffed animals. I guess they represent the childhood I never really had, but the best thing we do is just talk. Meeting Mary is about the most wonderful thing that ever happened to me.'

Worries about money mar their childhood and guilt about their anger at being deserted by the dead parent—although they know it's irrational. There's no railing at fate—for all there's a matter-of-fact acceptance of the loss. Jack, eight, can't figure out why his dad should shoot himself: 'I dream that God just tells me why my father did this. My grandmother . . . said that he did it for us but I'm not sure that is true . . . I know he did it for a reason . . . I'm not mad at him, you just don't like to be mad at your own father just because he did something you didn't want him to do.'

Jill Krementz decided to write this book to help bereaved children not to feel alone and to help their relatives and teachers to understand how they feel. I found it moving, surprising at times (they mostly all hated cemetery visits) and full of hope. Many of the children found they could cope, found someone to talk to, or even a step-parent who cared. Nick, 15, speaking of his new half-brother says 'I could never call Karen (his step mother) "Mom" and I sort of wished he couldn't either so that we could be perfect brothers. I wish that his mom was my mom and he would feel what I feel about Mom. As it is he'll never know.'

DORA BLACK

Originally published in *Adoption & Fostering*, and used with permission.

THE NURSING CARE OF THE DYING PATIENT

by Alison Charles-Edwards, SRN, HV, JBLNS, Beaconsfield Publishers, 20 Chiltern Hill Rd., Beaconsfield, Bucks. HP9 1PL. £7.50.

In her preface, the author explains that she is attempting to answer the need for information regarding the whole kaleidoscope of terminal care, including the control of symptoms, the physical and psychological aspects of nursing and the practicalities.

The result is an extremely helpful and interesting book which should be available

in the nursing libraries of every hospice and hospital where dying patients are treated. It has an excellent bibliography at the end of each chapter, thus encouraging further studies of this vital subject.

The importance of good communication between patients, relatives and the caring team is recognised and examples of case work given. The importance of counselling for patients' relatives and staff is stressed and techniques are described.

There is a comprehensive section about the management of physical and psychological pain, including useful information regarding analgesics and the effect of differing conditions. The attitude that "there is nothing now that we can do" when curative treatment has failed, is challenged, and nursing techniques are described which may improve the quality of the life which is left.

The rewards of caring for dying patients and their families are vividly described. There is an excellent chapter on practical procedures following the death of a patient and information about professional and voluntary agencies who provide appropriate services for the relatives of the deceased.

The grief of bereavement is explored and methods of helping patients, relatives and nursing staff to work through some of these problems are described.

I warmly recommend it especially to all nurses and medical colleagues who can influence policy decisions which affect the quality of life for dying patients.

HAZEL EDWARDS

PERFECT HAPPINESS

by Penelope Lively (Heinemann, £7.95)
Many bereavement counsellors will be interested to read this extremely well-written novel about bereavement, and want to recommend it to some of their clients, for there is both insight and warmth within both the succinct descriptions and the taut dialogue.

Teaching Children Strategies for Coping with Stress

continued from p.3

During this period families were counselled in how to respond to their children. The parents were encouraged to share their own feelings with their children and together to work through the difficult period of recuperation. The reactions subsided gradually and the children resumed their daily activities. The follow-up surveys, at two months and at eight months later, found no perseverance of symptoms in any of the children, with a few exceptions for whom treatment was resumed. As the survey included a sample of the entire child population of the town, an interesting phenomenon emerged: the impact of the trauma on the children changed depending upon the actual physical distance from the scene of the event. The further the children lived from the site of the attack, the less they were affected (with the exception of a few vulnerable children, who had previously gone through a personal crisis that had been reactivated by the attack).

A need for evaluation

To provide such stress-intervention and prevention programmes can easily become a Sisyphian task. The continual tensions in the Middle East, and the urgent need for stress intervention, make the task of systematically evaluating such programmes difficult. But, with patience and some luck, we are able to demonstrate in repeated trials the effectiveness of such stress-prevention programmes.

One model-programme of coping training is being conducted in one of the schools of Kiryat-Shmona, a town which is a notoriously easy target for across-the-border shelling (Zuckerman-Bareli 1979).

The effects of training might not have become known, had it not been for the occurrence of a recent ultra-sonic boom, that sent the whole school running to the air shelter. A natural experimental design offered itself to the ready observer. More than 400 pupils, aged 6-12, panicked in the shelter in the same way that they had done in previous shelling attacks, having learned no prior adaptive behaviour through repeated experiences. Their teachers were helpless as well. But one large group of 50 children stood out as an organized island of peace amidst the commotion. These were the recipients of the coping training, who had already been well drilled in routines for peer-group support and peer-leadership, and who were equipped with pre-arranged activity kits with tasks to be fulfilled in the shelter. For them the event was a signal to rehearse their newly acquired behaviours.

A second group of 16 children, only half way through their coping training, were rehearsing a simulated shelling attack when the alarm struck. Their behaviour was more problematic. Initially they panicked, but pulled themselves together in a very short while and joined the 'experimental' group in the shelter in modelling both mastery and ingenuity.

References

Ayalon, O., *Rescuel A teachers guide for coping with emergencies.* Issum. Pub. Com. University of Haifa, Haifa 1978 (Hebrew).

Ayalon, O., *Community Oriented preparation for Emergency: COPE.* Death Education 3 (1979a) 27-245.

Ayalon, O., Is death a proper subject for the classroom? *Internat. J. Soc. Psychiatr.* 25 (1979b) 252-258.

Ben-Eli, Z. & M. Sella, Terrorists in Naharia. *Israeli J. Psychol. & Counsel. Educ.* 13 (1980) 94-101 (Hebrew).

Janis, I., *Stress and frustration.* Harcourt, Brace, Jovanovich, New York 1971.

Zuckerman-Bareli, Ch., Effects of border tensions on residents of an Israeli town. *J. Human Stress* 9 (1979) 29-40.

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This paper is an edited version of one presented to the first European Congress of the European Union of School & University Health & Medicine in 1981 at Amsterdam, and first published in Tidschrift voor Sociale Geneeskunde (Journal of Social Medicine) of the Netherlands, 10 Nov. 1982.

Cruse News

CRUSE ACADEMIC PAPERS

Cruse Academic Papers are now available at £1 each (inc. p&p) from Cruse House:

SUICIDE

Academic Papers No. 1 comprises a reprint of the article on The Risk of Suicide following Bereavement by Dr. C. Murray Parkes (originally published in *Bereavement Care,* Vol. I, No. 1), together with A Review of the Literature on Bereavement following Suicide by Dr. S. Henley.

SUPERVISION

Academic Papers No. 2 is a reprint of the article on Supervision and Consultant Care —Counselling the Counsellors by Gill Parker, Family Therapist, from *Bereavement Care,* Vol. I, No. 2.

WELSH RESIDENTIAL COURSE

Cruse & St. David's Foundation in Gwent are holding a residential course on The Theory & Practice of Bereavement Counselling at Dyffryn House, St. Nicholas, Cardiff, from 19th-23rd March, 1984. The leader will be Susan Le Poidevin. Fee £100. Details from: St. David's Foundation, Cumbrian House, St. John's Rd., Maindee, Newport, Gwent.

Cruse S & W Wales Area Conference was on 15th October. Delegates were each able to attend two of the four discussion groups. They were on: Our First Year as a Branch, Group Counselling, Sexual Needs & Planning a Social Programme. Dr. Colin Murray Parkes, Chairman of Cruse, gave the main address on Bereavement Counselling.

The SW Area Conference was on 12th November. Individual branch concerns and Cruse Silver Jubilee plans were on the agenda. The main subject for discussion was publicity, and the conference had an excellent speaker on the subject from the Prospect Foundation.

BEREAVEMENT CARE is published for all Cruse workers and others who wish to deepen their understanding of bereavement. It is sold subject to the condition that it shall not be lent, re-sold, reproduced in part or in entirety, hired out or otherwise circulated without the publisher's consent.

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