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Webb, Nancy Boyd, Ed. (1993). *Helping Bereaved Children: A Handbook for Practitioners*. New York, NY: The Guilford Press. 304 pp.

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It was a warm June morning, the day of my fourth grade track and field meet. I remember my father coming into our bedroom to tell my sister and me that our mother had died. I remember being confused, feeling a sense of disbelief, but knowing from the pain on my father's face, and the reaction of my older sister, that something awful had happened. Time became fuzzy at that point and my clearer memories seem to connect to the parts of her death that included me: a neighbour helping me pick out a starched navy dress and gloves for the funeral, sitting in the front pew before the open coffin at the funeral home, and numbly standing by the graveside, as family friends filed by and patted me consolingly on the head.

It would not be until years later that I would struggle with the question: "As a child, was I able to and allowed to grieve?"

*Helping Bereaved Children* provided many answers to this question. Although the framework of this book speaks more from the quantitative paradigm, the sensitive and thoughtful insights and observations by the practitioners reflect the lived experience of those of us who have grieved as children. The array of contributors and bereavement issues presented were initially daunting, as I began reading this handbook. In spite of the diversity of material however, I felt the complimentary nature of each practitioner's offering led to a cohesive sense of wholeness around children's bereavement.

The realm of childhood grief has been severely neglected by "adult society." Webb begins this book with an essential chapter defining children's grief and validating their pain; as Webb states: "Thus the question, Can children mourn? should ask instead, Can children grieve? to which an unqualified positive response can be given."

Webb has organized this handbook into three major sections. The first part discusses the theoretical framework used to understand the child's perception of death and contains an excellent chapter on assessment of children's bereavement as well as a brief but concise chapter offering counselling/therapeutic strategies and options. Part one also contains reproducible forms used to assess the child's background, the situation surrounding the death, and the child's potential support systems. Webb directly and routinely addresses the suicidal ideation of these children and does not dismiss these thoughts as "childhood fantasies" which would not be acted upon. She ends this first section with an essential piece regarding the effects of this work on practitioners and offers methods and/or strategies to help prevent "vicarious traumatization."

The second section explores children's reactions to the death of family members. These seven chapters cover a wide variety of losses and grief situations beginning with the anticipated, timely death of a grandparent and ending with the traumatic murder-suicide of both parents. Each chapter

includes lengthy excerpts from clinical sessions illustrating the type of therapeutic intervention and treatment strategy appropriate to that child's bereavement and developmental level. These excerpts are set up in a two-column format which provides the reader with not only the content of the sessions, but also the practitioner's accompanying feelings and analysis each step of the way. Part two also presents a variety of treatment modalities, including family therapy, individual play therapy, peer pairing, and group bereavement counselling.

The third section focuses on the unanticipated death situations occurring in a community of children: the sudden deaths of a teacher and counsellor, the accidental death of a friend, and the violent, traumatic death of a classmate. These four chapters demonstrate the need for multilevel interventions including individual, small group, and large group approaches to helping children. This section emphasizes the necessity of a crisis intervention plan set up by school-based personnel which can address the needs of children experiencing traumatic and complicated grief. It also provides the school-based counsellor with ways to identify children who require individual follow-up and possible referral to mental health practitioners.

One of the strengths of this book is its practical appendix which acts as a resource for "American" mental health personnel seeking further training and information about play therapy, grief counselling, and trauma/crisis counselling. This book is also strong in its provision of comprehensive summaries of issues specific to each type of bereavement, as well as being a valuable source of references and resources pertaining to these types of bereavement. The presentation of the inner dialogue of analysis and feelings of each practitioner exemplifies the qualitative strength of this book. Allowing the reader to know the doubts and fears of the counsellor/therapist as well as the insights and ideas provoked by each case, provides encouragement to those of us who also walk through the "kingdom of night" with these children.

Although this book did an adequate job in addressing the cultural and familial contexts of children's bereavement, it failed badly around the issues of spousal abuse. One of the bereaved in chapter fourteen was a little girl who disclosed violence within her family to the counsellor. The responding family intervention was to suggest to the parents that they "try to work out their difficulties" and to continue to send the child for individual treatment. Due to the key elements of power and control in abusive relationships, this intervention may have only escalated the violence and did nothing to address the safety of the mother or the child.

*Helping Bereaved Children* is an essential tool for those professionals who work with children and their families within the mental health and/or educational field.

In summary Webb has compiled a sorely needed handbook on children's bereavement. Not only did this book move beyond the cursory exploration of children's grief, but it also addressed those areas which were formerly "taboo" (ex. suicidal grief) or considered "not part of the grieving community" (ex. the grief of a survivor friend).