

BOOK REVIEWS

Grief, Mourning and Death Ritual
Hockey J., Katz J., and Small N. (eds.)
ISBN 0-335-20501-1
Open University Press

This is another welcome text from the excellent Facing Death Series edited by David Clark. Although there is a little overlap with Tony Walter's "On bereavement: the culture of grief" it brings together a variety of different perspectives, supported by research in a good range of situations. Thus it should serve to deepen and broaden understanding of current thinking and issues relating to individual and institutional responses to death across the life cycle and various bereavement situations.

The book is presented in three sections: theories of loss, implications for practice and finally ritual and memorialisation. Each section begins with an in-depth critical analysis of theory and changing ideas, examining the historical, social and cultural contexts. Drawing on social and anthropological theory, the text introduces several concepts and a language that may be unfamiliar to some readers. My only criticism of the book is that some of the concepts might have been explained more clearly for those without these theoretical backgrounds. However, I would urge readers not to be put off by this or to skip these chapters. It is well worth the effort of careful reading and reflection, probably more than once.

The lengthy introductions are followed by several shorter chapters that present examples from practice and studies that reflect the main themes in each section. Examples are varied and interesting, predominantly reflecting western cultural contexts. Issues explored include how death and mourning practices of Hindus have evolved in contemporary Britain and the growing popularity of communal grieving expressed in rituals such as candlelight services. Overall the content is extremely thought-provoking; it serves to challenge conventional ideas and practices in relation to bereavement support by stimulating reflection on the limitations of understanding and practice based on psychological theories alone. Consequently to those who are accustomed to working within the framework of a task based model it may prove to be a little threatening. This is particu-

larly so, as no particular alternative model is advocated. However this is intentional as the authors are seeking to encourage greater diversity of approach.

In general it is not a book to 'dip into' for quick reference. However some of the studies or practices described in the shorter chapters would be useful material to stimulate discussion in a teaching session.

I would thoroughly recommend this book for teachers and as a key course text for students of any discipline where the aim is exploration of bereavement and mourning at a fairly deep level. I hope too that professionals who provide bereavement support will also read it, as I tend to agree with one of the authors who expresses concern that many support providers are blissfully unaware of contemporary thinking in this area and how it applies to practice.

Margaret Sneddon, Macmillan Lecturer in Palliative Care, University of Glasgow

Working with Older People and their Families
'Key Issues in policy and practice'
Open University Press

As a social work practitioner based within the hospital setting, I looked forward to reviewing this book given that my primary task is work with older people and their families.

The book is presented in 9 chapters with diverse headings including

Quality of life, quality of care
Acute and rehabilitative care for older people
Palliative care and older people
Older people with learning disabilities

but to cover such an enormous subject within the confines of one book leaves the reader feeling as though they have participated in a race through a minefield of the enormous issues involved. The book is recommended for students of health related courses such as nursing, medicine and the therapies, and its relevance to social work, social gerontology,

research, management and policy making is also acknowledged.

The book is cluttered by references, including a 42 page bibliography. Ease of reading is further hampered by language which employs phrases such as 'there is a need to transcend the dichotomies' and 'remain methodologically and conceptually limited'. Having said that, the publication is to be commended for its emphasis throughout on quality and informed care.

The authors and editors encourage practitioners to move away from a 'one size fits all' model and recognise the importance of a comprehensive assessment of need. They urge us to acknowledge that carers and family be treated as equal partners in the multidisciplinary team, and their expertise recognised and given due weight. Practitioners within the hospital setting are further urged to remember that the goal of rehabilitation is not to facilitate hospital discharge or reduce long term care placements, but to promote quality of life.

In conclusion, whilst reiterating that this book is not easy to dip into, I would say that if the major themes emerging from the literature are distilled and considered in such a way as to inform the practice of the reader, then this publication should play its part in enhancing quality in the care of older people.

Charlie Harris, Social Worker, St John's Hospital, Livingston

Communication and the care of people with dementia

Killick J. and Allan K.

ISBN 0335207758

Open University Press

John Killick, with, deliberately no prior experience of people with dementia, spent five years as a writer in residence with people with dementia. The communications he made and the relationships he developed during that time, inform the writing of the book. Significant contributions come also from Kate Allan, psychologist, as she reflects on the content of the communications and on the verbal and non-verbal aspects of the relationships developed between her co-author and people with dementia.

An ongoing question, asked within this reflection, raises the issue of whether present day practice in caring for people with dementia – grouping them together with other people also experiencing difficulties, being well cared for physically, but at the convenience of routines – results in the experience of dementia being worse than it need be.

The book is fascinating, and worth reading by those developing pastoral skills, as well as those seeking particular guidance about caring for people with dementia. It would also be a useful book for nurses and student nurses. It covers aspects of communication in 'ordinary' relationships, and then looks at each aspect in the context of building relationships with people with dementia. Chapters on topics such as personhood, language, memory and interpretation, include sections on 'implications for care' and 'ethical implications'.

Practical difficulties are mentioned realistically, and include sensitive awareness on the

Lorna Murray, mental health chaplain, Lothian Health.

Groups: A guide to small groupwork in health-care management, education and research

Elwyn, G., Greenhalgh, T & MacFarlane, F.,

ISBN 1-85775-400 X

Radcliffe Medical Press Ltd., Oxon

The title of this textbook accurately describes the contents of the book. The subtitle is "A Guide to small group work in healthcare management, education and research. This book provides a practical guide to when and how to use small groups in all three settings.

The text is written in a clear and accessible style. The format of the book is helpfully designed and works well with examples provided from healthcare of ways in which small groups can be used. Illustrations are effectively used to highlight aspects and provide reinforcement for key points. The text is divided into five parts. Each part has a specific focus. Each section of the book is well referenced, directing the reader to other relevant literature.

Parts 1 and 2 provide a foundation to the many aspects of the group process. The remaining sections are self-contained and either relate to education,

management or research. However continuity and links are maintained between the section which highlights the fact that many of generic skills of facilitating small groups are transferable.

Part 1 discusses what a group is and the factors external to the group which may influence the dynamics within the group. Part 2 deals with the group process and provides an excellent introduction on how to establish effective small group work. In this section a clear and succinct chapter outlines the role of the facilitator. Methods used in group work are clearly described. Three chapters are allocated to the evolution and maintenance of a group. The final chapter in this section describes the common symptoms of the dysfunctional group, considers some causes and explores some potential methods of troubleshooting.

Part 3 concerns itself with small group work in educational settings. The potential advantages of small group work for experiential learning are explored with particular emphasis on problem-based learning. A chapter is devoted to small group multidisciplinary learning for evidence-based practice. The application of small group to the virtual environment is examined.

Part 4 concentrates on the use of small groups in organisational settings. A useful chapter discusses group problem-solving and decision making. Subsequent chapters examine multidisciplinary and multi-agency team working, project management and leadership.

The final section deals with small groups in research. It provides an introduction to the use of focus groups in research. The final chapter of the book discusses the two most commonly used consensus methods Delphi and the nominal group technique.

Overall this book provides an excellent primer in small group work. It presents a practical guide to all those who have to work in a group or are responsible for teaching or facilitating a group in an educational, organisational or research setting. It would make an excellent addition to any healthcare library.

Jean Phillips, Head of Education, Strathcarron Hospice, Denny.

Literature in Medicine: The Doctor's companion to the classics

Salinsky J

ISBN 1-85775-535-9

Radcliffe Medical Press

I have never before laughed out loud when studying a medical textbook. However, I did just that when perusing John Salinsky's excellent volume 'Medicine and Literature'.

Dr Salinsky, general practitioner, enjoyed both English and Biology when at school, and continued to leaven his studies with fiction when a medical student. Nowadays the Humanities are contained in some medical school curricula. The need to stimulate the artistic side of the brain as well as the scientific side, in order to create doctors with a more holistic outlook, is at last being acknowledged.

The main thrust of this book is to encourage doctors to read more of the classics, which, the authors believe, contain the best and most enduring writing. In this way readers can deepen their understanding of their patients' characters and circumstances.

Salinsky and his fellow contributors describe a different work in each chapter. The central players and themes are identified, and a potted biography of the author is usually included to give context to the story. Novels, short stories, plays and poems are represented. Each classic is chosen because it is a favourite, and, as a result, enthusiasm shines out from the pages.

The classics expand the mind. Through reading the constantly digressing tale of Tristram Shady we learn to have patience when patients' stories meander endlessly. Its author, Laurence Stern, says that 'Digressions are the sunshine....' Something to remember when we are already thirty minutes behind in surgery.

In Kafka's A Country Doctor is found a sentence that will resonate with every doctor: 'To write prescriptions is easy, but to come to an understanding with people is hard.'

All of the chapters are enjoyable and inspirational. With John Salinsky as my guide, I have begun to contemplate tackling Joyce's Ulysses. A day with Leopold Bloom sounds like a wonderful counterbalance to audit and evidence based medicine.

This book is easy and entertaining to read for an individual, but it is also designed as a teaching tool. Groups of young GPs could be encouraged to enlarge their views of patients through discussing particular classics. My belief is that other professionals who interact with people would benefit. I intend to keep this volume at my bedside, but I will also be placing a copy in our practice library so that our GP registrars can learn from Salinsky's thought provoking book.

*Catherine M. Wilson, General Practitioner,
Pathhead, Midlothian*

The Doctor's Communication Handbook, third edition

Tate P.

ISBN 1-85775-550-2

Radcliffe

As you can see from the title, this book is now in its third edition. This comes as no surprise once you have had a chance to read it.

It should be essential reading for all doctors in training both at undergraduate and postgraduate level. Indeed, all other doctors, who feel they have completed their training, should probably have it on their essential reading list. It is a wonderful, easy to read lecture on how to communicate well with our patients, something which most of us assume we do well without having to learn or practise.

The book begins by reminding us of some basic facts, which most doctors forget, namely;

- The patient is as frightened as you are.
- The patient thinks it is more serious than you do.

It goes on to explore how doctors talk to patients and how often despite talking, that we fail to communicate. The consequences of this failure are clearly spelt out by the author, as he describes how frequently the doctor's advice is ignored.

- One third of patients take medical advice and act in accordance.
- One third of patients take heed but not enough for it to be effective.
- One third of patients just do not bother.

He describes in detail the various types of patients we encounter and how we, as professionals, should be able to deal differently with each.

In every chapter, he emphasises listening as the essential pre-requisite of good communication and the importance of the patient's agenda as opposed to our own. He also uses humour to make this a more readable textbook. In chapter five, he mentions a long-necked doll called a Yertle which, when grasped by the neck and shaken, emits strangled gurgling noises. He feels every doctor should have one for those occasions we have a particularly difficult patient. If anyone out there knows where to get one, please let me know!

As a prospective GP trainer, I found the practical advice on the consultation and how to evaluate it particularly useful for assessing consultation skills of trainee general practitioners.

The last part of the book looks at ethical issues in communication and informed consent, a very topical subject and one that leaves the reader plenty of food for thought.

In conclusion, this book is one of the most readable textbooks I have come across. I would recommend it for anyone who wants to improve his or her consultation skills. In fact, I might even take it on holiday, if that doesn't sound too sad!

Marie Pirret, General Practitioner, Glasgow.

Treating people with depression: a practical guide for primary care

Wilkinson G., Moore B., and Moore P.

ISBN 1 85775 391 7 Price ?

Radcliffe Medical Press

Is this a good book?	Yes.
Is it a useful book?	Yes.
Is it a good reference book?	Yes.
Should I buy it?	Yes.

The book is an easy to read, easy to use reference tool which is presented in a format and language that makes it non forbidding to anyone in health or social care, including chaplains. The style of the authors is to explain the topic then illustrate with clear tables or boxes and finally end each chapter with a useful summary. The book facilitates dipping into it to check present knowledge and to acquire new knowledge on evidence-based treatments, and new medical, psychological and self-help methods including cognitive behaviour therapy. Depression is one of the commonest activities after respiratory illness.

Therefore the number of people who may be helped with the well presented easy to access facts is important. It is disturbing to learn the high percentage of undiagnosed or untreated cases of depression even after the GP has established their diagnosis.

While it is a book for the GP it is also aimed at primary care workers including practice nurses, health visitors, social workers and CPNs. It is therefore a valuable tool for chaplains. As a ready source of information it provides clear guidance on management for the professional and lets the reader see how vital the role of the patient can be in their own healing and the importance of assistance from friends.

There are chapters on recognition of depressive illness and types of depression, causes, forms of treatment and medications. Old and new antidepressants are compared with excellent tables on best usage. The statistics are for England and Wales and it would be interesting to learn if there are any differences for Scotland. The references are helpful and the appendices provide useful lists of self-help books and addresses. Watch out for out of date phone numbers! The index is particularly useful in obtaining quick access to a wanted topic.

Stanley Cook, chaplain, Community Mental Health Team, Hamilton

Bibliotherapy for Bereaved Children

Jones E.H.

ISBN 1-84310-004-5

Jessica Kingsley

Following from her experience of working with bereaved children, this book describes a detailed study by the author into the use of children's fiction in helping children understand and cope with their grief – bibliotherapy in bereavement. She sought to develop a classification system providing convenient reference to aspects of bereavement in books covering the topic of death and then to review children's novels within this system of classification.

Early chapters follow the author's journey in understanding what is meant by bibliotherapy and how death has been portrayed in literature from the end of the nineteenth century to the present day.

However it is the chapter on Classification of Books that will most interest adults searching for a guide in

helping them to select books to recommend to children and young people. The author presents a helpful model of classification which is then illustrated in three diagrams. These provide a useful visual aid in directing the reader towards books most likely to fit with the particular experience and needs of a young person. More detailed information about these books is then provided which further enhances the selection process.

An in depth analysis of the novel 'Squib' by Nina Bawden, includes the responses of a small group of bereaved and non bereaved children. It was interesting to note none of the non bereaved children recognised the subtle references to bereavement and the subsequent emotional effects. This is a helpful reminder of the sense of isolation bereaved children may feel as their world can look and feel very different to that of their peers.

The author is convincing in her conclusion that there is potential in the use of bibliotherapy with bereaved children. However comments throughout the book which reflect a rather negative view to other ways of working more directly with children were unfortunate. Nonetheless, I would recommend this text to adults working with children as a useful guide in the search for literature to help grieving children.

Moira Sugden, educational psychologist working at the Notra Dame Centre, Glasgow.

Finding a Way Through When Someone Has Died

Mood P. & Whittaker L.

ISBN 1-85302-920-3

Jessica Kingsley

Knowing what to say to children after the death of someone close to them is one of the most difficult things the healthcare professional can face: it can be hard simply to engage with what the child is going through because of our own feelings about it.

Here then is a book that can help you do just that, a workbook for children drawn from the experiences and suggestions of children themselves put together in user-friendly language and format by Pat Mood and Lesley Whittaker, drawing on many years of bereavement work. It is a book an older child could themselves pick up and work through in private, or it could be used as a resource for ideas for talking to

younger children, offering topics such as anger, fear, guilt, and the Why? question. In one picture difficult feelings are chalked up simply on a brick wall like graffiti: the reader is then offered another empty wall on which to scrawl their own. The child is invited to draw on a face to show how they face the world, and on another how they really feel underneath. For teenagers - always a difficult group to approach - there is a personal letter about the privacy of grief, and about managing difficulties at school. Another teenager's letter to a local paper sets out what she thought everyone should know about bereaved children, followed by space in which the reader can write their own version.

The book is structured around a first part about feelings and thoughts, helping children find a vocabulary for expressing and understanding what's happening to them, and a "first aid kit" section on practical ideas for getting through. Some of these are familiar - the memory-bank, keeping a diary, talking to friends; some tackle the more difficult bits head-on: computer games and tv programmes about fighting can be a safe way of hitting out - a comment that seems aimed as much at adults as at children, a reminder that disturbing behaviour goes with the territory, and needs to be accepted and channelled.

The underlying message of the book is that feelings change and here lies its hope: that you can feel differently, stronger even, in time, and better able to help others; that not all memories are good ones but good and bad are part of most people's lives.

Alison Lee, bereavement co-ordinator, Marie Curie Centre, Glasgow.

On Death, Dying and Not Dying.

Houghton P.

ISBN 1-84310-020-7

Jessica Kingsley

'I cannot ever explain how grateful I am for the experience I had between life and death and then of a kind of resurrection'. So wrote Peter Houghton, who had suffered from heart failure (cardiomyopathy) and had been given a 'Jarvic 2000' heart pump, in the first permanent implantation of the device.

The book he wrote tells of his experience of living very near his own death, having been a counsellor in palliative care *'It is hard to explain how much we*

want to chose life over death biologically. We cannot, I think, actually imagine our own death.' And after his implant, which was an operation not without considerable risk, both during and after the process, Peter Houghton came back to a life following 'not dying'.

It is this living which has given him further pause for thought. At first he felt a bit like an exhibit, but that passed and he began to feel physically renewed, *'but underlying it the sense of death remains. This is extra time.'* He honestly recounts that his wife and friends are *'the past I said good bye to when I was dying.....I hope I can find a new mutuality with some of my old friends, my wife and family, but I have not found it yet.'*

Peter Houghton goes on to write about pain-management at the end stages of life, and about the process of becoming aware of one's coming death. He speaks about stages of dying, but in particular of a sense which he had in himself and which he has met in others, that *'within was a place where we met the universe.'* He writes of suffering, of diminishing sympathy, of unresolved issues and of euthanasia. Concluding these thoughts he says *'I have no answers to the difficult questions surrounding death and dying. Yet I want to affirm the value of life in all its difficulties and in the face of suffering'*.

This is a book, which I first read as an account of one man's experience of being caught up in experimental surgery. A second glance gave me a greater understanding of his 'journey' and a greater interest in the man within a process rather than the process itself. As a way of thinking of what palliative care might mean to those who experience it, and for their carers, I think this is a very good introduction, and will recommend it to pastors in the future.

Alison Wagstaff, chaplain, St. Columba's Hospice, Edinburgh

The Intensive Care Unit: What Every Family Needs to Know

Steven R Mohnssen M.D.

ISBN 1 - 885003 - 95 - 1

Robert D Reed, USA

This short book, 73 pages plus glossary and index, attempts to explain to families and others the entire intensive care experience. It describes most major

diseases and conditions requiring ICU admission and provides a useful glossary of medical and technical terms, with a final brief chapter on living wills and organ donation.

The foreword, written by a chaplain colleague, states that “high tech” can also be “warm tech” and that understanding a bit about what goes on in such units can help to humanise them. The author suggests that the book is complementary to what patients and families are told and gives them a basic description of much of what goes on in ICU.

Informed consent, the policy for our age, does need to be supported by better and clearer information. This book tries to give an amount of information which is accurate, easy to understand and not overwhelming. It does this rather well, but I am not sure that families will go out to buy it when a loved one is rushed into hospital. There is the problem of falling between the two stools of being too general for a family which wants to find out everything about a particular illness, and too specific for those who want to learn a bit more about hospitals and healthcare issues.

It is however rather a gem of a book for those who, like chaplains, need to know a little bit about quite a lot that happens in hospitals, without having to become experts. In conversations with patients and families, chaplains do not need to know everything, yet our empathy can be more meaningful if we are not thrown by common words such as nebuliser, myocardial infarction, pulmonary deam or hema-toma.

It was written in California and I was surprised at how unimportant that was. The legislation mentioned with regard to living wills is American and not relevant but the issues are the same. It is a book which chaplains would find useful as an easy and informative resource. The only thing to suffer would be the spellings with which many of us struggle already.

Chris Levison, Healthcare Chaplaincy Training and Development Officer and Spiritual Care Co-ordinator for Scotland.

Seeing Beyond Depression

Vanier J.

ISBN 0-281-05411-8

SPCK

Those of you who know the writing of Jean Vanier will not be disappointed with this little gem of a book, which is profound in its depth, but simple and impulsive reading.

Jean Vanier Speaks with great gentleness and compassion about the movement and struggle within each of us. of light and darkness, the movement from winter to spring. He talks about depression and sadness as being part of the human reality. sometimes we are able to recognise our winters and wait patiently for spring, at other times we may need a trusted friend or professional to gently and lovingly wait with us until that moment takes place.

Whatever the case this little book should give each of us hope that; “life is stronger than death, light stronger than darkness, and love stronger than hate”. John Vanier guides us through, and out of depression, and even manages to make the journey sound exciting, in that it will lead us to gre4ater freedom and the discovery that we are loved by God and precious in his eyes.

It is hoped that this little book will give us a new understanding of depression, that it will give us the courage to stop and rest, so that we can learn to know and accept ourselves. Only when we discover that we are unique, called to love and be loved, and to communicate love and life to others.

Frances Moore, ecumenical chaplain, Whipps Cross University Hospital, London.

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Jessica Kingsley

‘I cannot ever explain how grateful I am for the experience I had between life and death and then of a kind of resurrection’. So wrote Peter Houghton, who had suffered from heart failure (cardiomyopathy) and had been given a ‘Jarvic 2000’ heart pump, in the first permanent implantation of the device.

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Alison Wagstaff. Chaplain, St. Columba's Hospice, Edinburgh

A Book of Blessings

Edited by Burgess R.

ISBN 1-901557-48-0

Wild Goose Publications

The more I've dipped into this book, the more it has grown on me. It's a small book but it's packed with blessings for every conceivable occasion. There's

an informative introduction by Ruth Burgess which gives some background on blessings in Christian and Jewish tradition and - for anyone who is feeling creative - there's a section on how to write your own blessings.

God bless days off is a beautiful prayer in which the boundaries between poetry and prayer become blurred.

Nothing to pick up but messages left in the landscape

No details to get lost in but the business of a rock pool

Time to discover new energy to take back into work

to serve God more fully

As I turn the pages I'm reminded of the Psalms, for this is a book in which both the beauty and the pain of life are given full expression. One of the joys and the challenges of hospital chaplaincy is the variety of situations in which chaplains find themselves: situations involving pain and situations involving beauty. And so I would recommend this book as a good addition to the chaplain's bookshelf.

Monica Stewart, assistant chaplain, Aberdeen Royal Infirmary

Spirituality in Health Care Contexts

Edited by Helen Orchard

Jessica Kingsley Publishers

ISBN 1 85302 969 6

Rabbi Julia Neuberger writes: "This volume asks many questions..." of all involved with healthcare, and asserts, "Helen Orchard and her contributors raise many tough questions and do not shy away from difficult problems." Neuberger is right. Yet this book suffers from the problem of many edited compilations. It lacks the consistency of a developing argument and cohesive premise, and frustratingly fails to follow through on some of the important points raised. Indeed, Orchard herself hints at this problem when she makes reference to the plurality of the spirituality debate, her aim being that "the span and diversity of contributions... reflect this in a manner which is creative and explorative."

Orchard limits her "locus of attention" to the hospital setting, and, as a "further intentional bias", fo-

cuses on chaplaincy as the “discipline under the spotlight”. Her range of contributors - healthcare chaplains (Christian, Jewish and Muslim), medical practitioners, and teachers and researchers in spirituality in theological colleges and in wider Church, multi-faith and educational settings - share useful “creative and explorative” insights from their own professional and personal perspectives. Orchard argues that “while there has been some excellent critical writing on spirituality from some quarters, a significant amount of material floating about is superficial, derivative and lacking in rigour”. In the facets explored under her headings of organisational, professional and cultural contexts – “spirituality and religion”, “the moral foundations of chaplaincy”, “presence and absence in spiritual care delivery”, “the multi-faith context and its challenges”, among others – she succeeds in her aim of making a contribution to an understanding of spirituality which “is

mindful of the need for both thoughtfulness and discipline”. Her book therefore, will be valuable to those seeking to be up-to-date with current ideas and explorations.

Orchard’s book reads as a series of well-researched journal articles, and raises more questions – important questions, certainly - than it gives answers. If chaplains as the “locus of attention” are looking for a range of challenging modern writers with whom to explore current thinking in spiritual care, this book will be helpful. If, however, they are looking for down-to-earth guidance to assist them in their day-to-day practice of spiritual care, they will be looking elsewhere.

*Tom Gordon, chaplain, Marie Curie Centre
Fairmile, Edinburgh*