

Book review

Death, dying and bereavement

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Books on death and bereavement do not generally make lively bedside reading. The book “Death, Dying and Bereavement” does.

“Death, Dying and Bereavement” is a superb collection of articles, contributed by doctors, nurses, social workers and ordinary persons on the medical, anthropological and social aspects of death, interspersed with literary excerpts and first-hand accounts on the themes of the book.

The book is divided into four parts: the first part deals with the various concepts of death in different religions and sectors of society, parts two and three discuss palliative care and end of life issues, including euthanasia. The last section deals with those that are left behind, the bereaved, and who are intimately linked to the phenomenon of death.

In spite of the wide variety of articles, each part constitutes a coherent collection, which in its turn integrates into the whole book. Although each account can be read separately, it is strongly recommended to read the various chapters in the order in which they are presented. It is the best way to get right the messages this book tries to pass.

The main achievement of the book is the reintegration of the act of dying into the world of the living, firstly by providing a different perception of death and secondly, as a result of that perception, a different health care approach to the dying person.

As from the second half of the 20th century, death has been progressively dissociated from the process of life, through the abandonment of rituals and customs surrounding the dying and dead person. Scientific and technological progress has pushed, and still is pushing forward the moment of death. Death is constantly fought against, and very often hidden and ignored.

The first part of the book imperceptibly conditions the reader to a humanistic understanding of the phenomenon of death. The numerous accounts of rites and rituals surrounding death in Moslem, Hindu, Sikh and Jewish communities as well as dying practices in Eur-

opean countries provide a deep insight into a perception of death as a significant event affecting the social life of the community to which the deceased belonged.

Reintegrating the act of dying into the process of life qualifies the meaning we give to health care and the role attributed to health professionals. Through it, the quality of life—central to health care—is extended from the living to the dying.

The book deals extensively with questions relating to palliative care, resuscitation, withholding nutrition and hydration, and euthanasia, which are all closely linked to the quality of life of the terminally ill patient.

The discussion on these issues shows that health professionals, and particularly doctors, though still attached to the preservation of life at all costs, are increasingly aware of the quality of life of the dying and the limits of medical treatment. The development of palliative care, the debates on when to forego resuscitation and withdraw hydration as well as the limits to the practice of euthanasia are a direct consequence of the changing meaning of health care as applied to the dying—no longer a fight to the end through over medicalisation but a willing acceptance of the specific needs of the dying.

The book examines, often through first-hand accounts, the various practices in the health care of the dying. The picture we get is of increased awareness and gradual development but with much still to be done.

As the book rightly states in its introduction, multidisciplinary teamwork is the hallmark of palliative care. Care of the dying is not a separate and distinct discipline: it is an integral part of health care. Interchange is necessary not only amongst the disciplines involved in the care of the dying, but also with those disciplines involved with curative treatment.

One other need is the appropriate care of diverse cultural communities. As the book points out, the clinical atmosphere of a hospital ward does not meet “the need of Hindus to die lying on the floor, in the midst of their family to the accompaniment of ritual chanting.” Training of health staff on the specific needs of diverse ethnic communities is hardly a luxury in today’s multicultural societies.

A welcome contribution to the study of death and the dying is the inclusion of bereavement. This pushes even further the boundaries of health care, to include

not only the dying but also those who suffer grief through the demise of a relative or friend. Death is no longer a cold clinical event, but a social phenomenon which extends time-wise beyond the act of death itself. Some of the accounts testify to the distress that can be caused by bad counselling by health professionals, not to mention the distress suffered by health professionals themselves when dealing with dying persons.

The numerous accounts of personal experiences show that each dying person is a unique individual, with his or her own specific problems. Health care of

the dying does not boil down to a set of clinical procedures. It is a dialogue between the patient, the relatives and friends and all the health professionals involved in the case.

This book is obviously invaluable for practitioners who need to know not only the rules and procedures but also the realities of life. It also makes fascinating reading for the ordinary layman, particularly in a society that tries to ignore the inevitable end: death.

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