Families & Friends of Missing Persons
Attorney General & Justice

"It's the hope that hurts"

Best practice in counselling models relevant to families and friends of missing persons

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Attorney General & Justice

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Published 2001

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(FMP08 • 05/2011)

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THE BRIEF

In early June of 2001 the Families and Friends of Missing Persons Unit operating within the NSW Attorney General's Department out of the Victims of Crime Bureau contracted the Hunter Institute of Mental Health to investigate and report on best practice model/s relevant to families and friends of missing persons.

The expected outcomes were:

1. A thorough national, international and cross-disciplinary review of the relevant literature presented in a concise and reasoned manner complete with a detailed reference listing.
2. A brief descriptive summary of the mainstream counselling models relevant to the topic under consideration complete with advantages and disadvantages apropos families and friends of missing persons.
3. A summary of consultations undertaken with primary contact organisations (tracing and supporting), clinical experts and a sample of practising clinicians.
4. Recommendations for developing best practice in counselling models relevant to families and friends of missing persons including any need for professional development training and education of service providers.

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METHOD

Developing the report

1. A national and international literature search was undertaken searching across the disciplines most likely to be involved in the area under inquiry.

A systemic literature search was performed to identify publications relating to the experiences of families and friends of missing people.

Seven electronic databases were examined: MEDLINE (1996-2001), PsychINFO (1984-2001), SOCIOFILE (1974-2001), CINAHL (1983-2001), Dissertation Abstracts International (1861-2001), the Cochrane Library (1996-2001) and Journals@Ovid.

The following keywords were used in the search, and were exploded to Medical Subject Headings (MeSH) where appropriate; "*grief*", "*counselling*", "*models*", *anticipatory*", "*missing people*", "*threat*", "*coping*", "family", "*non-specific*", "*ambiguous*", "*kidnapping*", "*uncertain*", "*death*", "*loss*", "*chaotic*", "*missing in action*", "pathological", and "*traumatic*". Each keyword was additionally combined with other keywords to refine the search.

Although over 180 publications in relation to grief and loss were located, only five related specifically to the experience of families and friends of missing people, indicating an area that theory and research have relatively ignored. The information presented in this summary links the experience of families and friends of missing people with the generalised grief and loss models, and incorporates information gained from consultation with those listed below.

2. Organisations* known to be involved in search and tracing activities were asked to offer their experience by way of submission.
3. Senior counselling clinicians and counselling education academics were involved in focus groups.
4. Draft copies of the report were circulated to the reference group for comment.

* Families and Friends of Missing Persons Group Inc
Kids Helpline
Community Tracing Section, NSW Police Service
Link-up (NSW) Aboriginal Corp
Tracing and Refugee Services, Australian Red Cross NSW
Missing Person Committee (NSW) Inc
Gay and Lesbian Counselling Service
Counselling Services, Mission Australia
International Social Service, NSW
Family Tracing & Special Search Services, The Salvation Army

RECOMMENDATIONS

1. That the FFMPU promote the development of identified counsellors for the families and friends of missing persons to be accessed by prospective clients.
2. That the FFMPU promote the development of competencies and specific training be discussed and developed in liaison with relevant professional and/or training bodies.
3. That the FFMPU promote the development of suitable training workshops.*
4. That the FFMPU emphasise the importance of counsellors offering flexibility and long term continuity of availability in their provision of counselling to the family and friends of missing persons.
5. That the FFMPU develop a web site that includes a listing of those recognised as identified counsellors of families and friends of missing persons.

6. That the FFMPU maintain a listing of recommended readings for its identified counsellors.
7. That a pamphlet be developed for distribution to families and friends of missing persons outlining what standards and services can be expected of identified counsellors.
8. That the FFMPU issue a statement endorsing certain basic principles of counselling the families and friends of missing persons including, but not restricted to, the following: Counsellors of the families and friends of missing persons are encouraged to:
   - ensure they possess well honed basic counselling skills recognising the particular importance of empathy and genuineness;
   - ensure they are well informed of the particular needs of the family and friends of missing persons;
   - avoid a dogmatic attachment to a "*stage*" approach to loss theory and particularly any unmodified application of grief and loss models that emphasise 'closure' and 'resolution' as end products;
   - be familiar with the 'lived experience' of the family and friends of missing persons;
   - be available for the 'long haul' in terms of availability;
   - be familiar with developmental issues surrounding the loss/hope dilemma experienced by family and friends of missing persons;
   - maintain currency in the literature surrounding loss and grief and the issues facing family and friends of missing persons;
   - develop an association with local support groups for the family and friends of missing persons; and
   - engage in a therapeutic philosophy that assists the family and friends of missing persons helpfully redefine and reinterpret their altered status with the missing person.

* *Suggested content could include:*

1. Contributions by consumers on the lived experience
2. Applicability of various counselling models and theories
3. Details of various search agencies and procedures
4. Legal issues when someone goes missing
5. Information on support groups
6. The impact on relationships where a loved one is missing
7. Problems in reunions
8. Found but estranged
9. Avoiding the less helpful

INTRODUCTION

There is limited information on the actual number of those that 'go missing' each year in Australia and what does exist, refers only to those reported to police. Anecdotal evidence suggests far more 'go missing' and, for a variety of reasons, are not reported to authorities.

In Australia, one person is reported missing every 18 minutes (Henderson & Henderson, 1997). Although 99 per cent of these people are found (85% within one week, 95% within one month), the whereabouts of 300 people are still unknown six months after their disappearance (Henderson & Henderson, 1997). In around one-third of these cases, the person had gone missing before.

The population of Australia's missing people is divided into children/young people (55%) and adults (45%), with approximately equal numbers of males and females involved (Henderson & Henderson, 1997).

For someone to be listed as a missing person, there first need to be searchers. Thus, at the risk of stating the obvious, it is necessary for a person or persons to register as searching for a missing person for that person to be included in official counts as missing. Many individuals lose touch with family and friends and for all intents and

purposes are missing. However, because no one registers an interest in finding the individual, they are not officially missing. Thus to be 'missing' in an official sense, three criteria need to be met:

2. a person cannot be located;
3. a person or persons wish the individual located; and
4. the concern is registered with an authority - usually the police.

Examples of those not meeting the criteria and thus deflating the figures are many. Older teenagers in conflict with parents, departing spouses, absconding parents, migrating siblings, children surrendered to adoption, people in financial crisis etc are just some of those that 'go missing' and yet do not necessarily fulfil criteria to be counted as officially missing, largely because no one has registered a serious interest in having them located.

Another large group of people that 'go missing' each year and are not reported to the authorities, are those where family and friends expect the 'missing' person to return in the immediate future and make a decision not to report. Given that the statistics indicate almost 99 per cent of those that 'go missing' are located or 'self locate' within a short time span, those that make such a judgment are, in all probability, relatively secure in their decision particularly when the person has a history of 'going missing' on prior occasions.

There are of course many others that could be described as 'missing' with family and loved ones interested in their location at levels of intensity ranging from curious to urgent. Situations where a person might wonder "... *whatever happened to Aunty Flo?*", while in a technical sense could be described as a 'missing' person scenario, while no one is actively searching, aside from perhaps those with genealogical interests, the matter is not reported. On the other hand, many adopted (and the mothers who surrendered them, often under social duress) continue their search also often without registering their interest with the police. To this group could be added those who search for loved ones lost in war, refugees, migrant families etc all who search through various mechanisms without inclusion in official figures but not without the pain and anguish associated with their despair.

While the reasons individuals 'go missing' are almost as many as the number who go missing, there are common themes in the anxiety, anguish and despair felt by those who seek their return. Almost invariably it is the suddenness and inexplicability of the disappearance that is the source of anxiety and it is these who may well seek counselling and support.

As alluded to above, at least one person disappears without trace in Australia every day. Most of the family and friends of these people will obtain support and counsel from each other and those involved in the early stages of searching. Some will require trauma counselling in the immediate days following the discovery of their loved one's disappearance while for others there will be a need for longer term support often delivered at times when triggers unsettle their uneasy emotional balance. These people live with the pain of not knowing, hoping against hope, fearing the worst and struggling with the ambiguity of the designation afforded their loved one as 'missing', an ambiguity that implies the possibility of rediscovery.

The number of families and friends of missing persons seeking counselling at any one time is likely to be small relative to the more common areas of psychological need. However, the complexity of this group's dilemma, the absence of research and the lack of fit with many of the common theoretical models touching on loss, demand that those offering counselling to the families and friends of missing persons be highly experienced and aware of the many complex issues involved.

The Henderson Report (Henderson & Henderson, 1997), based on interviews with the family and friends of missing persons and consultations with government and non-government agencies indicated priority areas for action, many relating to support and counselling needs. Some of these were:-

- specialised training in unresolved grief counselling and missing person support needs;
- training in missing person issues for telephone counsellors;
- promoting understanding of missing person issues among special need support groups; and
- establishment of specialised self-help groups for families of long term missing persons.

The recognition that family and friends of missing persons require a unique understanding by counsellors suggests the need for education and training to ensure these often vulnerable people get only the best of support and professional services to avoid adding to their already enormous burden. Unfortunately the search for support and counselling by family and friends of missing persons brings anecdotal reports of less than satisfying experiences that range from the well meaning but unhelpful to the bizarre. There thus exists the need to ensure that what can be done is done to ensure an informed pool of high quality counsellors are available to be recommended by the Families and Friends of Missing Persons Unit.

THE LIVED EXPERIENCE

When a person goes missing, the impact on those left behind is enormous. For every case of a missing person reported to police, an average of twelve people are affected in some way, be it health consequences, financial difficulties, or quality of life issues (Henderson & Henderson, 1997).

In Australia, 37 per cent of people with missing friends/relatives experience physical or emotional problems directly related to the incident (Henderson & Henderson, 1997). These include migraines, sleep loss, cramps and other stress-related symptoms. The disappearance of a family member/friend impacts on the work or business activities of around half of the people involved, with reports of work performance suffering due to concentration problems and time off work (Henderson & Henderson, 1997).

The economic impact of being the relative of a person who is missing is substantial, with 97 per cent of these conducting some kind of search for the missing person (Henderson & Henderson, 1997).

In addition, legal issues arise in the use and maintenance of the missing persons' property, which are not easily resolved. Ninety-four percent of people experience a disruption in their routine activities and quality of life. This includes irregular meals, late nights, disturbed sleep, altered social and leisure activities and sometimes ignoring the emotional needs of other children in the family (Henderson & Henderson, 1997).

Further, in 57 per cent of cases, the relationships of those people left behind are affected in terms of a breakdown of trust, arguments, and expressions of hostility and anger directed at others (Henderson & Henderson, 1997). Emotionally, people report shame, embarrassment, shock, sadness and helplessness at the disappearance of a family member or friend (Henderson & Henderson, 1997).

Case studies of parents whose child has gone missing reveal they are consumed with fear, as well as frustration with police who are unable to provide answers relating to the disappearance (Gosch & Tamarkin, 1988). Feelings of guilt prevail, with people feeling responsible for not adequately protecting the missing person from danger and, as time goes on, for re-integrating into society and enjoying some aspects of life (Brannen & Podesta, 1990). Klass and Marwit (1988-9) suggest that the loss of a child is a particularly serious challenge to the competence of a parent, such that they report the following: "*I couldn't protect him from doing one foolish thing, and that one thing cost him his life. I'm a failure as a father, I feel so hopeless*". Self-esteem relates to the success one perceives they have achieved in valued social roles, such as parenthood, and as such, mothers in particular are vulnerable to the loss of self-esteem (Riches & Dawson, 1996).

Re-integration into society presents an additional problem for some family members and friends of missing people, being branded "*hysterical*" and "*nuisance*" by police and "*fanatical*" by neighbours (Gosch & Tamarkin, 1988).

In addition, for the families and friends of missing people, there exists a real tension between avoiding and confronting the reality of their situation. For example, one mother reported that "*... nothing anybody can say will make me feel better ... I wake up in the morning and at least the worst hasn't happened, at least they haven't found her dead*" (Brannen & Podesta, 1990). Another person, whose brother went missing, suggests "*... to all intents and purposes, my brother is dead – he is cut off from his family and friends. It has actually been easier for me to cope with a dead brother than a missing one, but there will always be that element of doubt*" (Jones, 1988). This is where families and friends of missing people are the most vulnerable.

Although information relating specifically to the experiences of friends and families of missing people is sparse, a number of studies have been carried out to assess the health, social and other consequences associated with the death of a loved one. These consequences are magnified in the event of a sudden, traumatic and unexpected loss.

In the immediate weeks after bereavement, people experience a significant decrease in the functioning of their immune system, compromising their ability to stave of physical illness (Parkes, 1987-8). Although mortality rates do not appear to be elevated among bereaved people, one in three bereavements will lead to a morbid outcome such as depression, drug or alcohol problems and chronic anxiety (Parkes, 1987-8).

Parents who have lost a child tend to become either over-protective or neglectful of those children who remain in the family, and are often pre-occupied with memories of the deceased child (Parkes, 1987-8). Although marriage seems to have a buffering effect against the physically detrimental effects of bereavement, evidence suggests that the loss of a child is associated with an increased risk of marital and relationship breakdown compared with couples for whom such a tragedy has not occurred (Dijkstra & Stroebe, 1998). Although socially unacceptable, parents may feel anger at the child who has died/disappeared for the role they played in their own demise, or for not being able to say goodbye and express their love (Drenovsky, 1994).

Siblings of deceased people suffer from sleep disturbance, and guilt at being left behind (Parkes, 1987-8). Boys often express their grief in terms of aggression, while girls may be more passive and become "*compulsive caregivers*", taking over the parental role. This is particularly the case for children aged 8-12 years, who also will suffer anxiety about their own and their parent's ability to survive (Parkes, 1987-8). In losing a family member, children not only lose that person, but also their world of shared assumptions, including their morals and values (Rafman et al., 1996). If a family member has gone missing, a child's normal supportive, protective network is also absent, as each member struggles to cope with the loss. Children may also develop "*magical thinking*" around the person's death or disappearance. For example, they may believe "*... if I behave perfectly enough, mum will come back*" (Waldegrave, 1999), or "*... if I had been a good boy, daddy wouldn't have gone away*" (McKissock & McKissok, 1995). Although these expressions are aimed at making sense of something terrible that has happened, if left unchecked, this style of thinking may lead to problems over the longer term, particularly if the person does not return.

From a developmental perspective, children are particularly sensitive to parental cues of danger and fear (Parkes, 1997). That is, children will learn what to fear from their parents, and will develop a set of assumptions about the world based on this. If parents are excessively fearful, as may be the case if a child goes missing, the children left behind may develop a somewhat distorted view of the world that, once established, is difficult to alter and makes them vulnerable to fear and anxiety in later life (Parkes, 1997).

In contrast to the loss of a child, loss of a spouse results in greater loneliness and anxiety about the future. For many, partners meet security and self-esteem needs, and when a spouse is lost, the person left behind also loses this resource (Worden, 1991).

Many family members and friends of missing people experience disenfranchisement in their social world. Disenfranchisement occurs when a person's experience of loss is unacknowledged, socially negated, invalidated or unrecognised (Dempsey & Baago, 1998; Doka, 1989). In one mother's experience, some people would say "*... you can't hold onto him forever, you have to let him go. But it was unliveable for me to think that I was forever cut off from him*" (Waldegrave, 1999). Another mother recalls that "*I think of her – well all the time you do it, it just comes through your mind. On special days like Christmas and her birthday and mother's day and all those times when children seem more special*" (Kendall, Clayton-Brown & Read).

Other people rarely know how to encourage the safe expression of grief, therefore the opportunity for emotional release in everyday discourse is limited (Riches & Dawson, 1996). Families and friends of missing people may feel stigmatised and vague about their social position as they will often become the object of pity, avoidance, embarrassment, and possibly blame for what has happened (Riches & Dawson, 1996).

SOME MODELS OF GRIEF AND LOSS

The world with which individuals interact is dynamic, constantly presenting changes and challenges that require reorganisation of perceptions, assumptions and behaviours. These changes can be sudden or expected, major or minor in their impact, and can result in either a positive or negative outcome. If it is considered that the resultant "*world*" or outcome is worse than the initial one, people are said to have suffered a loss (Parkes, 1994). Losses include loss of a person, such as a spouse, child, or friend; the loss of a living situation or lifestyle; abstract losses such as loss of control or personal identity; or perceived losses, such as separation from an important person or object (Rodgers & Cowles, 1991).

Parkes (1994) indicates that the most serious losses that people must adapt to are those that:

1. require a major revision of a person's set of assumptions about the world;
2. have lasting consequences rather than transient; and
3. are sudden and unexpected so there is little opportunity to prepare.

The loss experienced by a friend or family member of a person who has gone missing is considered to result in each of these types of losses.

Silove (1999) indicates that grief is a "*normal*" response to loss. Grief is the emotion that draws attention to the fact that someone or something is missing, and includes sadness, anger, shock, etc. (Rosenblatt, 1994, Parkes, 1994). In the 1980's, John Bowlby hypothesised that the grief reaction was an extension of the general response people have to separation; that is, grief is a form of separation anxiety (Middleton, Raphael, Martinek & Misso, 1994).

Throughout life, people form attachments or bonds with parents, partners, children, peers and others, providing them with safety, security and a set of rules and assumptions about the world (Hasler, 1996, Parkes, 1994). People learn "*attachment behaviours*" that maintain these bonds, thereby enhancing their safety, security and their "*world model*" (Bowlby, 1980). When a bond is threatened, people use "*attachment behaviours*" to restore and strengthen the bond. If the bond is not restored, and separation from the attachment figure is permanent (such as in the case of death), an unbearable change results, causing disequilibrium and a loss of confidence of the world as a secure, reliable place (Parkes, 1994). Grieving is suggested to be the "*attachment behaviour*" people display as they make the psychosocial transition re-establish equilibrium (Parkes, 1994; Bowlby, 1980). It is a process of coping, learning and adaptation.

As Shimshon (1991-2) explains, loss is a double-process event. On one level, loss is an attack on the attachment bonds that develop between people, but it is also a major traumatic stressor, affecting the ability of a person to function biologically, psychologically and socially. Although grief is described as a highly individualised, dynamic, ongoing and all-encompassing process (Rodgers & Cowles, 1991), people who are grieving tend to experience some general, common elements. In providing support to people who are grieving, particularly those whose friend/family member is missing, it is important to acknowledge their individual expressions and symptoms. Professionals need also to be sensitive to the different cultural mores associated with the experience of grief. However, grieving people may also benefit from having a structure to their experience (Rosenblatt, 1994). It is important, therefore, that professionals are aware of the theoretical models of grief and how they may apply to different people at different times in the grieving process, but at the same time, do not place inappropriate expectations on individuals to rigidly follow these processes (Levy, Martinkowski & Derby, 1994).

Traditional models of grief have described the process in terms of stages or phases through which people typically pass (Worden, 1991). This conceptualisation is problematic, as people do not always continue through these stages/phases in sequence, and it is common for different phases to overlap. It is also frequent for special dates such as anniversaries and birthdays, contact with other people and external factors such as news coverage to cause people to re-visit earlier stages of grief. This is particularly true for the families and friends of missing people, who struggle to cope with many triggers for the loss, for example with media attention focussed on their particular case and/or items relating to other cases of a similar nature. Hewson (1997) suggests that these new crises and therefore new loss responses related to the initial loss will continue to occur for people throughout their lives.

The application of these stage/phase models to the unique experience of family members and friends of missing people is also difficult, as most models are based on loss due to the death of a loved one, as opposed to the ambiguous loss associated with uncertainty surrounding the fate of a person. Some research exists to suggest that wives, whose husbands are missing-in-action, report a pattern of grief similar to women whose husbands have died (Abbott, 1997), with the exception of final-stage acceptance of their loss, as it is uncertain that their husbands are in fact dead. It is suggested that the experience of families and friends of missing people is similar (Holiday-McGrady, 1992).

Grieving is suggested to come in "*pangs*" that are set off by reminders of the loss that have not yet been dealt with (Parkes, 1985). These pangs will be experienced and expressed differently at different times in the grieving process.

The first few days

In the initial stages of grief, theorists agree that the following emotional responses occur: shock, distress, disbelief, denial and numbness (Worden, 1991; Bowlby, 1985; Parkes, 1994; Hasler, 1996; Barbato & Irwin, 1992; Kubler-Ross, 1969). This immediate reaction to loss is often experienced as an oscillation between emotional blunting and disbelief and outbursts of panic or extreme tearfulness (Jacobs et al., 1987-8). Hewson (1997) describes this experience as the "*primary stress episode*" during which intense emotional and practical pressure is placed upon the person suffering the loss. The initial reaction to this pressure is suggested to be the body's way of buffering the person against the heartache of the loss, to allow an intellectual acceptance that the loss is real. Indeed, Hewson (1997) indicates that the important challenge here is to develop an awareness of the loss that has occurred and the implications of this. In the context of families/friends of missing people, this phase would be akin to the first few days following the person's disappearance.

Bowlby (1985) likened this reaction to the separation anxiety displayed when young children and animals are separated from important attachment figures. That is, when the attachment figure disappears, be it a child, partner, parent or peer, the response is one of intense stress and anxiety, and strong emotional protest aimed at restoring the bond (Worden, 1991). The loss of this relationship is experienced as psychological trauma, and if the person is unsuccessful in restoring the bond, withdrawal, apathy and hopelessness develop (Worden, 1991; Prigerson et al., 1997).

The acute reaction

The acute stage of grief sets in when the person begins to experience the emotional pain of grief. This stage includes intense feelings of pining and periodic waves of intense emotional and physical discomfort (Shuchter & Zisook, 1994). Yearning for the lost person occurs, and people struggle to hold onto or recover the lost person (re-establish the attachment), and are also drawn to places and things of the lost person (Bowlby, 1985; Jacobs et al., 1987-8). In the context of families and friends of missing people, this phase may also involve a frustrated physical search for the person.

Worden (1991) suggests that the task of this stage is to accept that the person is gone and will not return, on both a cognitive and emotional level. Society may make this phase difficult to pass through, particularly in the case of families and friends of missing people where uncertainty is a constant feature of their pain. That is, people may be uncomfortable with the griever's feelings and may give out the subtle message that "*... you don't need to grieve, you are only feeling sorry for yourself*" (Worden, 1991).

This stage is also described as one where people "*go through the motions*" (Hogan, Morse & Credas Tason, 1996). That is, people will fluctuate between experiencing intense pain and anguish to dissociated states where they are able to think, perform and feel "normally" (Shuchter & Zisook, 1994). Others describe this phase as being in "*limbo*", biding their time until the reality of their loss truly sinks in (Worden, 1991). Hewson (1997) explains this reaction in terms of "*stress reduction*", where people attempt to restore a balance in their experiences such that the intensity of the stressor falls within their coping resources.

People can sometimes hinder the reaction in this phase by denying their feelings, remembering only pleasant thoughts of the lost person or using alcohol/other drugs to avoid the pain (Worden, 1991). However, Bowlby (1980) suggests that if people continue to avoid these acute reactions, they may carry this pain with them throughout their lives. It is much easier to process this grief reaction at the time of the loss, rather than further down the track. But again, for families and friends of missing persons, there is no certainty or finality and transition becomes the sufferers' prison.

Chronic relapsing

Distressful yearning for the person will continue over time, as the griever becomes engulfed with suffering over the lost relationship (Jacobs et al., 1987-8). Dejection and loneliness characterise their feelings (Hasler, 1996), and grievers will commonly sense the presence of the lost person, despite their physical absence (Parkes, 1994).

This is particularly the case for families and friends of missing people. This "*sense*" of the person's continued presence may indeed last for a long period of time after the loss occurs and perhaps forever for the families and friends of missing persons.

Disorganisation and despair will also set in, along with the realisation that the person's old model of the world is no longer the true picture (Bowlby, 1985). Parkes (1994) indicates that in an attempt to preserve a sense of security and direction, people will surround themselves with familiar possessions, including those that remind them of the lost person.

At some point after the loss has occurred, people need to find the most adaptive means of modulating the painful affects of their grief (Shuchter & Zisook, 1994). Worden (1991) suggests this involves adapting to an environment in which the deceased/lost person is missing (Hasler, 1996; Worden, 1991). This includes realising the many different roles played by the lost person, and the search for meaning in the events that have occurred. Worden (1991) summarises this challenge not in terms of how to find an answer to the question of why the loss occurred, rather how to live without a reason for it. For families and friends of missing persons, this also means how to live with not knowing.

Silove (1999) suggests that types of extreme trauma, such as that experienced by families/friends of missing people, present people with threats to their world in terms of their sense of personal safety, of belonging/social cohesion, their sense of justice, their faith in the general "*good*" of people and their sense of identity and role functioning. Such major challenges to a person's adaptive systems pose threats not only to the present identity of the person, but their sense of the future, and their place within it.

Grievers somewhat reluctantly adapt to the loss of a person, merely by deciding that they must fill the roles and develop skills to fill the gaps left by the lost person (Worden, 1991). They face the question of whether to retain components of life before the loss, or to change their world model based on the differences they obviously perceive in life without the lost person (Parkes, 1994).

People can often begin this process by giving themselves time off from their grieving (Stroebe, 1997). They adapt to altered relationships with others, and can re-develop a stable view of the world (Shuchter & Zisook, 1994). Stroebe (1997) suggests that it is important for the person to accept the reality that the world is changed, and to develop new roles, identities and relationships that are relevant for this world. In many cases, this involves the person changing their internal model of the world to match the reality of their lives (Parkes, 1994).

Bowlby (1980) suggests that this adaptation involves a reorganisation and development of new assumptions to replace the old ones. Some models of grief suggest that resolution comes by withdrawing emotional energy from the lost relationship and re-investing it in another relationship (Worden, 1991). In reality however, people seem to never lose the memories of a significant relationship, and theorists are now favouring models of grief that account for this need of griever's to continue a relationship with the lost person. This is particularly relevant for the families and friends of missing people, who often are unable to resolve their loss, given they are not really sure whether the loss is permanent.

Although most people can make a substantial return to everyday functioning after loss, this does not mean they have returned to the level they were at prior to the loss. Indeed one way to define loss is a change where the outcome results in an end state that is poorer than the initial state (Parkes, 1994). It seems reasonable, thus, that full recovery from the loss may never be complete (Levy, Martinkowski & Derby, 1994). Horacek (1995) explains that people who are grieving need to be aware that even when the acute reactions have subsided, they will most likely continue to experience "*shadow*" grief, a basic sense of loss that will persist and be part of a continuing relationship with the missing person. Although there will always be some pain in recalling the memory of the lost person, those memories with time will lack the anguish of the acute reactions (Hasler, 1996). Hewson (1997) cautions, that there is potential in this phase for "*secondary stress episodes*" to occur that will take people back to vividly experiencing the pain of their loss. These could be specific events that trigger memories of the lost person (for example birthdays, milestones etc.) or they may arise from a build-up of events (such as work stress, fatigue, demands for time, lack of physical or emotional support) that tax the coping resources of the person. When this occurs, the reaction will not be as severe as that experienced during the "*primary stress episode*" however will require the individual to take steps to re-establish the balance in their lives (Hewson, 1997).

This model may be well suited to the experience of families and friends of missing people. With no tangible evidence to suggest the missing person is dead, families/friends struggle to reconcile the need to resume their lives with the desire to maintain hope that the person will return.

Ambiguous loss

The reactions described above maybe appropriate for describing the general feelings experienced by families and friends of missing persons. However it is also important to account for the uncertain, ongoing nature of everyday life for these families/friends, who have little evidence to suggest that their loss is permanent. In physical death, the relationship to the deceased is permanently severed, however with a person who is missing, fate unknown, the bond is severed somewhat more slowly, incompletely and ambiguously (Dempsey & Baago, 1998). Their grief remains unresolved, creating ambiguity in terms of their social status, where the missing person fits in, and their future. Ambiguity of loss creates the most difficult challenge to the grieving process, particularly in terms of adaptation and resolution (Tubbs & Boss, 2000).

One study, that interviewed women whose husbands had abducted their child, revealed five patterns of coping that were similar in nature to that reported by "*missing-in-action*" wives (Holiday-McGrady, 1992):

4. emotional expression of their grief;
5. self-development/independence as they take on new roles to replace the ones involved with their child;
6. family involvement and maintaining family integrity in terms of reinforcing the strength of the remaining family as a unit;
7. escape and self-punishment as they attempted to distract themselves from thinking about their loss, but felt guilty at resuming elements of a "*normal*" life; and
8. involvement with peer groups, namely those who had been through a similar experience.

Efforts to console people suffering an ambiguous loss focused on managing the stressor, rather than on final, end-stage resolution of the loss. The ambiguity of loss can be likened to Hewson's (1997) concept of experiencing "*secondary stress episodes*". During these episodes, people benefit from stress reduction techniques, such as re-appraising their loss or reducing external demands, as well as from engaging in activities (such as counselling) to ease the painful emotions that they are experiencing (Hewson, 1997).

Individual differences

Hewson (1997) emphasises that responses to loss are complex and multidimensional. As alluded to above, although there are some common factors in the experience of grief, individual factors will also impact on a person's ability to move through the grieving process.

Who the person was

In order to predict how a person will respond to the loss of a person, it is important to understand something about that person and the relationship they had with the person left behind. For example, the loss of a distant cousin will be grieved differently from the loss of a child (Worden, 1991).

The nature of the attachment

The experience of grief will also be predicted by the nature of the attachment the person had with the lost person. Important in this is the strength and security of the attachment, the presence of any negative or ambivalent feelings toward the lost person, and the nature and extent of conflicts between the griever and the lost person (Worden, 1991). Parents in particular seem to need to respond to a child's death or disappearance in a public way, in an effort to resolve the challenges that the loss of a child presents to their competence as a parent (Klass & Marwit, 1988-9).

Mode of loss

It is true that how the person was lost will impact heavily on the way in which a person grieves that loss. For example, unexpected, sudden losses, such as those surrounding missing people, will complicate the grieving process (Bateman, 1999). Families and friends of missing people are unprepared to deal with this loss, and struggle with their inability to say goodbye to the person and to make things right. In addition, the degree of preventability of the incident, as perceived by the person who is grieving, will also influence the duration and intensity of grief (Klass & Marwit, 1988-9).

Historical antecedents

Another important factor in predicting a person's response to loss, is the way in which they have experienced and dealt with loss in the past (Worden, 1991). Central to this element is whether there are any unresolved losses that may impact on the current grieving process. It is further important to determine whether the person has a history of depressive illness or anxiety as these people will have a more difficult time grieving (Worden, 1991).

Personality variables

Doka and Martin (1998) suggest that men and women choose different strategies to adapt to loss. In the initial stages of grief at least, men tend to deal actively with their loss, by arranging funerals, dealing with coroners etc. (Riches & Dawson, 1996). This may also be the case with families and friends of missing people, with the males being actively involved in the search for the missing person, and in handling interactions with police. Women tend to look inward in the initial stages of grief, by feeling and expressing a range of strong emotions. Riche and Dawson (1996) suggest that the public work of expressing grief is likely to come from females, while men cope by doing. However, these are generalisations and may vary in individual cases. This difference in grieving style often makes communication within families difficult (Walter, 1996).

Other factors will also make a person more vulnerable to experiencing grief at a more intense level. For example, people with a pattern of low or unstable self-image, those with a history of child abuse or neglect, and those with poor affect modulation become increasingly insecure and unstable in the face of grief (Prigerson et al., 1997)

Social variables

In particular, the quality of a person's social supports will play a role in their ability to cope with loss (Klass & Marwit, 1988-9). Research has indicated that perceived availability of social support in the aftermath of loss predicts the extent to which a person is able to cope (Worden, 1991). In addition, cultural and religious customs will provide people with guidelines and rituals for grief behaviour.

Concurrent stresses

Other stresses experienced during the grieving process will reduce an individual's ability to cope (Levy, Martinkowski & Derby, 1994). These include day-to-day pressures such as balancing work and family commitments, fatigue, poor relationships with people in support network and so on.

A PREFERRED MODEL OF COUNSELLING

As indicated earlier in this report even a cursory examination of the literature reveals almost limitless theories of counselling with individual proponents able to apply their particular model to most situations encountered in the human struggle for emotional balance and meaning. The academic and clinical literature explores and explains a profusion of applications of any number of counselling approaches to a vista of clinical situations, almost all indicating elements of positive impact on a problem under examination.

The more traditional models of counselling/therapy have been added to or complimented by a vast range of New Age developments over recent years. Some of these theories or models of counselling are supported by acceptable evaluation research methodology and some are yet to be shown to be effective. It is not the purpose of this limited report to individually assess every known theory of counselling/therapy since the development of

psychoanalytic theory to EMDR and "*Thought Field Therapy*". It is rather to highlight some of the core components of a suitable approach to the counselling of families and friends of missing persons considered helpful in addressing their particular needs.

Counselling, driven by rigid commitment to an inflexible model that may have more to do with the counsellor's needs for closure projected onto the client, is obviously unacceptable and not part of a competent counsellor's behaviour. Thus for example, many of the older '*grief and loss*' models describing artificially contrived '*stages*' moving toward '*resolution*' as a goal, are rejected by the families and friends of missing persons as unhelpful. Indeed, Barbato & Irwin (1992) caution against pressing people for premature closure of any stage of grief. On the other hand, models providing, as a core component of process, empathic encounters that focus on a re-negotiation of changed life circumstances find greater acceptance. Howarth (2000) suggests that assisting people to re-conceptualise the "*self*" as a dynamic rather than concept is a useful framework, as is introducing to them the idea that communities and individuals are constantly changing, and so it is the norm that with this change comes new ways of experiencing the world. Models such as Narrative therapy, Personal Construct theory, and Cognitive Behaviour therapy are examples of useful approaches in this context.

Core principles underlying best practice in counselling the families and friends of missing persons are not dissimilar to those underlying any form of competent counselling of special needs groups. These consist of the well-documented basic skills and principles of empathy, genuineness, warmth, concreteness, immediacy, non-directiveness secure in the hands of a developed and experienced communicator (McLaren, 1998; Ballhausen Footman, 1998). With these skills as necessary givens, their application to the special needs of the family and friends of missing persons will be honed by the informed awareness of the counsellor by way of attendance to prescribed reading and participation in training workshops liberally sprinkled with the input of those with '*lived experience*'.

SOME ELEMENTS OF BEST PRACTICE IN COUNSELLING

About the counsellor

Persons offering or proposing to offer counselling services to the families and friends of missing persons need to be suitably qualified and aware of the particular problems of those who have sought such counselling.

It is considered neither sufficient or necessary for the counsellor to have experienced the trauma of having a family member or friend go missing, however it is essential for them to be fully cognizant of the 'lived experience' of those who have.

While formal qualifications may not be necessary to provide counselling in particular cases, it is difficult to envisage an untrained person possessing the breadth and depth of knowledge required to manage the vast array of possible contingencies that may arise in the process of the counselling. Not the least of these is the need for early recognition and intervention where more serious psychological disorders may be developing. This is not to discount the very important, if not essential, role that can be played by those with experience as members of support groups and mentoring networks, a role that, in most cases, cannot be carried out by the professional counsellor. As Walter (1996) suggests, people may also wish to speak with others who knew the person who is missing, and in these cases, talking to a professional is a poor second best.

It is particularly important for the counsellor to possess an understanding of the ambiguous state in which family and friends of missing persons find themselves. Of special note is the sense of loss that, as outlined earlier, never quite fits many of the common or standard models of grief and therefore never ultimately settles. Indeed, while some refer to the experience as "*continuous grieving*", descriptive phrases such as "*chronic relapsing trauma*" or "*episodic stress*" are perhaps more accurate drawing attention to the uneven emotional experience suffered by friends and family of missing persons and particularly for those of the long term missing. With this concept in mind, aspects of "*psychological first aid*" referred to in the NSW Disaster Mental Health Response Handbook will be central to the very practical role of empathic support offered by a counsellor from time to time. For example:

- The basic human response of comforting and consoling a distressed person.
- Protecting from threat or distress as far as possible.
- Furnishing immediate care for the physical necessities.

- Providing goal orientation and support for specific reality-based tasks.
- Facilitating reunions with loved ones with similar anxieties.
- Sharing the experience.
- Linking the person to systems of support and sources of help that will be ongoing.
- Facilitating the beginning of some sense of mastery.

In terms of more formal counselling, the theoretical basis of the counsellor's chosen model appears less important than the ability to convey meaningful empathy. The literature, sparse as it is, coupled with the combined anecdotal experience of families and friends of missing persons, supports the contention that no individual experience is the same as another and that satisfaction levels with the support and counselling offered will finally be determined by the clients. As in most other areas of counselling, the nature of the relationship between the counsellor and the client will be the most critical element of useful counselling.

About special knowledge

Those offering counselling to the families and friends of missing persons need a detailed knowledge of the psychological and emotional experiences faced by such individuals and family units as well as an awareness of the personal, social, interpersonal, legal and practical issues confronting their reality.

The realisation that a loved one is missing provokes unheralded anxiety and anguish mixed with a doubting hope that presents the individual with a confused spectrum of emotion that defies description. Suffice to say that the experience presents a full range of feelings from the very depths of ones most primitive fears of abandonment and isolation to the heights of faith and hope while along the way, guilt, panic, despair, anger, sadness and an array of roller coasting other emotions emerge.

Families and friends of missing persons speak of the pain of not knowing and the mental torture of perhaps never knowing. They tell of their experience in learning of a body or remains being found and, while on the one hand dread that forensic tests will confirm their worst fears, on the other, thinking that at least their uncertainty would end. But with this thought, comes a further flood of emotion including guilt and regret.

There are many dilemmas and questions faced by the families and friends of missing persons including "*... how long do we search?*" and "*... with what intensity?*" "*When do we give up and wait?*" "*Should we have a service and should it be a funeral or a thanksgiving or a hope service?*" "*Why isn't my partner feeling the same as me?*" "*Was it something I did to cause my loved one to go?*" "*Were we such bad parents?*" "*When should we have a Coroner's case?*" "*Why aren't the police doing more?*" "*Why didn't people take me seriously in the first place?*" "*Whose responsibility is the property?*", and an untold number of other unanswerable questions, conflicts and complications.

Amidst all of these complex issues and emotions is the need to deal with the well meaning who urge them to "*move on*", "*to let go*", "*to come to terms*", "*to accept*", "*to resolve*" and other phrases designed to be helpful, but often only provoke further anxiety and sometimes anger.

While the helpful counsellor will need to have a special awareness of the problems faced by individuals, they will also need to be aware of the volatile tensions that can emerge within the relationships of those struggling to deal with the anguish of not knowing. As Heiey (1991) emphasises, families under intense stress may not communicate effectively and may therefore be unable to support each other. Parents speak of destructive tensions within their marriage particularly where individuals become totally preoccupied with the missing child or are consumed with their own struggles to maintain some semblance of emotional stability and have little nurturing left over for their partner. Remaining siblings frequently complain of similar feelings of abandonment with one adolescent revealingly commenting to his parent "*I wonder if you would miss me this much if I was missing?*" The major task of the therapist under these circumstances is to help the family re-establish the lines of communication and support, and to enhance their coping abilities and resources where necessary (Levy, Martinkowski & Derby, 1994; Heiey, 1991).

In intervening with children in this context, it is further important for the professional helper to adjust treatment according to the developmental stage of the child (Heiey, 1991). For example, the helper could assist the child in developing a concrete understanding of what has happened, give them permission to grieve or ventilate feelings, encourage play as a way of expressing grief, or identifying "*magical*" thinking surrounding the person's disappearance that may lead to inappropriate feelings of guilt (Heiey, 1991).

There is also a need to understand and be able to assist in situations where a missing person may be located giving rise to another set of issues within family and friendship groups that may not always be as imagined. Of course, in situations where worst fears are realised and remains are confirmed as one's loved one, the processes of (perhaps) a complicated grief reaction may ensue.

A further need for understanding and knowledge by the counsellor emerges in situations where the missing person is located but does not wish to be reunited with family and friends. This situation is not uncommon for many parents of young people who choose to "*live away*" following some real or imagined unresolvable family conflict. However, the phenomena is not restricted to young people with many others choosing, often without notice, to move away from their family and friendship networks. The issues for those left are frequently complex and raise a myriad of self-searching questions punctuated with a range of emotions from anger to profound sadness.

In addition to an advanced knowledge of general counselling and the specific issues confronted by the family and friends of missing persons, counsellors should have a current knowledge of specialised referral agencies and support groups. These organisations are often best placed to offer practical assistance in the search particularly where the loved one is missing overseas.

About service

Given the recurrent and intermittent nature of distress experienced by the families and friends of missing persons, those offering counselling need to be flexible in their availability.

Understandably, in the early stages of becoming aware that a loved one is missing a very intense, if not frantic, period of search activity is evident. Experience dictates that during this time "*psychological first aid*" and practical assistance are priority activities with the traditional forms of face-to-face counselling probably inappropriate. Indeed, Trolley (1993) suggests that the role of helpers in these early stages is that of a crisis counsellor; offering support, calm reassurance, concerned objectivity, and providing information and assistance with practical matters and decision making processes.

However, as time unfolds, for that small percentage where the individual continues to be missing, counselling may rise in usefulness. Trolley (1993) indicates that throughout the grief process, it is important for the counsellor to be an empathic listener, who is comfortable with different displays of emotion, can suggest methods to improve communication and decision making within the family unit, and who can educate people as to differences in grieving and coping styles. Insecurity can be reduced by reassuring people of the skills they already possess, that is by encouraging them to explore their world and make the best possible use of these skills (Parkes, 1997).

There then ensues an extended period, varying in individual cases, where less regular contact is sought and usually at times when some trigger sets off a re-stressing of the client not dissimilar to the original experience. These triggers may be the discovery of human remains, the confessions of a multiple murderer, a media report of a similar case, finding a long misplaced photo of the missing person, mistaking a face in the crowd, an anniversary etc. It will be important for the counsellor to be available at these times. There is therefore a need for persons offering specialised counselling for the family and friends of missing persons to be around for the possible long haul building the kind of relationships required for effectiveness.

Availability in times of emergency, a preparedness to be known and listed as someone with special knowledge in the area of counselling family and friends of missing persons and a commitment to ensuring currency of professional knowledge and expertise is imperative. In this context, a current knowledge of available support and referral services is also of vital importance.

RECOMMENDATIONS

1. That the FFMPU promote the development of identified counsellors for the families and friends of missing persons to be accessed by prospective clients.
2. That the FFMPU promote the development of competencies and specific training be discussed and developed in liaison with relevant professional and/or training bodies.
3. That the FFMPU promote the development of suitable training workshops.*
4. That the FFMPU emphasise the importance of counsellors offering flexibility and long term continuity of availability in their provision of counselling to the family and friends of missing persons.
5. That the FFMPU develop a web site that includes a listing of those recognised as identified counsellors of families and friends of missing persons.
6. That the FFMPU maintain a listing of recommended readings for its identified counsellors.
7. That a pamphlet be developed for distribution to families and friends of missing persons outlining what standards and services can be expected of identified counsellors.
8. That the FFMPU issue a statement endorsing certain basic principles of counselling the families and friends of missing persons including, but not restricted to, the following: Counsellors of the families and friends of missing persons are encouraged to:
   - ensure they possess well honed basic counselling skills recognising the particular importance of empathy and genuineness;
   - ensure they are well informed of the particular needs of the family and friends of missing persons;
   - avoid a dogmatic attachment to a "stage" approach to loss theory and particularly any unmodified application of grief and loss models that emphasise 'closure' and 'resolution' as end products;
   - be familiar with the 'lived experience' of the family and friends of missing persons;
   - be available for the 'long haul' in terms of availability;
   - be familiar with developmental issues surrounding the loss/hope dilemma experienced by family and friends of missing persons;
   - maintain currency in the literature surrounding loss and grief and the issues facing family and friends of missing persons;
   - develop an association with local support groups for the family and friends of missing persons; and
   - engage in a therapeutic philosophy that assists the family and friends of missing persons helpfully redefine and reinterpret their altered status with the missing person.

* *Suggested content could include:*

1. contributions by consumers on the lived experience;
2. applicability of various counselling models and theories;
3. details of various search agencies and procedures;
4. legal issues when someone goes missing;
5. information on support groups;
6. the impact on relationships where a loved one is missing;
7. problems in reunions;
8. found but estranged; and
9. avoiding the less helpful.

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