Serious illness, death, and bereavement are intensely personal experiences. In modern Western societies, they usually involve a defined circle of family and friends. But these events may also occur within a broader community that cares for and grieves the loss of a person. What occurs at the bedside can have a ripple effect on a large group of people. That collective may coalesce around a shared belief or set of beliefs, either religious or social. In such cases, the personal experience of death becomes communal.

Bury the Dead, edited by Laurel Dykstra, is an engrossing collection of memories and elegies written by family members, friends, fellow believers, and social activists united by the experience of illness, death, and bereavement.

The communities represented in the collection are comprised of hospice workers and members of civil rights and social justice groups — communities that share the ideal of nonviolent activism that leads to economic and social equality. They include Catholic Worker groups, Christian Peacemaker teams, the Open Door Community, School of the Americas Watch, and the Occupy movement. Also included is L’Arche, an international organization of Christian communities working together to provide homes and workplaces for people with intellectual development difficulties.

Several accounts demonstrate both a rawness and a striking generosity of spirit as people within a religious or activist group gather to care for and commemorate a person who is ostensibly an outcast in the wider society: the homeless person, the addict, the prisoner, the refugee. Several of the narratives are linked. One person writes prior to dying, and others reflect on the life of that person. A man constructs a coffin for his infant son and, later, builds coffins for numerous other family members, friends, and associates. In separate essays, the daughter and husband of a revered writer and activist give moving accounts of her death. This technique of narrative echo adds to the sense of a community of voices, genuine in their regard, committed in their concern for each other, quietly sharing the labour of care that illness and dying demand.

Most of the deaths occur at home. Throughout the narratives, there is a clear attempt to recapture past traditions of caring for the dead: laying out the loved one, constructing a coffin, creating rituals that accord with the life and meaning of the person. There is a strong sense of the domestic in these deaths. To allow for a home death, it is often necessary to develop an ethos of teamwork, humility, and reciprocity. One man describes the support his family received as “serial intensive pastoral care.” That this time contained unexpected richness is evident in several stories. One person writes, “through K. we have learned more deeply how to be present to the dying, how to grieve the dead, and how to face our own deaths with courage, dignity, and grace.” Others express it in more overt religious terms. In one reflection on caring for someone at home, the writers state, “It was as if in this last chapter, [he] was orchestrating a convergence of his widely scattered circles. Here was a parable of death and resurrection: as [his] body atrophied, the body of those in communion with him over the years expanded.” That expansion can be profound. As one participant recalls, “Having put most of our other work aside during this time, we feel now that this was perhaps the most significant work we have ever done.”

Occasionally, the discipline of palliative care enters the stories. It does so quietly, proffering and delivering its support to family and friends. While never stated expressly, the work of community
palliative care is in perfect accord with the endeavour of any group of individuals trying to care for someone in his or her home. One complements the other.

While many of the stories focus on a beloved family member or associate, several dwell on the outsider, the alienated, or the disenfranchised. The editor reflects on the funerals of homeless and alcoholic people that she has attended: “I pray for the dead…it is the work that I do — for people who are not grieved elsewhere.” One of the impulses behind this book — or, indeed, behind any narrative of this kind — is the urge to tell the story of both the living and the dying, to hold up to the world the image of a person, however illustrious or troubled, and say, simply, “This person mattered.”

On the North American continent, the traditional jazz funerals of New Orleans serve as an example of how culture and community can combine in death. The essay by Jordan Flaherty contains a vibrant description of such an event where death is commemorated as a public ritual with music, marching, and imagery.

The collection ends with a speech given by Frida Berrigan in honour of her father, Philip Berrigan, a prominent activist for social justice and peace. She quotes the eulogy she and her sister gave at their father’s funeral. The two women repeat the refrain “He is here with us” every time an act of love or resistance is described. It is a fitting end to this absorbing collection.

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Compact Clinical Guide to Women’s Pain Management: An Evidence-Based Approach for Nurses

Compact Clinical Guide to Women’s Pain Management is an excellent guide to pain management for nurses and other healthcare professionals. It is well written, and it is a much-needed addition to the pain compendium, focusing as it does on pain in women. Women face unique challenges in getting properly diagnosed and in getting adequate treatment.

The book is well delineated, and its case history format, with questions at the end of each chapter, is an appealing way to assess knowledge as well as to review information. There are good discussions of the pros and cons of available pain medications, alternative treatments, and cutting edge technologies for pain management, including implanted modalities. Other chapters cover pain associated with various conditions, including labour and delivery, migraines, and neuropathies. A minor drawback is that because the book covers a wide range of topics while also aiming for brevity, there is a necessary sacrifice in depth of coverage. Even so, this is an excellent book for anyone who wishes to understand the pathophysiology of pain and develop strategies for effective treatments.

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