Contents

The Academy of the Social Sciences in Australia was established in 1971. Previously, some of the functions were carried out through the Social Science Research Council of Australia, established in 1942. Elected to the Academy for distinguished contributions to the social sciences, the 410 Fellows of the Academy offer expertise in the fields of *accounting, anthropology, demography, economics, economic history, education, geography, history, law, linguistics, philosophy, political science, psychology, social medicine, sociology and statistics.*

The Academy's objectives are:

- to promote excellence in and encourage the advancement of the social sciences in Australia;
- to act as a coordinating group for the promotion of research and teaching in the social sciences;
- to foster excellence in research and to subsidise the publication of studies in the social sciences;
- to encourage and assist in the formation of other national associations or institutions for the promotion of the social sciences or any branch of them;
- to promote international scholarly cooperation and to act as an Australian national member of international organisations concerned with the social sciences;
- to act as consultant and adviser in regard to the social sciences; and,
- to comment where appropriate on national needs and priorities in the area of the social sciences.

These objectives are fulfilled through a program of activities, research projects, independent advice to government and the community, publication and cooperation with fellow institutions both within Australia and internationally.

The **Secretariat is connected to email**. The general address for all Academy matters is: ASSA.Secretariat@anu.edu.au. Individual staff may be reached at the following addresses:

Dr John M Beaton, Executive Director: j.beaton@anu.edu.au
Dr John Robertson, Research Director: john.robertson@anu.edu.au
Mrs Robin Taylor, Executive Assistant: at the general address
Mark Pinoli, Assistant Director: assa.admin@anu.edu.au
Ms Jennifer Fernance, Accounts Officer: assa.accounts@anu.edu.au
Dr Peg Job, *Dialogue* **Editor**: pegsbooks@optusnet.com.au

Website www.assa.edu.au

Book Launch at Annual Symposium

Dr *Peter Shergold*, Secretary, Department of the Prime Minister and Cabinet, launched an important book at the ASSA Symposium on 7 November. His comments are of interest to all those in the social sciences, and he has given permission for his address to be reproduced here.

I am pleased today to have the opportunity to launch *Ideas and Influence: Social Science and Public Policy in Australia*, edited by Peter Saunders and James Walter.

Not infrequently I talk to academics who tell me that they work in the area of public policy. It awakens my interest. Often I am rudely disappointed. They may be researching in areas that are at the forefront of policy debate – health, welfare, early childhood development, education, employment – but they appear uncomfortable when asked directly what policy changes they would implement. This is seen, I discern, as a matter for others – less talented others - to ascertain from a proper consideration of their research findings. Practical policy which affects people's lives seems to be regarded as a trade skill, sullied by the dirt and grime of political compromise.
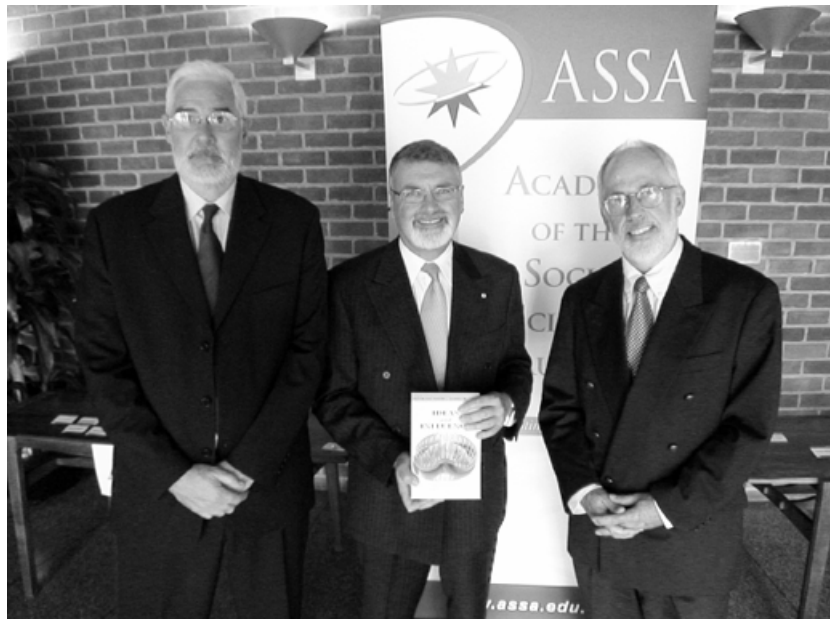
Peter Saunders, Peter Shergold and James Walter at the launch.

Other academics have very clear policy prescriptions, often argued forcefully and sometimes propounded with a level of polemical certainty. While I am engaged by many of their ideas, and somewhat disquieted by the single-mindedness of their underlying philosophical conviction, I discover that my questions about possible compromise positions are met with a strong gaze into the mid-distance. A second-best outcome, I realise, is not good enough.

The art that I find so beguiling – developing policy iteratively, moulded by an environment of political contest and organisational advocacy, responsive to unexpected opportunity, stymied by unforeseen barriers and shaped by financial exigency – is an uncomfortable discipline for the purist.

Let me start again.

Not infrequently I talk to academics and tell them that I practise public policy. I awaken their interest. Often I rudely disappointment them. I appear too little aware of the most recent research. I am too eager to get to their conclusions. I sense they believe that I provide policy advice on the basis of political responsiveness, ill-founded pragmatism or ideological predilection. I seem an archetypal grey-suited, fixed-minded disciple of economic rationalism.

That, as I have learned from Saunders and Walter, is not good. Indeed neo-liberalism takes the rap in different chapters of this book for undermining welfare provision, civil rights, gender equity, educational opportunity and social planning; promoting unsustainable consumption and market-oriented individualism; and even (is this the most damning charge of all?) constraining the potential of the social sciences.

Which leads me, by circumlocution (appropriate, Charles Dickens would have thought, for a creature of officialdom) to consider these essays on social science and public policy in Australia. I am pleased to launch the book because I enjoyed it. I found its ideas as interesting as I found its overall perspective on Australian society unremittingly bleak. Of course writing on public policy, just as much as practising its implementation, should focus on problems and how they might be overcome. Nevertheless in a 240-page book on contemporary Australian socio-economic policy it is curious, methinks, that there is remarkably little reference to sustained economic prosperity, rising real wages and pensions, strong employment growth, high levels of share ownership, sharply increased family assistance and – in part because of these achievements – income gains distributed across the Australian population. Such indicators, born of public policy, may not be the only measures by which to assess human well-being, but surely they should be a significant part of it? To have an efficient economy better able to withstand regional financial crisis or international recession is not a bad outcome of the public policies of successive governments. Then again, it is possible that such sentiments simply represent a neo-liberal apologia?
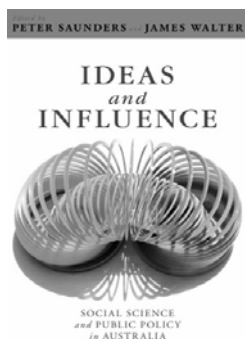
No matter: the range of articles is wide and their ideas presented in a manner refreshingly devoid of jargon. Some articles persuaded me to re-examine my assumptions: Richard Eckersley's examination of the relationship between national progress and human development was one such. Others – for example, Brian Head's well-balanced consideration of governance – provided valuable syntheses of complex subjects. All provoked me to varying degrees. A reader can expect no more.

But, beyond the contributions of the individual authors, this book, and its extraordinary insightful introduction, is a tribute to its editors Peter Saunders and James Walter. They understand well why I and my academic colleagues so often talk past each other and why, in their words, we have such 'an uneasy fit', 'often characterised by mistrust and suspicion'. They discern and analyse the distance

that sits between expert knowledge and policy response. I understand, far more than I did before, why the academic researcher finds the public servant insufficiently attentive to subtlety and qualification and too prone to 'cherry-picking' ideas. I agree, as my remarks illustrate, that the policy practitioner sees many social scientists 'as pursuing their own political agendas under the guise of scholarship' or 'peddling opinions in some personal capacity'.

Saunders and Walter bring a welcome sense of history to this uncomfortable tension. They argue that it has not always been so. Nor need it continue to be so, they argue, if both sides can more clearly understand the perspectives of the other. Evidence-based social research has the capacity to influence public policy, directly and indirectly.

If this book can help improve the workability of the 'scholarship policy interface' it will have made a major contribution. We need to build bridges based on empathy not agreement. Funding, appropriately delivered, may be part of the solution. The danger, and I am sympathetic to this dilemma, is that those funded can feel co-opted by the process. They may find their academic freedoms constrained, unable to publish their work in the form or timeframe which they would like and gaining insufficient credit for their achievements from their academic peers.

Yet the alternative is worse. Do universities want to see public policy handed over to academic entrepreneurs, management consultants, think tanks and advocacy organisations? Public servants will continue to try and discern the national interest within the plethora of well-argued (and frequently disguised) particular interests. That is their job. To the extent that they feel unable to derive sustenance from academic expertise their own technical competence and professional training will be reduced.

The relationships between social science and public policy, and between academic and public servant, are ones of the utmost importance. They are not, I think, in particularly good shape. To the extent that this book can draw attention to the fragility of the present relationships, and offer cautious advice on strengthening their vitality, it will have made a valuable contribution to public life. It is a matter of hope that the Academy of the Social Sciences recognises the importance of this dilemma and has championed its discussion.

I am delighted indeed to launch *Ideas and Influence: Social Science and Public Policy in Australia* edited by Peter Saunders and James Walter. I hope that it will be read and debated on both sides of the policy divide.

It deserves to be.

Editor's note

In this issue of *Dialogue*, we are unable to include a President's Report, due to an accident in the family. We wish Keith a rapid and full recovery.

The Academy Secretariat, with great regret, will farewell Mark Pinoli from 1 January 2006. Through his skills in communication and technical expertise, his aptitude for imaginative design and his sheer energy, Mark has pushed us into the 21st century. He has been a respected and supportive colleague, particularly to this Editor, and he will be missed. Travel safely, Mark.

Australian Ways of Death

Changing Ways of Grieving in 20th Century Australia
Pat Jalland

The world we have lost and the forces of change

The history of death and grief is a significant part of human history and of the history of the emotions, which has been overlooked until recently. We must all confront the inevitability of our own mortality. The study of death and grieving takes us to the heart of any culture, and sharpens our understanding of the meaning of our lives.

In the last twenty-five years scholars in psychology, medical science and sociology have placed increasing emphasis on the need to study death, dying and loss in contemporary society. The essays in this issue by Ian Maddocks and Beverley Raphael are the work of distinguished scholars who have contributed personally to advances in palliative care and in the psychology of bereavement. Though historians in Australia have been slower to work in this important field, the essays by Joy Damousi and I represent pioneering research which we hope will encourage further historical contributions.

My forthcoming book, *Changing Ways of Death in 20th Century Australia*, explores the features and causes of a profound cultural transformation in the 20th century history of death and grief.[1] After the First World War a deep cultural shift occurred which lasted until the 1970s: emotional and expressive dying and grieving became less common than in the 19th century; thoughts and feelings about death were more likely to be avoided: ritual was minimised and sorrow became a private matter. Only since about 1980 have death and loss again become topics of intense public concern and discussion, stimulated by the AIDs epidemic, by debates about euthanasia and palliative care, and by reaction against the medicalisation of death in hospitals.

Death in Australia has been an individual and diverse experience, with multiple modes of death and ways of grieving. Even so, it is possible to identify and explore dominant, contrasting models: in the 19th century the urban middle class and respectable working class were strongly influenced by Christian beliefs which affected their attitudes to death, funeral practices and the consolations available in mourning. Religious faith encouraged Christian families to accept death as the will of God. It allowed them to express sorrow in overtly emotional terms, using the language of the bible, the prayer book and familiar hymns. Children, like adults, learned to regard death as an inevitable part of life, often conditioned by the deaths of siblings.[2] But religious beliefs declined from the 1880s, to be slowly replaced by a more secular society which tended to privatise death and grieving and minimise rituals.

Demography was also a significant force for change in both centuries, but its effects differed from one century to the next. The most obvious feature of this demographic transformation was that old age replaced infancy as the most likely time of death from about 1904. The 19th century demographic pattern was marked by relatively high mortality, a short life expectancy and a high infant death rate. Between 1880 and 1920 a significant transition took place, displacing the traditional pattern with a new one; this was marked by a continuous decline in mortality, improved death rates for infants

and children, and increased life expectancy at birth. The infant mortality rate fell from the 1880s, with a steep decline after 1904, and by 1930 this rate had more than halved.[3] Parents today expect their children to survive at least to adulthood and many people do not experience the death of a close friend or relative until their elderly parents die.

'Death denial' and silent grief

There were four significant motors of change affecting death and grief in Australia in the 20th century – religion, demography, medical science and war. The focus of my forthcoming book is on war and medicine, but this essay is chiefly concerned with the impact of the two World Wars on death and grieving, and the second cultural shift since the 1980s. My aim is to define the features of a so-called 'death-denying society'; to explore how and why it developed after the Great War, and why it began to change again from the 1980s. It is, of course, a considerable challenge to examine the nature of a culture of death characterised by silence and avoidance, as the evidence is fragmentary and sparse, especially in the interwar years.

Different cultures have varying attitudes and ideas about death and grief. Moreover, people within the same culture can perceive death and respond to grief differently at various times in their lives. This change over time is demonstrated by the marked contrast between death attitudes, experiences and practices in Australia in the century before the Great War compared with the half-century afterwards. In general terms there was a shift from a dominant Christian culture of acceptance of death and more open expression of grief before 1914, to one of avoidance and silence in the half-century from 1918 to the 1980s. The challenge for the historian is all the more complex because acceptance and avoidance can, and do, exist side by side in the same society.

The concept of 'death denial' was introduced by Sigmund Freud in his 1915 essay, 'Our Attitude towards Death'. Freud argued that 'death denial' had already commenced before the Great War: 'We showed an unmistakable tendency to put death on one side, to eliminate it from life. We tried to hush it up'.[4] The phrase 'death-denial' needs to be used with care, because it has various meanings for different disciplines. Sometimes the term cannot be avoided because it is used by others and occasionally it is helpful to apply it in a general sense to cover a range of related meanings, including avoidance of death's reality, suppression of emotions, silence about death and grief, and minimisation of rituals. It is now a popular phrase, commonly applied in contrast to 'acceptance' of death, and used here to describe a dominant cultural norm in the half century after the Great War.

The psychiatrist Beverley Raphael is a prominent Australian expert on bereavement, whose comments on the fifty years of suppression of sorrowful emotions are particularly valuable. Writing in the mid 1970s, having completed a thesis on the management of bereavement, Raphael understood more than most people about the cultural climate of the 1960s and 1970s: 'The pain of grief is often denied, suppressed or disowned. Particularly for adults in our society there are strong pressures to be in control of one's emotions at all times; not to break down with grief, as this is seen as an indication of weakness.' When Raphael asked bereaved patients to talk about the circumstances of the death, for many it was their first experience of such open communication, 'so great is the level of denial about death and so great the difficulty of speaking of it'. Often the undertaker had been the only person prepared to discuss the death in an open and helpful way: 'For everyone else the deceased has 'passed

away' and become unmentionable, and the bereaved has been given very clear communications that it is highly improper to upset herself and others by any undue emotional display.'[5]

An important social survey of bereavement in British society was conducted in 1963 by British social anthropologist Geoffrey Gorer: this also has some relevance to my study, given Australia's British heritage and the absence of any comparable Australian evidence. Whereas most recorded human societies had formal mourning rituals, Gorer found that the bereaved in 1960s Britain had to face intense grief without rituals, guidance or support. The common assumption seemed to be that rational people could control their grief by will power, giving it no public expression and indulging it in private, if at all. Gorer's conclusions were based on a questionnaire study of a representative sample of 359 bereaved people who had lost a significant family member in the previous five years. Half the deaths noted in the survey had taken place in hospital, and most people died alone: less than a quarter of those surveyed were present at their relative's death. Customs of social mourning after the funeral had almost disappeared in England: most people hid their grief and acted as if nothing had happened.[6] My evidence suggests that these broad conclusions have some relevance for Australia, where the urban middle classes and respectable working classes were also more likely to hide their grief.

I have found very few detailed accounts of the experience of grieving for individual Australian civilians in peacetime, either in the interwar years or even the twenty years after the Second World War. Ruth Park's traumatic experience of bereavement can probably stand for many of the silent bereaved in the years between 1918 and the 1980s. Her story offers a thoughtful analysis of the potentially destructive nature of denial: it dates from 1967, towards the end of the years of silence. Though born in New Zealand, Ruth Park and husband D'Arcy Niland earned a distinguished joint reputation as Australian writers. For over six years after D'Arcy's death from heart disease in 1967 Ruth suffered from grief that 'very nearly killed me', in addition to the adverse financial consequences of widowhood. In 1993 when revelations of distressing bereavement experiences were once again permissible, even encouraged, in a new age of 'death awareness', Ruth described this terrible period in her life in her autobiography, *Fishing in the Styx:*

> When my husband died I handled grief very badly. People remarked on my calm or the capable manner in which I handled the innumerable complexities that follow a sudden death. I was unlikely to embarrass or distress them by weeping or throwing myself in front of a truck, and though their desire to console was genuine, they were secretly relieved. 'You're being wonderful', they said. To be wonderful is to handle grief badly. And so I nearly died. In a way I did die, as one might die of shock after an amputation or a dreadful wound. My own character and disposition made things worse for me, terribly worse. Reserve, independence, stoicism are not the qualities needed in grief.

Our culture knows little about meeting grief head-on… We stand about in tears, wishing we could assuage the pain of persons dumbfounded by woe, but mostly we don't know what to say. So mourning is not done, and the tears that run down inside turn to acid that may corrode your soul for years.[7]

For a long time after 1967 Ruth Park found nobody able to help or advise her in this 'strange country' of bereavement. The doctor offered tranquillisers and the clergy inadequate religious consolation, all incapable of understanding or responding to the

depth of her despair. She came to believe that people only learn about bereavement through tough experience. Ultimately, only her fellow bereaved were able to help her find her way through. The person who eventually enabled her to cry was a kindly Italian shopkeeper who came from a culture accustomed to express sorrow openly: he understood her grief because he had lost his baby daughter in an accident and communicated his sympathy.[8]

'Silent heartache': grief and the Great War

The Great War was a watershed in the social and emotional history of dying and grieving. Religious and demographic forces had started the process before 1914, but the war was itself a powerful catalyst of change: the traditional Christian culture of death ceased to be the dominant model in Australia. The mass slaughter of young men and the interminable grief of countless families went far to create a new model of suppressed and privatised grieving which deeply constrained the next two generations.

The human cost of the Great War in Australia was unprecedented, with about 60,000 soldiers killed; one in five of those who left home for the war did not return (compared with one in eight in Britain). Ken Inglis has calculated that two out of every three Australians in uniform were killed or wounded and every second family was bereaved.[9] The trauma suffered by these families was increased because they could not say a last farewell to their sons' bodies nor attend their funerals. The grief was omnipresent. In some cases the bereaved family suffered the agony of losing more than one son and some villages or small towns endured a disproportionate share of fatalities.

Silent grief and stoicism were the soldiers' instinctive responses to the hideous deaths of many of their mates and the constant fear of their own deaths. Psychologists such as Eric Lindemann have written of the 'macho' warrior identity of western men affected by two world wars.[10] The cult of manliness, the military culture and the demands of war required that they behave with courage and restraint, however terrible their experiences and their memories. Soldiers' references to the deaths of mates in their letters home were often understated and laconic – inadequate to convey the full depth of affection and sorrow they felt on the death of a close friend. Their statements could be significant in providing a model for their parents' grieving behaviour when their sons in turn were killed. These letters home convey much in few words about the culturally correct response to death from the perspective of a soldier. They left an enduring imprint on the minds of devastated parents when their sons were killed: they told their parents how their loved sons themselves faced death, and by clear implication also how they hoped their families would grieve if they died. When Sergeant Jack Baillie, serving in France, lost his brother and brother-in-law to the war, he told his girlfriend in Newcastle that 'we shall only have to keep a stiff upper lip and bear up'. He added 'I don't want to be sad in this letter', reinforcing the required stoical response in facing death. Like many other serving soldiers, Baillie suppressed his feelings of grief on his brother's death in writing home, though admitting it 'hit him hard'.[11]

Soldiers also conveyed the implicit message to their families that individual grief on the part of bereaved families must be restrained because it was self-indulgent when compared with mass deaths of young men in war. The Ferguson family in Enoggera, Queensland, paid a heavy price for their four sons' participation in the Great War: two were killed and the family believed that 'the war is responsible for poor Mater's death'

in 1917. The correspondence between the two surviving sons and their businessman father illuminates the transmission of expectations about appropriate grieving behaviour between serving soldiers and their parents. Two brave sons had sacrificed their lives, requiring an equivalent courage by a grieving father. All four brothers were strongly influenced by the soldiers' code of silence which had taught them to bear their sorrow internally, because overt expressions of emotion signified masculine weakness and showed poor discipline in war. Malcolm Ferguson indicated to his father in 1917 that quiet stoicism was the necessary response to the 'terrible hard knocks' of wartime: 'just "stick" it, like you always have in all your troubles.'[12] Indeed, when another brother, Douglas, was killed, in August 1918, the two surviving sons, Malcolm and Norman, reinforced their father's courage: he must bear these dreadful blows as he had the earlier trials, 'you just squared your shoulders and carried on … you are battling through it like you always have'.[13]

Thus cultural prescriptions of grieving behaviour extended beyond the soldiers themselves to the countless bereaved families. Moreover, 'spartan control' was the proper demeanour expected of women as well as men in response to news of the death of a son, husband or brother. Graeme McInnes remembered Anzac Days in the 1920s, when stern-faced bereaved mothers 'attended service standing erect and dry-eyed, their bosoms stitched with their dead sons' medals'.[14]

In the years after the Great War, former soldiers usually kept their feelings about comrades' deaths to themselves, rarely sharing them with families who sometimes seemed to them to inhabit a different mental universe. Veteran Marcel Caux died recently at the age of 105 years. It took him 80 years even to admit that he fought in the Great War; his son only learnt the truth in 1998. Caux first participated in an Anzac Day march in 2001. He was one of many soldiers who fought through the campaigns of the Great War and was so distressed by his terrible memories that he tried to forget, destroying his records and photographs.[15] Roy Grant, a Gallipoli veteran, also subsequently sought to forget many wartime experiences, especially those relating to 'brave mates who were killed and I helped to bury them'.[16]

Varied family responses to wartime bereavement

Australian families responded to wartime bereavement in many ways, most of them impossible to trace because they remained private and often silent, leaving no records. We know most about a tiny minority of families and individuals who left accounts of their bereavement. The Hughes family of Sydney showed how a prominent Irish Catholic family found consolation in their Christian faith on the death of their son Roger, killed in December 1916. Many more families found some comfort in the memory of their dead son or husband, especially in the absence of Christian faith. The primary focus of Garry Roberts' grief was private memory – a powerful traditional source of consolation on bereavement. He and his wife Berta sought refuge in sharing 'old memories of our son and how proud we were of him'. He collected vivid memories of his son's final year at the front through a scrap book which reconstructed the engagements of Frank's battalion.[17]

Such strategies in grief were probably largely confined to families who had confirmation of their sons' deaths and places of burial, which allowed them to begin the grieving process. We will never know how many more families grieved privately and in virtual silence, leaving little or no written evidence of the immense burden of such suppressed grief. Yet there are numerous passing references to the anguish – or even the deaths – of parents caused by sons' wartime deaths. Jack Baillie recalled

that the shock and grief of his brother's death in 1917 'utterly broke dad up'.[18] When Private Reginald Gluyas died in France at the end of the war at the age of 19, his father committed suicide. We know this only from a handwritten note inside the cover of a 'thanks for sympathy' card held in the Australian War Memorial.[19]

Between these desperate expressions of grief and the more positive responses of the Roberts' and the Hughes' families, at the other end of the spectrum, there were vast numbers of bereaved people who did not articulate their sorrow, which left no tangible trace. Judge Henry Bournes Higgins' experience of grief can stand for many of the silent bereaved because he was a prominent public figure and fragmentary evidence of his suffering has survived. He was representative of untold numbers of sorrowing parents of soldiers killed in the war in his suppressed response. His only child, Mervyn, was killed in Egypt in December 1916, having survived Gallipoli. Like many bereaved parents, Higgins wanted to honour his brave son's code of manly courage in the same stoical manner, to prove himself worthy of his son's sacrifice. He admitted to his niece, Nettie Palmer, 'Poor Aunt Mary and I are trying to be brave and cheerful towards life, because he would have us so'. As Nettie noted, the impact of this blow was all the greater because the bereaved parents were determined not to be overcome by it. The consequence was that they did not allow themselves to express their sorrow openly.[20]

Ten months after Mervyn's death, Judge Higgins confided in a close friend in the United States: 'Sometimes I am weighed down by the grief which you know of; but it cheers me to fancy that I am doing just what my boy would like me to do. What, after all, am I among so many who suffer? There are many homes suffering here'. Higgins shared the common belief that mass wartime bereavement rendered insignificant the grief of individual parents safe at home. Higgins reinforced this view in a subsequent letter to his friend, describing his despair late in 1918 on hearing the first victory cheers: 'I have no right to infect others with our grief.' The use of the word 'infect' is revealing, likening grief and the potential loss of control in public to a contagious disease. Thousands of other boys would return to their parents, 'but never our boy'. Instead Higgins must brace up to life and work: 'My grief has condemned me to hard labour for the rest of my life.' He followed Thomas Hardy's advice, 'Ache deep; but make no moans / Smile out; but stilly suffer'. The grieving parents could look forward only to an old age with 'a childless home – and tears'.[21]

Grief could be intense for bereaved parents who knew how their soldier sons died and where they were buried. It could be protracted agony for those whose sons were reported as missing and whose bodies were never recovered. Hopes were initially raised without firm foundation, only to be dashed months or years later. Thousands of soldiers had no known burial place because their bodies were shattered by shells or never found. Forty-two per cent of the Australian dead could only be commemorated communally by memorials to the missing like that at Lone Pine, Gallipoli, inscribed with the names of 4228 Australians with no known graves.

The fate of parents of these 25,000 missing soldiers may perhaps be compared with that of parents of young people today who just disappear and are reported as missing indefinitely. But probably the continuing mental distress of bereaved parents of the missing of the Great War was magnified because its horrors became well known in the interwar years to anyone who cared to investigate: families could suffer continuing anguish by imagining smashed bodies, hideous mutilation and terrible pain. Indeed much of the abhorrence of that war in the memories of survivors arose from the loss

and dismemberment of corpses. Families probably found it impossible to come to terms with the reality and finality of their sons' deaths without a corpse or an identified grave, initially dreading maybe that their loved ones were not dead, but maimed and helpless 'somewhere in France'. Many doubtless grieved intensely but privately for the remainder of their lives, traumatised by losses which they never completely accepted. Under such circumstances any normal process of grieving was out of the question for most. Psychologists define chronic grief as an extreme response to the death of a loved one, especially a young person killed violently in acutely distressing circumstances such as war. Such grief can be prolonged and marked by social withdrawal and intense depression.[22]

Public commemoration and private grieving in the interwar years

The Great War had a profound impact on emotions, attitudes and practices related to death and grief for 50 years or more, reinforced and prolonged by a harsh economic depression and another world war. The mass deaths of the nations' young soldiers in Europe rendered individual civilian deaths relatively insignificant. Communal grief for brave soldiers was privileged over individual sorrow for civilians who died domesticated deaths. The silent response to grief became entrenched in the nation's psyche as a widely disseminated emotional norm.

Private funeral and mourning rituals for individual civilians were already in decline when powerful public and collective rituals were created to commemorate the Great War heroes. Mourning customs had usually been simpler in colonial Australia than in Britain, and they became more modest as a result of funeral reforms from the 1870s. The process was intensified by the Great War, particularly as war heroes could not be buried in Australia and grave-visiting for consolation was out of the question. In the circumstances of war individual displays of funeral pageantry for civilians seemed an unnecessary indulgence. Psychiatrist Colin Murray Parkes has observed that 'it is societies that have recently experienced war or see themselves as 'warriors' that are most likely to minimise mourning'.[23] Other psychologists have observed a significant distinction between the public and private construction of grieving after the Great War. The public construction was that soldiers died as heroes for a noble cause, which demanded the celebration of their deaths, and perceived sorrow as unpatriotic.[24]

It was generally recognised that a public display of commemoration and collective mourning was essential to honour those who sacrificed their lives for the nation – even more so in Australia because few bereaved families could ever visit their loved ones' graves in Europe. The monuments erected to their memories in Australia had to serve as a substitute for their graves. Ken Inglis notes that the large civic war memorials were constructed too late 'to serve most bereaved people as sites of healing meditation', since only two Australian capitals had built them by 1930. And, he adds, their chief aim was not to mitigate individual grief: 'they were public declarations, acts of formal homage … honouring the sacrifice of the dead and the service of the survivors.'[25]

Clearly public commemoration helped some bereaved families and ex-soldiers more than others. There was some conflict for individuals between public patriotism and private sorrow, with tensions between the two functions of Anzac Day and the War Memorials: they had to honour and celebrate those who died for their country, but they also had to allow the bereaved to mourn their dead. It was not always easy to achieve both, especially as private sorrow for the dead could be seen as disparaging the heroic sacrifice. Some bereaved families preferred simple memorial services and

local war memorials. Others, including some veterans, were wearied by the war and preferred to forget it.[26] Many chose not to attend public ceremonies.

It is impossible to know how far national war commemoration actually helped to console grieving families and returned soldiers at a private and individual level. It probably made bereavement more bearable for many, but by no means all. It was most effective for those who succeeded in structuring their private sorrow around the public concepts of patriotism, duty and sacrifice. The public rhetoric of patriotism offered them formal assurance that their loved one had not died in vain and would be remembered by the nation. Anzac Day ceremonies and War Memorials were more likely to give solace to families with unambiguous information about their loved ones' deaths and known grave sites. Public commemoration undoubtedly had least appeal to returned soldiers like Fred Farrell who suffered shell shock after the deaths of many of his closest friends at the battle of Fromelles; and saw those deaths as a futile sacrifice which left him unable to speak about the war for many years.[27] It is also difficult to see Anzac Day rituals and the War Memorial movement giving significant help to the families of the missing. The desolate families of the 25,000 missing soldiers with no known graves probably needed support and solace most of all – but my impression is that they were least open to it because they continued to search and to doubt that their loved ones were dead. Probably large numbers of bereaved parents and widows remained in a prolonged state of chronic, silent grief.

In the face of such a massive overload of death and sorrow in just a few decades, there may have been a generational shift in emotional responses in some families. Where grief was often expressed silently and privately by bereaved parents of the Great War soldiers, some of their surviving children were more likely after the Second War to resort to denial of death as well as sorrow. The generation who grew to adulthood in the interwar years were overwhelmed by the obsessive grief of two decades: they saw countless photographs of dead soldiers on mantelpieces and they felt their parents' omnipresent grief, even if it was rarely expressed. Some of them were determined to try to forget sorrow – to grieve quickly as well as quietly.[28]

The Second World War: lost airmen, and prisoners of war in the Asia-Pacific

Attitudes and emotions to death and grieving were moulded not by one terrible war, but the cumulative impact of two, during little more than 30 years. We saw earlier that the Great War contributed significantly to the profound cultural shift towards 'death denial'. The Second World War powerfully reinforced the First in discouraging open and expressive individual sorrow.

The Second World War was a devastating global contest which resulted in a death toll of more than 60 million people. The Australian casualties were lower in the Second World War than the First, but were still horrific and left most Australian families mourning relatives or close friends. At least 27,000 were killed in action, or died of wounds or as prisoners of war, out of a population of seven million. Most people accepted the Second World War with resignation as a necessity and without the illusions of 1914, and support grew rather than declined, especially as the physical threat was now much closer to Australia. In the Second World War many servicemen died in circumstances which had little parallel in the earlier war and which could be just as dreadful. Over 10,000 (38 per cent) of those killed were airmen, and more than 8000 (30 per cent) died in captivity as prisoners of war.[29] Over two-thirds of fatalities came in these two categories. A higher proportion of airmen were killed than of the

other armed services, and the manner of their death and its uncertainty brought a special kind of pain to their relatives.

The grief of large numbers of families who mourned the loss of airmen was often more prolonged and traumatic because of the terrible circumstances of such deaths. The airmen themselves also had to deal with the likely prospect of their own and their mates' deaths in potentially grim manner. In September 1942 a traumatic Bremen raid led airman Errol Crapp to write a deeply thoughtful letter to his parents in Singleton, New South Wales, acknowledging the likelihood of his early death:

> I've never been so scared in my life. Now I realise that there is not much between life and death in this racket, and we have to face the fact that Jerry might get us at any minute on these excursions. So, without being morbid, I want to say that if he does get us, please don't grieve. Our troubles are over; and don't feel bitter, because hundreds of families have made bigger sacrifices … Please don't consider me morbid – I am merely facing facts.[30]

Crapp was killed after only six months in active operations. In asking his parents not to grieve, he was offering the same advice as that given by Anzacs in the Great War to their own families. This sentiment was commonly expressed in the Second World War, often closely followed by that other saying, 'don't feel bitter, because hundreds of families have made bigger sacrifices.' This was the argument that individual sorrow was far outweighed by overwhelming mass grief. It was calculated to encourage families to repress their sorrow in the supposed interest of patriotism and fortitude, though it was not necessarily guaranteed to help them cope with their own personal anguish.

The Keith Murdoch Sound Archive at the Australian War Memorial contains interviews with many aircrew conducted between 1988 and 1991, reflecting on the way they dealt with the deaths of their mates. Laurie Howson remarked: 'You get hardened that quick … You sort of control yourself at the time and you're frightened some others will see you break down.' Each airman had to toughen himself against expectation that he might die at any time, which made acting and responding in wartime different from peacetime. The prospect of one's own imminent death left little spare energy for mourning.[31] There was little serious talk amongst airmen about death, except perhaps to say 'Poor old Joe' or 'let's have another drink'. The testimony of Harold Wright of Bomber Command was also illuminating. Wright believed the majority of air crew suppressed their sorrow when their friends or crew were shot down: 'But it was always there in the back of your mind. You bottled it up, but otherwise, in my opinion, you'd go mad.' He was devastated when his own crew was shot down while he was grounded in hospital; he and a friend were 'both bawling over the phone' in response to the news: 'I always maintain it was the old booze that kept me sane … After the war it took me seven years to get rid of the nightmares.'[32]

We have little information about the manner in which bereaved families of airmen dealt with their grief in the years that followed. However, Joy Damousi's moving interviews with war widows described in her excellent book, *Living with the Aftermath*, offer one sad insight. Shirley Tilley was widowed in April 1944 when her airman husband, Arthur Thornton, was reported missing, presumed dead, only two years after their wedding. In the interview she regretted that she had never been able to mourn him adequately: 'All my life I have not been able to grieve properly because I never saw him dead and I don't know how he died.' After the war her family encouraged her to end her mourning and move on to a new life. When she married

again her mother even destroyed her first husband's letters and photographs to persuade Shirley to relinquish memories of her airman husband. But these efforts to repress both her grief and her memories had the opposite effect and 'her life-long grief never moved towards resolution'.[33]

These stories can stand for those of the numerous other parents who continued to search for missing airmen sons, sometimes long after hope might have been expected to evaporate. These were bereaved parents sometimes trapped in a state of perpetual mourning with no certainty of death; with terrible images in their minds of the various possible alternatives to death and the dreadful form that death itself might take. Their uncertainty was reinforced by the fact that the RAAF has continued to search for the missing – lost aircraft are still discovered and the remains of the crew identified and buried.

Some families did learn eventually that their sons had died as prisoners of war, many from starvation or disease; others from years of terrible neglect, brutality and slave labour. These families had suffered intensely for months or years and the final notice of death would rarely provide them with information to ease their fears. Returned prisoners generally chose not to talk about the brutality and degradation they had endured. Most were silent about their ordeal for years or forever. Dick Braithwaite thought that people would not believe him if he told them how 'all my friends had starved to death'. His wife confirmed that Dick would not talk about it and most people knew nothing of his past until the 1980s. Returned prisoners hid the truth not just for themselves, but also to spare relatives of the dead soldiers these terrible stories. Hank Nelson describes the consequence as 'a wall of almost wilful incomprehension'. But in the long term this denial of reality was bound to fail. Many were victims of what is now known as traumatic stress and their bodies and minds were unable to maintain the deceit. Nine hundred former prisoners died before 1960, still relatively young, after years of nightmares, depression, inability to work, and extensive personal and psychological problems.[34]

Half a century later Australia has begun to accept the prisoners of war of the Japanese as heroes, thanks to historians like Hank Nelson and Michael McKernan. By ignoring or denying the deaths and suffering of the prisoners of war of the Japanese for several decades the community was reinforcing the denial of death and grieving which commenced with the Great War. The silences of returned servicemen denied the monstrous impact of the two wars and powerfully affected the community's perceptions of death itself and the need to grieve. By trying to ignore death they also blocked grief.

The Second World War and the suppression of sorrow

Two dominant themes are revealed in the condolence letters written to bereaved families during and after the Second World War. The first is the continuity of the denial response and its increasing strength. The injunction 'not to grieve' was repeated time and again in the majority of letters – more often than in condolence letters of the Great War. The most extreme statement of this advice was: 'Try not to grieve too much – as this only leads to illness.'[35] Psychologists today usually offer the opposite advice, that it can be helpful for bereaved people to express their sorrow openly since otherwise their health may suffer.

Many condolence letter writers in the 1940s – like Henry Higgins in the earlier war – encouraged the bereaved not to grieve because their fallen heroes would wish them to follow their example in being strong and stoical. As E Harrison of Darling Point

wrote to Jim Gordon, the poet, on his son's death in 1945, 'We can only do what the boys would have us do and that is keep our chins up'.[36] Just as men at war were expected to be strong and silent, keeping their sadness inside, so their bereaved families owed it to their sons to follow their example. To some extent this involved a gendered shift, as many mourning women who followed this injunction brought their more open and emotional female patterns of grieving into line with those of men.

This rejection of expressive sorrow is marked in many condolence letters of the Second World War, but most of all in working class letters, where the impact is stark. Many writers regretted that they had no words to express their feelings of sorrow. This was partly due to the decline of a Christian language of solace, drawn from the bible and prayer book, and from popular hymns. It was compounded in the case of working class families by a more limited vocabulary, a less fluent control of appropriate language, and an unwillingness to articulate emotions in words. It is clearly illustrated in the condolence letters sent to the parents of Private Laurie Robbins of Clunes, Victoria, on his death in 1943. Laurie's brother Charlie, also on active service, wrote: 'I do not no [sic] what to put in the letter but you will no [sic] how I feel about poor Laurie - I can not write any more so this letter leaves me very worried.' He managed to say that his brother's death was a shock and he was grieved, but went on to write about the weather and the mail.[37]

There was a perceived need to avoid expressions of sorrow and a belief that the period of grieving should be brief and was best observed in silence. By the 1940s the language of denial seems to have been widespread among the secular working classes in response to death. Many writers just sent black-bordered Valentine condolence cards to the Robbins family, instead of writing personal letters. The terse handwritten message inside one such card stated merely, 'Chin up Mena & Roy. Try and look on the Bright side'.[38]

The second major feature of these Second World War condolence letters is their transmission of a strong sense of a whole community in mourning, suffering a collective sacrifice. Consolation letters to Private Laurie Robbins' parents in 1943 placed considerable emphasis on the universal and collective nature of war deaths – with the corollary that individual grief must be borne silently with courage. James Cook wrote that many other parents shared their sorrow on the deaths of the many Australian heroes. Several friends conceded that their son's death was indeed a great blow, but 'still it is something which we *all* must suffer'. Many letters mentioned at least one other war death, with a frequent refrain that 'so many are suffering in the same way'.[39] Such letters were intended to show that others could empathise, and at best might be genuinely supportive. But there was a negative aspect to this kind of consolation which could be hurtful. The constant refrain that so many others suffered the same loss could trivialise the suffering of the particular family and the individual.

The revival of expressive sorrow since the 1980s

The media's increasing level of concern from the late 1970s with the '50-year conspiracy of unhealthy silence'[40] signalled the start of a reaction against the dominant culture of death denial. The reasons for this second major shift in cultural responses and attitudes to death and grief in the 20th century are complex and beyond the scope of this essay. More than 30 years had elapsed since the end of the Second World War and another generation had grown up free from the constraints on death imposed by war. Waves of migration from southern Europe and Asia encouraged a growing diversity in death rituals and behaviour, which helped to spread

the view that open expression of grief could be healing. The strong reaction against the over-medicalisation of death in hospitals also played a vital part, reinforced by the heart-breaking case studies presented to the press by the euthanasia movement. From the 1980s the HIV/AIDs epidemic and the palliative care movement added to the forces demanding death with dignity, and moving cancer narratives sometimes showed how it might be achieved.

Moreover, broader changes in the cultural, intellectual and social climate from the 1970s encouraged more liberal attitudes and greater freedom of emotional expression. A number of influences, sometimes interrelated, together produced a climate conducive to a cultural shift in ideas, attitudes and modes of behaviour. These included a new receptiveness to more permissive ideas and attitudes emanating from the United States, especially greater freedom of self-expression and a culture of protest. The dominant culture was increasingly questioned as Australians became more affluent and more open to American and European influences through travel. New universities had opened from the 1960s to cater to the needs of the baby boom generation which was less inclined to observe society's traditional sanctions.[41]

The change in the emotional culture relating to death and grief was one important facet of this broader transition. The emotional norms of society had shifted after the Great War, and fifty years or so later they had begun to change again to a more openly expressive form. Dr Elisabeth Kübler-Ross, the eminent Swiss-American psychiatrist, made an important contribution to this second cultural shift. Her popular 1969 book, *On Death and Dying*, encouraged a reaction against the medicalisation of death.[42] Her moving stories about the experiences of the dying had a powerful impact on people across the world, accustomed to the silences surrounding death. Western society was evidently ready to hear her message that it was beneficial to the dying and to the bereaved to express their feelings openly; and that the process of grieving was normal. Kübler-Ross succeeded brilliantly in popularising psychological ideas on death and bereavement through the mass media. The power, clarity and emotional appeal of her work took advantage of changes in the cultural climate to alter both medical and popular responses to death and bereavement. Kübler-Ross undertook world tours to spread her gospel: she was a charismatic speaker with a mission. She made several successful tours around Australia from the late 1970s to the 1990s, explaining to large audiences why western societies handled death and grief so badly and how that might be changed.

Kübler-Ross' success depended on the sympathetic cultural climate and the vital preparatory work of other psychologists. The shift from the 1980s towards a more open and expressive mode of grieving was encouraged by some members of the middle class caring professions, especially by psychologists and psychiatrists. The latter played an important role as they constructed theories about grief, provided therapy for individuals unable to cope with complex grief, and advised society how best to deal with it. Between 1918 and the 1970s psychologists had generally advised that it was helpful for bereaved people to express grief openly, but they tended to place more emphasis than they do today on the need for the bereaved to sever bonds with the deceased. The goal for the earlier theorists was ideally to cease grieving, break ties with the past, and develop new relationships.

During the last 20 years psychologists have modified earlier ideas in response to the new cultural climate and to new research, emphasising flexibility and the diversity of human responses to sorrow. In particular, they argue that 'acceptance' of death had

often been interpreted too rigidly to mean 'closure' or detachment from the dead person. Psychologists today suggest that a complex multidimensional approach is needed to grief – it is not a simple, universal process with a succession of fixed stages. Manifestations of grief vary in different cultures, between different individuals, and over time.[43]

Beverley Raphael has played a highly significant personal role in encouraging greater public acceptance of open expressions of grief in response to disasters, and emphasised the value of bereavement counselling. Press reports of earlier disasters such as the 1939 Black Friday bushfires in Victoria focused on the deaths of victims and the heroism of survivors and rescuers, rather than on the public expression of sorrow and the private grief of bereaved families. The changed response to disasters can be seen clearly from the mid 1970s. In January 1977 at the rail disaster in Granville, New South Wales, the emphasis changed to concerns about public expressions of sorrow and the need for grief counselling for victims and the bereaved. It marked a turning-point in Australian responses to public disasters.[44]

Such changes did not take place in isolation, as similar shifts were happening in other western societies, including Britain and the United States, which were a few years ahead in timing. The so-called 'death awareness' movement which started in America encouraged the creation of self-help groups for bereaved people who suffered similar family losses and recognised the value of sharing these experiences. These groups were sometimes international, and included Australian branches of Compassionate Friends and Solace for widowed people.[45]

Compassionate self-help groups were reinforced by the publication of numerous narratives about death and grief from the 1970s. As Allan Kellehear notes: 'a new groundswell of academic, professional, and popular literature in the 1970s, began to rebuild and restore the fallen, disempowered, and lonely figure of the dying person.'[46] Many such narratives have been written in the last 30 years by people who have recounted their battles with cancer – or other diseases – and survived. Others, like those by Anne Summers and Bill Hayden, have described the deaths of loved ones and their own experiences of grieving.[47] For the bereaved, such narratives of dying and grieving had a special value. They brought these taboo subjects out into the open and allowed people to share their varied experiences, which demonstrate that grief is normal, though complex and distressing.

The changing emotional culture of grieving can also be seen in the remarkable recent enthusiasm for the commemoration of Anzac Day. It seemed in decline thirty years ago in 1975 with the passing of most original Anzacs, but since the 1980s the climate has altered. Public discussion of death and emotional expressions of grief in war and disasters have become more acceptable, even encouraged. This was illustrated by the record crowd of about 20,000 who remembered the courage and sacrifice of the Anzacs at the Gallipoli dawn service on 25 April 2005, and at commemorations across Australia. This reflects new ways of thinking about war and death and more diverse ways of expressing our sorrow.

Pat Jalland *has been a Professor of History in the Research School of Social Sciences at the Australian National University since 1997. She is the author of three books on the history of death and bereavement in Australia and Britain.* Death in the Victorian Family *won the New South Wales Premier's Prize for History in 1997. Her most recent book,* Changing Ways of Death in Twentieth-Century Australia: War, Medicine and the Funeral Business*, will be published by UNSW Press in early February 2006. Her four earlier books explored aspects of women's history, and the Irish question in British politics.*

1   *Changing Ways of Death in 20th Century Australia. War, Medicine, and the Funeral Business.* To be published by UNSW Press in February 2006.

2   See Jalland (2002). *Australian Ways of Death. A Social and Cultural History, 1840-1918*, Oxford University Press, Melbourne; Jalland (1998). *Death in the Victorian Family*, OUP, Oxford.

3   Smith, FB (1997). 'The First Health transition in Australia, 1880-1910' in GW Jones, RM Douglas, JC Caldwell & RM D'Souza (eds). *The Continuing Demographic Transition*, Oxford University Press, Oxford: 31.

4   Freud, Sigmund (1985). 'Our attitude towards death', in *Thoughts for the Times on War and Death, 1915*, in *Civilisation, Society and Religion*, Pelican Freud Library, vol12, Penguin, Harmondsworth.

5   Raphael, Beverley (1984). *The Anatomy of Bereavement: A Handbook for the Caring Professions*, Unwin Hyman, London, Bowlby papers, 1975-76, PP/BOW/J9/153, box 71, Wellcome Institute, London.

6   Gorer, Geoffrey (1965). *Death, Grief and Mourning*, Cresset Press, London.

7   Park, Ruth (1998). *Fishing in the Styx* (1993) in Joy Hooton (ed), *Australian Lives. An Oxford Anthology*, OUP, Melbourne: 21-4. See also Ruth Park, oral testimony, Mitchell Library, OH 120/1.

8   *ibid.*

9   Inglis, Ken (1998). *Sacred Places: War Memorials in the Australian Landscape*, Miegunyah Press, Melbourne: 91-2, 97.

10 Lindemann, E (1944). 'The symptomatology and management of acute grief', *American Journal of Psychiatry*, 101: 141-48.

11 Sgt Jack Baillie to Nell, 20 July, 30 Sept 1917, 16 June 1918, Australian War Memorial (AWM), PR00621.

12 Malcolm Ferguson to father, 26 Oct 1917, nd, 30 Oct 1917, AWM PR00005, folders 4, 2.

13 Malcolm Ferguson to father, 23 Aug, 16 Sept 1918, *ibid.*, folder 3; Norman Ferguson to father, 25 Aug 1918, *ibid.*, folders 1-2.

14 Inglis, Ken (1998) in John Lack (ed), *Anzac Remembered. Selected Writings of KS Inglis,* The History Department, Melbourne University, Melbourne: 117, 135.

15 See eg *Canberra Times*, 24 April 2004.

16 Thomson, Alistair (1994). *Anzac Memories: Living with the Legend*, OUP, Melbourne: 203-205.

17 Jalland (2002) *op cit*: 312-4, 317-20.
18 Sgt Jack Baillie to Nell, 30 Sept 1917, AWM PR00621.
19 Printed card on death of Reginald Gluyas, AWM PR83/179.
20 Palmer, Nettie (1931). *Henry Bournes Higgins. A Memoir*, Geo C Haines, London: 233; HB Higgins to Nettie Palmer, 30 Jan 1917, HB Higgins Papers I, 1841-1929, National Library of Australia [NLA], MS 1057/1/269.
21 Higgins to Felix Frankfurter, 14 Dec 1917, 3 Feb 1918, 29 Mar 1923, Higgins Papers II, NLA MS 2525; Palmer (1931) *op cit*: 234; Higgins, elegies to his son, Easter, New Year, July 1917, *ibid*; Higgins to Nettie Palmer, 24 Aug 1917, Higgins Papers I, NLA MS 1057/1/284.
22 See eg CM Parkes (1991). *Bereavement*, Penguin, Harmondsworth, Middlesex: 130-42; Raphael (1984) *op cit*: 60.
23 Parkes, CM (2002). 'A Historical Overview of the Scientific Study of Bereavement' in MS Stroebe, RO Hansson, W Stroebe & H Schut (eds), *Handbook of Bereavement Research. Consequences, Coping and Care*, American Psychological Association, Washington: 35.
24 See PC Rosenblatt, 'A Social Constructionist Perspective on Cultural Differences in Grief', in Stroebe *et al* (2002) *ibid*: 291.
25 Inglis (1998) *op cit*: 223, 280-81.
26 Thomson (1994) *op cit*: 130.
27 *Ibid*: 13, 94-9.
28 For development of this argument, see Jalland (2005). 'Katharine Susannah Prichard confronts Death and Bereavement', *History Australia*, 2, 2.
29 Beaumont, Joan (ed) (1996). *Australia's War 1939-45*, Allen & Unwin, Sydney: xx-xxiii.
30 Errol Crapp to family, 16 Sept 1942, Errol Crapp file, AWM, PR00144. See also Crapp diary, 20 Sep. 1942, 28 Jan, 17 Feb, 3 March 1943, *ibid*.
31 Laurie Howson, Keith Murdoch Sound Archive, AWM, S00501. See also Alex Lochhead, *ibid*, S00502.
32 Harold Wright, *ibid*, S00582.
33 Damousi, Joy (2001). *Living with the Aftermath: Trauma, Nostalgia and Grief in Post-War Australia*, CUP, Cambridge: 72-80.
34 Nelson, Hank (2001). *Prisoners of War*, *Australians under Nippon*, ABC Books, Sydney: 206-17; McKernan, Michael (2001). *This War Never Ends*, *The Pain of Separation and Return*, UQP, Brisbane.
35 René to Lois Atock, Condolence letters on death of Private Kenneth Atock, 1941, AWM 3DRL/6372.
36 E Harrison to Jim Gordon, 1945, James William Gordon Papers, Mitchell Library, MSS 1085.
37 Charlie Robbins to parents, 26 Aug 1943, Robbins file, SLV PA 97/36, State Library of Victoria.
38 Condolences to Roy & Mena Robbins, Aug 1943, Robbins file, *ibid*.
39 *Ibid*.
40 *Age*, 20 July 1979.
41 See eg John Rickard (1988). *Australia*, *A Cultural History*, Longman Cheshire, Melbourne: 238-47, 268-70.
42 Kübler-Ross, Elisabeth (1969). *On Death and Dying*, Macmillan, New York.
43 Stroebe, Margaret S (2002). 'Paving the way: from early attachment theory to contemporary bereavement research, *Mortality*, 7, 2: 127-38.
44 Raphael (1984) *op cit*: 324-31.
45 Raphael, Beverley (2000). 'Grief and Loss in Australian Society' in Allan Kellehear (ed), *Death and Dying in Australia*, OUP, Melbourne: 121-22.
46 Kellehear, Allan (1999). *Health Promoting Palliative Care*, OUP, Melbourne: 175.
47 Hayden, Bill (1996). *Hayden. An Autobiography*, Angus & Robertson, Sydney: 113-118; Anne Summers (1999). *Ducks in the Pond: An Autobiography 1945-1976*, Penguin, Melbourne: 390-411.

Wartime Memory and Patterns of Mourning in Australia
Joy Damousi

In *The Public Emotions: From Mourning to Hope*, Graham Little exhorts his readers to learn about the importance of 'emotional literacy, about becoming better at recognising what's happening emotionally both to us personally and in the public world around us'.[1] In exploring the place of emotions in contemporary society, Little articulates two phenomena which, I argue, characterise the late twentieth century in relation to grieving. First, the recognition of the need to express one's emotions, acknowledge feelings, and that it is desirable to do so, has been articulated more fully in recent times. 'Emotional literacy', he argues, 'requires us to reverse the habit of avoiding, and voiding our feelings...and begin using them to enlarge our sense of who we are and what we do'.[2] Second, that the relationship between the public and private emotions has become blurred as, in his words, the 'boundaries of public and private affairs [have been] tested in both directions'.[3]

In this paper, I suggest that these developments have evolved distinctively throughout the late twentieth century. Although these mirror the public and open expression of death during the nineteenth century, the more recent phenomenon differs in that it has shed the rituals and ceremony of the earlier period as society has become more secularised in its cultural practices. I consider these historical shifts by exploring the experiences of Australian war widows and their patterns of grieving. By using oral history and examining how widows have made personal meaning through their memories, I have attempted to consider these oral testimonies not as markers of 'facts',[4] but as ways in which women have understood their identity as 'war widows' through their memories and how they have dealt with grief in particular ways.

The use of these sources raises the question of how oral testimonies should be read. Oral history has been celebrated for allowing marginalised groups to find a voice. It has been seen as a means of retrieving those experiences of women that are eliminated from official documentation.[5] The enterprise of oral history has often been conflated with women's history and the two have informed each other in retrieving women's untold stories.[6] But it offers more than a mere supplementation of the historical record. Historians have long claimed that its value lies not in 'revealing facts and events',[7] but rather, in showing how the 'facts are in the memory itself'.[8]

Each oral testimony conveys only one of the many possible ways in which we can tell our life history.[9] In oral testimonies we make meaning from our experiences, but that meaning is under constant revision.[10] What is remembered is a highly selective process, as experience is organised to contextualise a sense of oneself.[11] Memory is not simply a selective, interpretive exercise of what we remember.[12] It also involves a method of forgetting, of disavowal of that which is undesirable.[13] We remake our past by remembering and forgetting, but it is not simply events which we recall, for the past we recreate becomes a repository of our defences, emotions, desires and fantasies.[14] The 'ambivalences, absences and inconsistencies' in oral accounts draw the listener to these aspects of the 'unexpressed story'.[15]

In attempting to address these issues my concern is threefold. First, I explore how widows internalised and absorbed the traumas of their husbands' war experience through an examination of their memories of war, marriage and their husbands' deaths. Trauma, grief and loss are not experienced as frozen, timeless emotional

states. These emotions have a history, and are ever-changing as they are rewritten from the perspective of the present.

A second aim is to reflect on how attitudes towards, and experiences of, death and grieving have changed from the mid to the late twentieth century. These two themes are related, for the ways that widows dealt with loss, grief and domestic trauma in post-war Australia were predicated, to some extent, on the culturally acceptable ways they could publicly express those emotions. The interviews suggest a significant shift from a mid twentieth century sense that grieving was not spoken of in the community and restrained by obligation and duty, to a late twentieth century consensus that we can articulate grief, that it is desirable and necessary to do so and that we ***need*** to grieve.[16] They articulate a grief in the late twentieth century that did not find expression earlier in their lives.

The memories of war widows confirmed that a denial of death informed the experiences of widows during the immediate post-war period. Many widows who lost their husbands in war believed that their mourning and grief was not allowed full expression. I argue that there has been a discernible shift at the end of the twentieth century towards openness, and a return to a nineteenth century frankness in mourning and grief.

Another dimension of this historical shift is the increasingly secular nature of Australian society. The influence of institutional religion has diminished as more Australians have chosen not to follow the rituals of denominational religion.[17] While there may be a more open expression of grief, there has been no revival of the heavily ritualised practices of the nineteenth century which characterised public mourning.[18] Nineteenth century practices which have been relinquished by death denying generations cannot be revived because the religious underpinnings which sustained these rituals have also disappeared. In recent years, the collapse of the distinction between the public and the private in the expression of loss and grief - most notably reflected in public testimonies - has characterised contemporary expressions of grief.

Third, these oral testimonies challenge a sharp periodisation of the war and post-war period. In many historical accounts of the Second World War, the lasting psychological impact of war on wives and children is only beginning to emerge. The stereotype of the post-war period as an idyllic time when Australians became entrenched in the suburbs is challenged dramatically by these interviews. While Australian studies have concentrated on the experiences of returned soldiers, the trauma others endured remains unexamined. Accounts of the home front have concentrated attention on protesters or domestic responses to particular wars, and on women's participation in protest movements or home front activities, such as munitions industries. This emphasis on 'public' rather than 'private' events continues to dominate the ways in which narratives of war are written. The memoirs take the story into the private, domestic realm, offering another perspective to collective, national memories.[19] In attempting to 'publicise rather than privatise' these memories, this work attempts to move beyond a single version of war experience.[20]

One of the striking themes that emerges from this oral material is how the psychological impact of war remains well after the event, not just for soldiers, but for those around them who also have to absorb the legacy of war. This has been the focus of clinical studies, but few historians have contemplated the implications of this for understanding historical change.[21] Stephen Garton, Judith Allen and Joan

Beaumont have discussed the phenomenon, but it is deserving of closer interrogation.[22] I have considered the ways that these oral testimonies can make us reassess our understanding of the impact of war, and how its history has been written. The schematic and stereotyped periodisation between war and post-war periods, and the tendency to prioritise public sacrifices over private griefs, has denied war widows a legitimate voice and presence in post-war narratives. This study is also a part of the ongoing reassessment by historians of the post-war period as one which was unstable, uncertain and permeated by anxieties.[23]

The use of oral narratives marks this research in distinctive ways. Oral history has been widely used in Australian history across a range of themes and topics.[24] In Australia there have been surprisingly few oral history accounts of the spouses of servicemen.[25] Alistair Thomson has used oral history to offer new perspectives on the impact of the Anzac mythology on the memories of ex-soldiers after the First World War.[26] In other oral histories of women and war, grief and loss have not been the focus of the analysis of the interviews, nor of how these aspects shaped women's subjectivity.[27] These themes relate how mourning is linked to the shifting parameters of memory.[28] The intersection between the past and the present through memory is at the heart of understanding the complex relationship between wartime loss and the expression of grief during what turned out for some to be the trauma of peacetime.

The process of grieving is multi-layered.[29] A complicating factor which disrupts the easy binary between melancholia and mourning is that the 'self' is transformed over time, for subjectivity is not an ahistoric, unchanging entity.[30] War widows, for instance, were often reluctant to assume a different identity or to imagine 'the invention of new symbolic worlds and selves'.[31] But in other respects, many of them were rebuilding a new identity, as *war widows*.

In this essay, I have focused on the experience of Korean and Vietnam war widows to capture the evocative force which drives their personal narratives, and to read the silences and gaps which are suggestive of psychological expression. These stories are told through sites of grief other than public memorials and monuments, which have been privileged by historians as representing *the* iconography of loss.[32] Even when private mourning has been considered, it has been done in relation to public commemoration and collective histories, rather than in its own terms.[33]

The Korean War

'No other democracy' asserted the *Sydney Morning Herald* in July 1950, as Australian troops reached Korea, 'has a more direct concern in blunting the thrust of Communist aggression in Asia'.[34] The importance of the war was in no doubt. 'Another world war might break out almost any day'[35] predicted the press, but this perceived importance of the Korean War at the time was lost over the following fifty years. In 1950, so close to the Second World War, war was fresh in people's minds, and the threat to the 'free world' seemed to be real once more. American military intervention, it was reported, was necessary in order to 'hold back Russia from an eventual attempt to seize world control' as the United States faced 'the greatest risk in its history, the risk that the Communists might strike elsewhere while the nation's strength is at its lowest point as a result of the Korean war'.[36] It was Australia's duty to prepare rapidly and 'to assume the degree of responsibility held by a country so situated as Australia...forced by geography to keep a watchful eye on happenings in Asia'.[37] The burden was a heavy one and time was at a premium: 'We are faced with a grave national emergency, and

it can only be met by a united national effort'.[38] The Korean War was the last in which a wholly volunteer Australian military force saw active service.[39]

Olwyn Green lost her husband, Charlie, in the Korean War. Married in January 1943, he returned from the Second World War in 1945. After attempting a series of 'very ordinary jobs', he decided to go back into the army. But, Green claimed, this was all he had been trained to do. The army had 'sent him in a direction [which] was inconceivable...and leaving him stranded as it were...with nowhere really to go... All he'd been trained for [was] war and he was exceptionally good at it.' When it was suggested that he go back into the Army, he joined up for Korea. Green is unusual amongst war widows because she published a personal account of her grief, in her autobiography, *The Name's Still Charlie*. She was inspired to do so when his battalion decided to establish a memorial to him. In her book she documents the way in which she came to terms with Charles Green's death and how she dealt with the memorial built in his name. She reflects on how she idealised him and how she moved through this experience. It is a telling comment on the lack of public expression of such emotions within Australia that it took Green thirty years to allow herself to express this grief openly. Green recalled that because her husband Charlie was killed in the Korean War, there was little community sympathy for her. When he died in 1950, she lived in Grafton, which was an advantage, as it turned out, because,

> If I hadn't been in Grafton where I knew people I think it would have been a thousand times worse because there wasn't much sympathy for the Korean War. Very few people knew anything about it - why they were there ... a lot of people would have thought anybody who went to the Korean War was a fool and that doesn't help. That wouldn't help anybody who lost someone in Korea or Vietnam.[40]

The humiliation that came with the public erasure of the war was carried by its widows. Green conflates the present forgetting of the Korean War with the past, as she remembers that the war did not attract support, although other sources showed that in 1950 support for the war was strong. Later forgetting of the Korean War, she believed, reduced her and others to the status of ordinary widows, and this took away their sense of national service. A lack of recognition undermined their own sacrifices, and thus they remembered the war as unpopular.

As her husband was killed in Korea, Olwyn Green experienced the loss in a different way from those who lost husbands during the Second World War. Green reflected on the earlier generation, and how the Second World War meant something in particular for them, which her generation did not share:

> There was no real questioning of the rights of the [Second World] war... it was a cause and they had done the right thing...That's their pride in what they've done... I don't think it would have done them any good to have had... what their sons had done questioned and dishonoured. I don't think that would have helped them one bit... It would then have been [considered] a total and absolute waste. How do you adjust to that...[41]

She married her husband Charlie in January 1943 while he was serving in the Second World War. He returned around Christmas in 1945, and she was shocked at his condition 'because he was so yellow and so thin... The image I first had of him was this dashing man... and here was this [man] so hollow and so yellow and so thin, I felt I didn't know him.' She described learning of his death (1950):

There were no words to describe that... that will never ever leave me. It's brutal beyond belief... It's physical. I can only describe it as so physical. So physical that... the body does [go] through the same feeling every time it's triggered... you have the same shock. It lessens but there's the same shock... the whole mind and body and soul.

Nonetheless, she understood that women became social outcasts in widowhood, because culturally, 'you were 'immediately suspect... I sense[d] [that] very quickly'. The letters she had collected were burnt, an act which she believed was necessary as a way of moving on from the death of her husband. 'I burnt all except a few. I'd say a mixture of "I'm going... to get on with my life. I'm going to wipe out the past and I'm going to get on with it. I can't cope with all this...Too devastating for me to understand".' Her view encapsulates the attitude of the immediate post-war period towards mourning and grief.

Green was fortunate to have her personal story memorialised where there was an explicit and public recognition of her husband's deeds. In 1980, a memorial was built in his honour at Lismore by 41 Battalion, the battalion in which he served. A number of officers had been especially interested in Charles Green's range of service across three branches of the army, and they believed this 'represented... a man who had achieved a significant, if not unique, range of service'. For those who memorialised him, Charles Green bridged 'those worrisome distinctions... between enlisted, part-time and regular soldiers. We wanted to generate the idea of unity in the army'.[42]

When Green was consulted about the building of the memorial, it jolted her. The memories were rekindled, after years of retreating from his memory. She had not remarried: 'it's hard to explain because it wasn't that I didn't want to... I suffered from terminal guilt... and my assessment of my want of understanding... of not endeavouring to understand more'.

Nonetheless, despite an attempt to deny death in the early stages, her identity remains tied to her husband's: 'We all in our own way foster that - and I wouldn't want it otherwise - foster the heroic warrior image and the woman who loses the heroic warrior takes on some of that heroism herself.' Part of this, and the status associated with being a war widow, was related to the sacrificial death'. It was important for her to keep the memory of her husband alive, in large part because there had been such little recognition.

Well it's making amends for the lack of recognition that the public is not prepared to give, that the government was not ready to give because what he did should have been acknowledged and there are a whole lot of people who have written why it wasn't and I just don't want that life to have been lost without people knowing what he did and what kind of person he was. If I got the ability to correct [this] I will.

Green was unusual among the women in this study in that she eventually sought counselling for her grief. Being told by her counsellor that she had idealised her husband rather than remembered the real man with all his faults, she asks:

The real Charlie?

Jolted, I recognised something was at odds. There's the unchanging, handsome hero Charlie in my memory. But in my nightmares there's the rejecting, unreachable Charlie.

Why?

> Did I really know him after all? I didn't know Charlie of the farm, or Charlie of the battlefields. When he came home... at the end of 1945... He kept silent about his out-of-life-years, grappled with the future, as a civilian, till hope gave out...[43]

In a final letter written to her dead husband, Green attempted to come to some closure and reconciliation with memory, and the place of the past in the present is replayed through dreams:

> There's no point in questioning or regretting the past. It's gone... Our marriage was a lifetime... Lately, I've stopped having the bad dream that you were so far away and couldn't get in touch with me. I hated that dream I had over and over again. I could never understand it... [I had another] very different dream. You came close to me.[44]

In this reconciliation, Charlie remained an anchor and a part of her emotional life. Therefore, she has not looked elsewhere for it: 'I worked and saved to fill in the years... I feel content, and... rich, even though I've never filled the gap you left. It wasn't an empty gap. I've always had your love to sustain me... You are the finest human being I have ever known.[45] She lamented the hopes that did not come to fruition, that were not realised: 'It's what happened to his dreams that I have to live with. That's why, whenever I drive through the country, I can't forget, and I can't heal. I see Charlie's dream, a continuous frieze...'[46]

Green dwelt on missed opportunities, another life and chances unrealised, of the 'big dreams in all those letters written during the war, when we were apart'.[47] It is significant that it took Green until 1980 to feel she could express her grief. The repression of it immediately after the event was characteristic among war widows after the both the Second World War and the Korean War.

A Vietnam widow's mourning

Paula Voltz's experience most powerfully challenges the view that has prevailed in the medical and historical literature that Australian servicemen in Vietnam experienced traumas different from those of their American counterparts. Her story illustrates how one woman coped with her widowhood and how she channelled her grief and loss into political agitation.[48]

Voltz met her future husband, Rex, in 1967, after he had been involved in a fight near the notorious Young and Jacksons Hotel in Flinders Street, Melbourne. She went to assist him and soon afterwards, they began going out together. They were engaged in 1969, the same year Rex Voltz was conscripted to go to Vietnam. He was discharged in 1970 and they were married in August of the following year. (This was her second marriage, as she had been first married in 1964, just as she turned 18. Divorce was not the norm at the time; in 1970 only twelve per cent of all marriages in Australia could be expected to end in divorce.[49] Voltz was among them, as she was going through a divorce in 1971).

On Rex's return from Vietnam, she was not aware of any untoward behaviour, because 'I was glad to see him and he was glad to be home'. The one thing she did observe was how he missed being 'over there with his mates', which was not unusual as many soldiers felt guilty about leaving without their friends.[50] He found the readjustment very difficult, and she made the point reiterated by others, that 'they don't get debriefed or anything for service men and women have to fit back into society...even though Vietnam was an undeclared war, it was [a] war zone, a combat

zone'.[51] There was enormous strain in being taken from the battlefields of Vietnam after twelve months and placed directly into civilian society, which had no understanding or appreciation of the experiences. Such a dramatic transition 'left the veteran physically back home but still psychologically in Vietnam'.[52]

Rex Voltz found readjustment virtually impossible, though he may not have been representative of the average veteran. Even by the late 1960s there was not a supportive climate for open grieving. Voltz had become violent and aggressive in ways which were inexplicable to his wife, and to himself:

> He'd sort of have these uncontrolled rages. And he didn't know why and I didn't know why. And I didn't know there was anything wrong with him. I didn't know anything about Vietnam Veterans or toxic chemicals or anything. Neither did he. I think we were just both unprepared for it... The Vietnam veterans basically looked very healthy... but it was inside the head that's where the problems were.

Voltz also saw changes in other aspects of her husband's behaviour. 'Before he went away [after he had a few drinks]... he was always very jovial very happy kind of guy. But now when he went to a pub he got really nasty if he was drinking spirits. It changed his whole personality'. He also became more violent towards her: 'The first time he hit me I turned around and said to him that had better be the first and last time but it wasn't... I think it was about nine times we broke up and went back together... I guess you keep on hoping.' Like other veterans, his nightmares, outbursts and violence became a part of wrestling with his wartime experience: [53] 'He'd have nightmares where he'd all of a sudden grab you around the neck and fighting for your life or else he would be reaching over for his rifle, which of course was not there. He had many suicide attempts.'

Studies of the wives of Vietnam veterans, like Voltz, show a 'pattern of secondary traumatisation, where those in contact with a trauma victim themselves experience the effects of the trauma as it is re-lived'.[54] Unable to witness this trauma any longer, Voltz took her son and moved 'into a unit on my own just to get a bit of space and try and see if it helped...but in his uncontrollable rage he had to find out where I was.' Voltz was adamant that it was Vietnam which created these conditions, and her husband internalised a 'violence that made it very hard for him to live with and for myself to live with.'[55] He was then placed into psychiatric institutions, and a number of other hospitals, until in 1985 he committed suicide. The legacy of this wartime experience also affected their children, both of whom suffered birth defects, related to the chemicals used in Vietnam. They both knew that the end would be devastating:

> He was a volcano ready to go off. At any moment, at any given time... These blokes have explosive outbursts of rage and they can't control them. Rex knew in the end and so did I what was going to happen and every time he felt like that he used to go down to the Anchorage [The Salvation Army hostel] so that the kids wouldn't see him... and that was how it was... He'd just come back the next day.

Following her husband's death, Voltz was driven by a sense of mission to improve the conditions of veterans. She channelled her grief into becoming active in the Vietnam Veterans Association (which she'd joined in 1978) and lobbying politicians. Voltz became a political activist, and joined the struggle to gain justice for Vietnam veterans as a way of working through her own experience. She wrote tirelessly to ministers and politicians, to the Department of Veterans Affairs and hospital doctors, to protest about

the lack of attention given to veterans and to pressure them into doing something about veterans' problems. She wrote to Prime Minister Malcolm Fraser and others, who claimed there were adequate services available for Vietnam veterans. Eventually crisis centres were established and through the Vietnam Veterans Association she learnt as much as she could about the effects of chemicals on the central nervous system. Her own anger and sense of loss were focused onto the activities of the Association:

> You could say I had a bee in my bonnet. But it was more than that. It was just that I was determined that no other veterans are going to go down like he did and no one else was going to be made to suffer like our family had and so I just decided to go in there and I worked night and day. Didn't matter what time it was. I went out - crisis time, I went out. Go out to the veteran's home and their families naturally and just talk to them, trying to talk the vet down you know, just listen to them.... And then you sort of make appointments and different things for him to go and see people. And also try and help his wife, girlfriend, mother whoever, understand... They always seem to have bad times late at night or early morning because that's the time overseas when... they're put on picket duty so they have trouble sleeping.[56]

She threw herself into it for six months and took home veterans who had been 'told to leave by their families'. Her children suffered, with her attention elsewhere: 'I know that working in there and going out on crisis calls meant that I was away from my kids for extended periods of time'.[57] Voltz's efforts were rewarded when she was presented with an Order of Australia for her indefatigable efforts to assist Vietnam veterans and their families. Voltz's story is a timely reminder not only of the lasting impact of the war on some veterans, but also of the consequences of their behaviour on those around them. Voltz responded to this crisis through her political activism.

The outspoken and assertive way in which Vietnam veterans began to articulate their demands for recognition coincided not only with a mood of activism and change. In the 1970s and 1980s, it was becoming more acceptable to be publicly outspoken about grief and loss. This is apparent if we consider the reportage of a public tragedy, like the Granville train disaster, which took place in NSW in 1977, and claimed 80 lives. The *Sydney Morning Herald* reported that psychiatrists were encouraging the relatives of those who perished in the accident to express their emotions and their grief. One psychiatrist was quoted as saying, '[t]hey must be encouraged if possible to talk out their grief, and cry about their loss - this is a crucial and natural way of overcoming their bereavement'. The overt, public expression of grief was in contrast to its absence in reports of earlier disasters. Such catastrophes as the Black Friday bushfires of January 1939 in Victoria; the Maitland floods in February 1955; the Voyager disaster of 1964; and even the tragedy of Cyclone Tracy at Christmas 1974, are reported devoid of the language of emotional anguish. These reports are characterised by stories of stoic heroism, and survival against tragic circumstances.[58] They reflect what Kübler-Ross identified in her 1969 study as the taboo of death and grief in contemporary culture.[59]

The shift towards a more overt expression of sorrow is evident when we consider the ways in which the anger and grief of the Vietnam veterans, as they became more vocal in their demands by the late 1980s, found public expression. This culminated in the ticker tape parade in October 1987 in Sydney, which aimed to provide veterans

with the public recognition they felt they had been denied. This event allowed them to grieve and mourn their losses openly. 'Vietnam Veterans Weep As Nation Says Thanks' read the headline of the Sydney *Sun-Herald*. Phil Holmes led the Third Cavalry Regiment in his wheelchair, the legacy of being blown up by a mine, and '[t]ears welled in his eyes behind dark glasses as he told his story' of neglect and rejection. Tim Whitelum, who lost several friends in Vietnam, 'was cheering louder than anybody else... [with] tears in his eyes'.[60] The emotionally charged procession attracted 30,000 servicemen and women and 'a crowd of more than 100,000, standing 10-deep in some places along the route'.[61] The parade to 'welcome home' veterans was, reported the *Australian*, 'also about tears'.[62]

In the memories of the wives of men who had gone to war, the men who returned were not the same men who had gone. In this experience, women suffered grief and the loss of the men they once knew. The man they had married had gone forever. Wives dealt with this in a variety of ways. Some became active in politics, others spoke of being 'battlers' in the way they perceived the struggle in their marriages. Soldiers' wives were more likely to accommodate their husbands' careers, although even the narrative of the 'soldier's wife' was not an uncritical one. The possibility of another life, unaffected by war, was an ideal which informed some of the memories of women whose husbands had returned from a war which left an indelible imprint.

Conclusion

In the immediate postwar period, the social climate was not conducive to public mourning. This was the case for returned men and their families, where there was a restraint of emotion rather than its expression. During the 1970s and beyond, there has been an increasing shift towards a recognition and greater acceptance of public expression and display of grief and loss. By the late twentieth century, with a wider acceptance of the need for men and women to grieve or examine emotions through open, public discussion, and through testimony, the silence had been fractured.

A study of war widows also challenges the sharp dichotomies which are drawn between the war and post-war period, and throw into relief the ways in which women who lived with returned men experienced and internalised a form of trauma themselves. This process of internalising trauma and feeling guilt is a powerful motif in these oral narratives. In this way, the shadows of war remain psychologically embedded and played out in post-war Australia. These accounts challenge the representations of the post-war world of the 1950s and 1960s as tranquil and harmonious. The extent of marital discord is a dominant theme in these testimonies, and women make sense of these through the coherent and all-encompassing term, 'the war'. The story was very different for women who lost their husbands at the time of war. For these women, their memories are filled with a sense of missed opportunities, of nostalgia and regret. This study insists that grief and loss have a history, defined by circumstances of time and place. An examination of these testimonies has sought to widen this understanding and recognise that emotional life is an important, and everchanging, part of our social and cultural history.

Joy Damousi *is Professor of History at the University of Melbourne. She has published widely in Australian history and her recent work has been on themes of memory, war, and the history of emotions. Her latest book is* Freud in the Antipodes: A Cultural History of Psychoanalysis in Australia *(UNSW Press, 2005).*

1   Little,Graham (1999). *The Public Emotions: From Mourning to Hope*, ABC Books, Sydney: 4.

2   *Ibid.*

3   *ibid*: 59.

4   Passerini, Luisa (1989).'Women's personal narratives: Myths, experiences and emotions', in Personal Narratives Group (ed), *Interpreting Women's Lives: feminist Theory and Personal Narratives*, Indiana University Press, Bloomington: 194.

5   See Joan Sangster (1994). 'Telling our stories: feminist debates and the use of oral history', in *Women's History Review*, 3, 1: 5-28.

6   Leydesdroff, Selma (1991). 'Gender and the categories of experienced history', in Shirley Dex (ed) *Life and Work History Analyses: Qualitative and Quantitative Developments*, Routledge, London: 180-181.

7   Passerini (1989) *op cit*.

8   Portelli, Alessandro (1991). 'The death of Luigi Trastulli: memory and the event', in Alessandro Portelli, *The Death of Luigi and Other Stories: Form and Meaning in Oral History*, State University of New York, Albany: 26.

9   Hong, Emily (1997). 'Getting to the source: striking lives oral history and the politics of memory', *Journal of Women's History*, 9, 1: 140. See also Susan Geiger (1992). 'What's so feminist about doing women's oral history?' in Cheryl Johnson-Odim and Margaret Strobel (eds) *Expanding the Boundaries of Women's History*, Indiana University Press, Bloomington: 305-318; Kristina Minister (1991). 'A feminist frame for the oral history interview', in Sherna Gluck and Daphne Patai (eds) *Women's Words: The Feminist Practice of Oral History*, Routledge, New York: 27-41.

10   Anderson, Kathryn and Jack, Dana C (1991). 'Learning to listen: interview techniques and analyses', in Gluck and Patai *ibid*: 11.

11   Wallach-Scott, Joan (1996). 'Introduction', in Luisa Passerini, *Autobiography of a Generation: Italy 1968*, Wesleyan University Press, (translated by Lisa Endberg): xii.

12   Antze, Paul and Lambek, Michael (1996). 'Introduction: forecasting memory' in Paul Antze and Micheal Lambek (eds) *Tense Past: Cultural Essays in Trauma and Memory*, Routledge, London: xi-xxxviii.

13   Phillips, Adam (1994). 'Freud and the uses of forgetting', *On Flirtation*: Faber and Faber, London: 22.

14   Wallach-Scott (1996) *op cit*: xii.

15   Figlio, Karl (1988). 'Oral history and the unconscious', *History Workshop Journal*, 26, Autumn: 128.

16   I wish to thank Stuart Macintyre for generously offering his important insights regarding this argument.

17   Carey, Hilary M (1996). *Believing in Australia: A Cultural History of Religions*, Allen and Unwin, Sydney: 172-177.

18   See Pat Jalland (1997). *Death in the Victorian Family*, Oxford University Press, Oxford.

19   Several studies have attempted to address this, most notably, Nicole Ann Dombrowski (ed) (1999). *Women and War in the Twentieth Century: Enlisted With and Without Consent*, Garland Publishing, New York.

20   Gillis, John R (ed) (1994). *Commemorations: The Politics of National Identity*, Princeton University Press, New Jersey: 20.

21   There is a vast medical and psychological literature on the effects of wars on the families and children of returned men. Some of the most useful for this study include Zahava Solomaon, *et al* (1992). 'From front line to home front: a study of secondary traumatization', *Family Process*, 31, September: 289-302; Malcolm Kidson, John C Douglas and Brendan J Holwill (1993). 'Post-traumatic stress disorder in Australian World War II veterans attending a psychiatric outpatient clinic', *Medical Journal of Australia*, 158, April: 563-566; Laurie Leydic Harkness (1993). 'Transgenerational transmission of war-related trauma' in John P Wilson and Beverly Raphael (eds) *International Handbook of Traumatic Stress Syndrome*, Plenum Press, New York: 635-643.

22   See Stephen Garton (1996). *The Cost of War: Australians Return*, Oxford University Press, Melbourne; Judith Allen (1990). *Sex and Secrets: Crimes Involving Women Since 1880*, Oxford University Press, Melbourne; Joan Beaumont (1989). 'Gulf force comes home: the aftermath of captivity', *Journal of the Australian War Memorial*, 14, April: 43-52; Hamilton I McCubbin, Edna J Hunter and Barbara B Dahl (1975). 'Residuals of war: families of prisoners of war and servicemen missing in action', in *Journal of Social Issues*, 31, 4: 95-109.

23   Murphy, John (2000). *Imagining the Fifties: Private Sentiment and Political Culture in Menzies' Australia*, University of New South Wales Press, Sydney: 8.

24   For the use of oral testimonies, see, Peter Read (1996). *Returning to Nothing: The Meaning of Lost Places*, Cambridge University Press ,Melbourne; Paula Hamilton (1999). 'Memory remains: ferry disaster, Sydney, 1938', *History Workshop Journal*, 47, Spring: 193-210; Lucy Taska (1994). 'The masked disease: oral history, memory and the influenza pandemic, 1918-1919', and Glenda Sluga, 'Bonegilla and migrant Dreaming', in Kate Darian-Smith and Paula Hamilton (eds) *Memory and History in the Twentieth Century*, Oxford University Press, Melbourne: 77-91; 195-209; John Murphy (1986). 'The voice of memory: history, autobiography and oral memory', *Historical Studies*, 22, 87: 157-175; Alistair Thomson (1994). 'Anzac memories: putting popular memory theory into practice in Australia', *Oral History*, 18, 1: 25-31; Janet McCalman (1993). *Journeyings: The Biography of a Middle-Class Generation*, Melbourne University Press, Melbourne; Greg Langley (ed) (1992). *A Decade of Dissent: Vietnam and the Conflict on the Australian Homefront*, Sydney, Allen and Unwin; Libby Connors *et al* (eds) (1992). *Australia's Frontline: Remembering the 1939-1945 War*, University of Queensland Press, St Lucia, Queensland; Shurlee Swain with Renata Howe (1995). *Single Mothers and Their Children: Disposal, Punishment and Survival in Australia*, Cambridge University Press, Melbourne.

25   Peters, Betty (1996). 'The life experiences of partners of ex-POWS of the Japanese', *Journal of the Australian War Memorial*, 28, April: 1-11, and John Raftery and Sandra Scubert (nd). *A Very Changed Man: Families of World War Two Veterans Fifty Years After War*, Adelaide, School of Human Resource Studies, University of South Australia; Sandy Gilman (1989). '"Widowhood Remembered" - An Analysis of the Oral Testimony of War Widows as An Illustration of the Human Consequences of the Second World War', BA Honours Thesis, Department of History, University of Melbourne.

26   Thomson, Alistair (1994). *Anzac Memories: Living with the Legend*, Oxford University Press, Melbourne.

27   See Penny Summerfield (1998). *Reconstructing Women's Wartime Lives: Discourse and Subjectivity in Oral Histories of the Second World War*, Manchester University Press, Manchester.

28   For a recent discussion on memory and history see Alon Confino (1997). 'Collective memory and cultural history: problems of method', and Susan A Crane, 'Writing the individual back

into collective memory', *American Historical Review*, 102, 5, December: 1386-1403 and 1372-1385, respectively.

29 See Kathleen Woodward (1990-1991). 'Freud and Barthes: theorizing mourning, sustaining grief', *Discourse*, 13, 1, Fall-Winter: 93-96; Eric Santner (1990). *Stranded Objects: Mourning, Memory and Film in Postwar Germany*, Cornell University Press, Ithaca: 3.

30 Flax, Jane (1993). *Disputed Subjects: Essays on Psychonanalysis, Politics and Philosophy*, Routledge, New York: 94-96.

31 Wendy Wheeler (1995). 'After grief? what kind of inhuman selves?', *New Formations*, 25, Summer: 79.

32 Winter, Jay (1995). *Sites of Memory, Sites of Mourning: The Great War in European Cultural History*, Cambridge University Press, Cambridge: 78-116.

33 Sherman, Daniel J (1998). 'Bodies and names: the emergence of commemoration in interwar France', *The American Historical Review*, 103, 2, April: 443-466.

34 *Sydney Morning Herald,* 27 July 1950: 2.

35 *Ibid* 29 July 1950: 2.

36 *Sydney Morning Herald*, 30 July 1950.

37 *Age*, 27 July 1950: 2.

38 *Sydney Morning Herald*, 29 July 1950: 2.

39 Gallaway, Jack (1994/1999). *The Last of the Bugle: The Long Road to Kapyong*, University of Queensland Press, Brisbane: xii.

40 Interview with Olwyn Green, 5 July, 1996, in possession of the author.

41 *Ibid*.

42 Olwyn Green, *The Name's Still Charlie.* University of Queensland Press, St Lucia: 3-4.

43 *Ibid*: 5.

44 *Ibid*: 293.

45 Ibid: 293.

46 *Ibid*: 215.

47 *Ibid*: 5.

48 Interview with Paula Voltz, 19 May 1998.

49 Encel, Sol (1970). 'The Family', in AF Davies and S Encel (eds) *Australian Society: A Sociological Introduction*, Chesire, Melbourne: 275.

50 Brende, Joel *et al* (eds) (1985). *Vietnam Veterans: The Road to Recovery*, Plenum Press, New York: 44.

51 Interview with Paula Voltz, 19 May 1998.

52 Jeffrey Streimer, Jeffrey and Tennant, Christopher (1987). 'Psychiatric Aspects of the Vietnam War: The Effects on Combatants', in Kenneth Maddock and Barry Wright (eds) *War: Australia and Vietnam*, Harper and Row, Sydney: 238.

53 See Bruce Bowan, 'The Vietnam veteran: Ten Years On', *Australian and New Zealand Journal of Psychiatry*, 16, 3: 114. For detailed analysis of dreams and nightmares of Vietnam veterans, see, Harry A Wilmer (1996). 'The Healing Nightmare: War Dreams of Vietnam Veterans', in Dierdre Barrett (ed) *Trauma and Dreams*, Harvard University Press, Cambridge: 85-99.

54 Raftery and Schubert (nd) *op cit*: 25.

55 Interview with Paula Voltz, 19 May 1998, in possession of the author.

56 *Ibid*.

57 *Ibid*.

58 See references in the papers.

59 Kübler-Ross, Elisabeth (1969). *On Death and Dying*, Macmillan, New York: 6.

60 *Sun Herald*, 4 October 1987: 3.

61 *Age*, 5 October 1987: 16.

62 *Australian*, 5 October 1987: 3.

Grief, Trauma and Who We Are

Beverley Raphael

Speaking of grief and bereavement in Australia, at the end in the year 2005, one must inevitably see both current and future contexts, as well as the memories and pathways of the past. In so doing, one must consider the paths one has trodden along those trajectories, the personal paths that influence one's views and work,[1] but also the social and cultural trajectories that have evolved. One may see clues to the future and attempt to strengthen those that are hopeful and positive – or struggle against and denounce those that are seen as malevolent. As memories will always be shaped to some degree by the present, that is a useful place to start.

Australia is, like much of the Western world, preoccupied with trauma. Psychological trauma has become the lens through which all adversity is viewed. Trauma counsellors, the media reports, will be provided immediately for the victims of every adversity. At the end of this spectrum of response is the diagnosis of post traumatic stress disorder – recognised in earlier times by many different names including Freud's concept of 'traumatic neurosis'[2], 'shell-shock' after World War I and 'combat fatigue' after World War II. Post Traumatic Stress Disorder became the post-deployment syndrome that spoke to the 'war wounds' of traumatised soldiers, wounds in the psychological sense. New terms have evolved for subsequent conflicts – for instance the 'Gulf War Syndrome', recognising the profound and holistic health issues faced by veterans of the first Gulf War. Trauma in the psychological sense has, of course, been recognised well beyond the wounds of war. It has appeared with the violence of the home: domestic violence and child abuse – the battered wife and battered child syndromes in the earlier stages: and of course, the victims of disaster and more recently terrorism. I emphasise this trauma view because it is a vitally important current psychological and social lens through which much of life experience, including that of grief and bereavement, is often viewed: the phenomena of grief may not be recognised, the needs of the bereaved not appropriately identified and systems of response focused only onto the cycles of trauma, and not the resolutions of grief.

The understanding of grief and bereavement and their relation to and interaction with trauma – what is shared, what is separate, how these issues may so often be confluent, will be the central theme of my contribution to this dialogue. The understanding of death and dying in these contexts of trauma and violence must sit alongside the quiet and prolonged dying of those individuals who have come to that stage in their life – be it through illness or advanced age, or a sudden quiet death in the context of their normal lives. Every death, each circumstance, brings poignancy, grief and loss to those who are bereaved. But the deaths associated with violence and trauma may bring extra burdens.

Those *dying in anticipated ways*, from prolonged illness, for instance, have access to palliative care systems, supported by knowledge of the psychological process of grief and bereavement that has advanced very significantly over the recent decades. These systems of care can support both the dying person's grief for his or her own life, and families in their anticipation and subsequent response to the death. Approaching these issues positively has become a strong culture of care: as described, for instance, in Kellehear's *Heath Promoting Palliative Care*[3] Health professionals, nurses, doctors and others assisting the dying and their loved ones understand the dying processes, and the needs to have preparation, discussion,

compassion, respect and understanding. While some who provide care are still anxious and avoidant, the culture of these systems of care continues to improve, with hospice movements, dying at home and palliative care guidelines. The Australian Government is currently further progressing this field through a major consultancy to strengthen the evidence base from research. This will inform such care by drawing together the best information to further improve services and care in the future.[4] This field has been further strengthened too, by ethical considerations to support end of life discussion making, separate from the complex debate about euthanasia. There is much to suggest that Australia has come a long way in its capacity to deal with death in such contexts, from the 1960s to the present.

One of the many personal factors that influenced my own choice to work in the field of death, dying and bereavement, was my experience of illness as a young doctor. I developed a blood disorder in 1959, in response to an antibiotic (no longer used). It had been fatal for others up until that time. Nobody spoke to me of the facts or possibility of death – although others had heard I had only five days to live. My experience as a general practitioner also involved dealing with patients facing death in diverse ways. From them I began to learn of the need for comfort and support, communication at the person's own pace, answers to questions about the 'unspeakable', their concerns for the needs of others they would leave behind. Also, too, of the finality of 'pronouncing' the death. A great many have contributed to this progress to better care with such illness, including Kübler Ross,[5] and, in the Australian context, many excellent workers in this field, as well as the very strong advocacy from those directly and personally affected. The risks to ensuring improving quality of care and community recognition and support lie in the prevalence of chronic illnesses; ageing populations; shortages in the health care workforce; burdens of family care; social isolation and decreased social cohesion in urban neighbourhoods; the commodification of time; and perhaps sadly, cultures of narcissism.[6] Nevertheless the signs: the goodness of the human spirit; the powerful volunteer and non-government organisations that contribute in major ways, are hopeful. Australians, will for the most part, do as they have done in the past, for the ill and dying – that is, the best they can.

It is in the other field of grief, death and loss as it currently preoccupies us that I would like to focus the major part of this present discussion. The bereavements that are immersed in *trauma*, that result from *sudden, unexpected and often violent deaths* – these are a central theme of our experience. As I suggested earlier – these bereavements have often not been seen as such, or have been usurped into 'traumatic stress'. Yet these are the griefs that require special understanding, empathy and time –though the loss itself has been often dramatic and sudden. The original recognition of psychological trauma by Freud[2] was in the context of the 'traumatic neurosis'. The separate recognition of the psychological reactions of grief was described in *Mourning and Melancholia*.[7] These highlighted the acknowledgement of different adaptive processes. But before this, Charles Darwin in his volume *The Expression of Emotion in Man and Animals*[8] had described these two sets of phenomena, the facial expressions associated with them and a little of the physiology.

My early studies and exploration of bereavement in the research context followed the seminal work of David Maddison who had researched the experience of widows so as to understand their reactions to the deaths of their husbands, and the factors influencing their adaptations and the impacts on their health and well-being. I owe him a great debt of gratitude for involving me in this research, and his mentorship for my

early academic career directions. The studies I took up involved working with women whose husbands had died in the previous weeks. From their stories I learned to explore with them their experiences of the death and their reactions and those of their social networks subsequently. Important in this context were the observations that some circumstances of the death were in and of themselves psychologically traumatic[9] and that this as well as their grief, needed to be taken into account. These distinctive themes of trauma and grief have progressively evolved in my own work.[10] Nevertheless the major focus has been for a great many workers in the field, both in Australia and internationally, that of trauma, of psychological trauma and its flagship of post traumatic stress disorder.[11]

Mental health aspects of disasters have been a significant element of my work since the time of cyclone Tracy, December 1974. This was linked to my experience with bereavement as a major life crisis. Australian research and development in this field has made a major contribution to building the knowledge base for effective response. The Granville Rail Disaster in 1977 was the first time mental health and grief experts had worked with survivors in the acute phase at the City Morgue in Sydney, with systematic follow up and counselling for those bereaved, in the weeks that followed.[12] This experience showed the shocking and painful nature of the acute phase of such sudden, unanticipated and traumatic deaths; the social prescription of the time about who could see and identify the deceased (only male relatives were supposed to do so); the images of such deaths that would remain, and the impacts as well for those who would help. It also revealed the struggles of the bereaved to make meaning of their experience – Why me? Why my loved one? And how such sudden deaths may cut across the ambivalences of everyday life, highlighting the guilt, remorse and, for some, the risk of melancholia rather than mourning.[13] Follow-up showed that the care provided had been of benefit, but not to all – principally to those who had perceived it as helpful. But importantly it showed that rituals of goodbye were important; being able to see the body and say goodbye to the deceased could make a difference.[14]

Australia has been subject to *many natural and other disasters*; and to disaster deaths: the Ash Wednesday Bushfires, the Kempsey and North Coast bus crashes and the Newcastle Earthquake to name a few. The researchers who have explored reactions to these have for the most part focused on the psychological trauma of those who were exposed. McFarlane[15] investigated the impacts of the Ash Wednesday Bushfires in South Australia in 1983. He explored their impact on community members, children, fire-fighters and others. His contributions through this research and other work he has pursued have led to his being considered as one of the international leaders in the field of traumatic stress. Similarly Watts' work on the survivors and rescuers of the bus crashes showed the impacts for them, and the fact that interventions of the time did not mitigate the psychological consequences.[16] Kenardy, Carr and others carried out extensive studies following the Newcastle earthquakes, again with the principal focus on trauma, and impacts over time, and the benefits or otherwise of the interventions provided.[17] Other contributions that have been of great value include those of Richard Bryant, exploring acute traumatic stress, Acute Stress Disorder and PTSD consequences of a range of exposures including motor vehicle accidents and illnesses, and how effective interventions may mitigate some trauma impacts if appropriately focused.[18] Richard Bryant's work has also received great international recognition. I highlight these contributions, because they have been very significant Australian led initiatives. There have also been high quality research contributions from the Australian Defence Department. Internationally, as

well as in Australia, there has been a focus on disaster trauma, traumatic stress from combat, motor vehicle accidents, sexual and other assault, but a lesser recognition of grief in such contexts.

While *bereavement was recognised in these settings* and the needs of the bereaved in such circumstances usually recognised, the scientific base for understanding grief in such contexts was not so well developed. Its relevance for children who may, for instance, be particularly traumatised by violent deaths as Pynoos work clearly showed,[19] was not well addressed. Our studies of bereaved children showed that their experiences were very different for the sudden, 'traumatic' death of a parent compared with those who had a more prolonged dying.[20] Workers in the field have dealt with and generally helped children so affected.[21] But the two themes of trauma and grief have not been well defined in the research development, nor in terms of recognition, for systematic care until more recently,[22] nor have the particular meanings of such traumatic circumstances of death been considered.

Thus over the years, since the 60s and 70s Australian interest in and reactions to trauma and grief have evolved. Whereas grief was a recognised focus in earlier phases of this time period, *psychological trauma*, in an indiscriminate way, *has become the lens through which most adversity has been viewed - even that of grief.* Australian research development to facilitate the understanding of *bereavement processes* had begun to build on a number of emerging themes. The *conceptual bases for research and development* of this field were explored with leading researchers in Australia and internationally.[23] As had been my own experience, the majority were influenced by attachment theory with the work of John Bowlby[24] as the dominant paradigm. His wisdom, observation and understanding of the powerful nature of human attachments and the psychological pain and social ritual that followed their loss, was compelling in its logic and inherent truths.

Research development focused on the need to *systematically and specifically describe* the *phenomena of reactions* to loss, of bereavement, of grief.[25] The differing patterns following different losses were also systematically explored: for instance, for adults the deaths of spouse or partner, child or parent;[25] for the elderly;[26] following the deaths of stillbirth neonatal deaths and sudden infant death syndrome[27] and family grief;[28] deaths from cancer[29] and from HIVAIDS.[30] This rich set of explorations greatly expanded the scientific base of understanding of normal responses. Some work, such as that of Murray,[27] attempted to take findings into effective interventions that would lessen suffering as well as improving health outcomes. Bereavement after suicide became a focus as well.[31] Education centres and resources had evolved to enhance knowledge, skills, and to assist those who had themselves lost loved ones.

Social dynamics surrounding grief changed during the decades from the 60s and 70s.[32] The post World War II European migrations brought waves of people who had themselves suffered terribly in the Holocaust and in the many other damages of war. They brought their grief, which was often still so close that it could not be dealt with until they were safe and secure. But they also brought their different ways, and these had an even more powerful impact on the way Australians behaved. Assimilation was a two-way process. Openness, emotional expressiveness, acknowledgement of grief, started to move Australians from the model of stoicism, privacy and survival. The recognition and valuing of diversity, awareness of different social and religious practices, occurred alongside a generally more open, less rigid view of the world for many, although not for all.[33] Intermarriage between peoples of different religion, ethnic

and cultural backgrounds, shared lifestyles, interests and practices, and successive waves of newcomers have all contributed to Australia's rich social spectrum. Behaviours surrounding grief and loss have changed. Gender has also been an issue: previously delineated roles of women in mourning; the widows in black and with a restricted social role have now been transformed. Now there are the 'White Ladies', the funeral providers of choice for many in an industry once dominated by men. The freedom for men to grieve publicly, to cry, to have needs, has also become better understood and accepted. These changes have evolved from different cultural influences, more social openness, changes in social presumptions about gender, and the development of community organisations driving change, such as the various NGOs dealing with grief and the overarching group, the National Association of Loss and Grief (NALAG).

During the time of these evolutions there was a *quiet recognition of the traumatic nature of some deaths* and the need for special bereavement support to deal with these. The nature of the support provided at the Sydney city morgue after the Granville Rail disaster led to the development of an ongoing service to assist families facing bereavements involving traumatic circumstances such as to require coroners oversighting. The development of such services has been critical for response to disasters and terrorism in the current context. These highly specialised, effective workers have provided a leading edge to assist those both bereaved and traumatised.[34]

Special programs have also been put in place to support those bereaved by suicide, to mitigate the trauma associated with such circumstances of death, and to provide practical guidance.[35] Homicide victims support groups have developed programs to respond to the complex needs of those both traumatised and bereaved in such circumstances.[36] International work with families of homicide victims supports the importance of recognising both the trauma and grief they experience, and responding to these needs over time.[37] Many other instances exemplify the recognition by organisations, workers, systems of care and the community, that there is grief and, that over and above its pain, may come psychological trauma.

For Australia, as for many other Western countries, trauma took on a whole new meaning after September 11. The social dynamics of the 'terrorism' threat became the overarching and dominant paradigm of trauma. It was depicted as, and became, the ultimate threat. Although many millions have died in previous wars and conflicts, and by violence and by disease, this image, with it associated threat, came to symbolise many of our fears. It involved sudden, unexpected, unanticipated and multiple deaths; the loss of loved ones; life threat to many; and malevolent human intent. Many other losses occurred as well, but for north Americans there was surely also the loss of the sense of personal and national invulnerability. Several processes relevant to the evolution of responses to loss and grief in Australian society are highlighted not only by our more distant experience of this, but also by our own losses and exposure, with the Bali Bombing of 12 October 2002.[38]

In a globalised world instantly connected by the internet, we have the images of death and mass deaths immediately before us. Lifton,[39] in his brilliant description of the tragedy of Hiroshima described the *'death immersion'* that had affected the survivors. There is a large body of research from the field of disaster that identifies life threat and exposure to the multiple gruesome and mutilating deaths of others as major stressors which can affect us profoundly, perhaps even leading to the development of post

traumatic stress disorder. It is also possible for repeated exposure just to the images *per se* to traumatise, as studies of children have shown, for instance following both the Oklahoma bombings, and September 11. Terrorism is a strategy which aims to induce fear and horror that we or our loved ones will be indiscriminately killed or injured. The threat of death and loss is uncertain in its timing and its target. These factors in their own right produce fear and anxiety. In addition to such potential loss, there is the loss of certainty, of assumptions that our world is a safe place, or that we really are the 'lucky country'. We are also forced to confront human malevolence – that the violence of such deaths is no accident of man or nature. It has an *intended malevolent purpose*.[40] Those who lose loved ones to homicide also understand the additional horror of such malevolent intent, the loss of 'safety', of safe worlds.

Other mass events have had their impact in recent times. The Port Arthur shootings highlighted individual, indiscriminate and inexplicable violence and its terrible aftermath of both grief and trauma. That too was seen as a *'loss of innocence',* in that it was taking away the dream of our invulnerability. What has been most difficult for us to recognise in this, and later in terrorism has been the nature of the violence that leads to such behaviours. We see it as alien and fail to recognise that it is on a spectrum, even if at the far end, of the many violent behaviours and preoccupations of our own society. We are fascinated by the images of violence on the media, by the victory of the hero which is symbolised by the blood, mutilation and killings. Such movies, books, television programs, and the like receive high ratings, attesting to the potency of their images, perhaps as another facet of our preoccupation with, and fear of death. Maturing to understand ourselves better as individuals as well as a society would equip us to recognise this violent theme as yet another facet of humanity's fear and fascination with elements of the life/death challenge.

Another theme of prominence for these and subsequent events has been the *social processes of memorialisation*. In Australia we have seen the roadside crosses, flowers for motor vehicle deaths and the traumatic bereavements associated with these. The images of the candles, flowers and photos which symbolise the September 11 attack, the Bali Bombing, Madrid, Beslan and London, reflect the spontaneous grief of those whose loved ones have died in these tragedies. These community responses are followed over the time of grief by many others – the ceremonies, the memorials, the anniversaries of acknowledgement. These public statements speak to the special and terrible nature of these losses. They also attest to the value of those lost, to the courage of those bereaved; to the recognition and support of the society; and ultimately to the hopeful survival of the human spirit. In a mass event these processes bring together the bereaved who can share with and gain support from, others who have been through the same thing. Sometimes the needs of the bereaved and those traumatised but not bereaved will be different – for the traumatised may wish to avoid certain aspects that are reminders, whereas the bereaved may cling to anything which connects them to the deceased, to their loved ones, a place where they 'are', or their spirit.

The significance of memorialisation is obvious with war memorials. The Australian War Memorial is to many Australians a most 'sacred place'.[41] It brings together recognition of the trauma of war in its presentations, and acknowledgement of the loss, particularly with the wall of names. It is potent both symbolically and in reality for Australians, in that it seems to address CW Bean's original intent to 'bring home the spirits' of these Australians who died in the horror of the First World War.

Testimony has been another powerful tool that has provided release for both trauma and grief. It acknowledges horror, loss, the value of those who were lost and the shock and fear of the way they died, as well as the complexity of survival. Many bereaved people write a journal. Therapy models are built on narratives of trauma and grief. Poetry and prose give voice to the drive to tell the story of one's experience. Research has suggested that writing of trauma may be helpful to both health and wellbeing.[42] Writings on grief have contributed to some of our greatest literature. Disasters bring many testimonies: survivors describe the many elements of their experiences and the enormous human impacts. Therapy models involving a range of psychotherapies such as cognitive behaviour therapy, grief therapy, interpersonal therapy and so forth, have dealt with stories of the experience, and how it is confronted and incorporated so that it is not the dominant theme of life for the future. There are also healing programs. Their spiritual significance has been accepted but not easily researched in the face of acute grief or loss. Healing programs have been helpful for Aboriginal peoples dealing with trauma and grief relevant to 'stolen generations'. These shared testimonies involved the telling of stories and offering of experience and mutual support.

In the most acute time of trauma and grief there was, for a time, an intense focus on getting those who had been involved to 'tell' about what had happened, to be 'debriefed'. While some people will talk spontaneously, and will share with others their relief and their experience, this is not the time of resolution. Indeed forced debriefing may be quite unhelpful, further traumatising those involved. There is no evidence that it assists recovery and it is particularly inappropriate for the time that is needed for grief.[43] The concept of psychological first aid, ensuring safety, psychological support, protection from further harm, and comfort, which was introduced in 1977,[12] has now become the agreed and accepted first line of response.[44] It acknowledges that there may be an urgent need to talk, and share feelings, but that the work of grief and dealing with any trauma may come in later weeks or months – when one is ready – when the time is right.

The experiences of those who have been *traumatised* in a disaster or terrorist attack and are *separated from loved ones* can be intensely distressing. Searching behaviours and intense attachment ideation, can drive them to place their own lives at risk. They may also be further traumatised by searching through the remains of a bombing for instance, the human remains in the site of a terrorist attack or the bits of body parts. The traumatic circumstances of such losses have been profound for Australians who lost loved ones in the Bali bombings where the search for children or other family members involved seeing others dying, trying to help; desperately searching through a temporary morgue where human remains were further deteriorating in the heat – visiting hospital wards, with increasing desperation and dread to find those they loved.[38] In these terrorist attacks forensic and crime scene processes are required, involving identification procedures, and formal Disaster Victim Identification.[34] While these issues are also relevant with local violent deaths, the massive scale, the situation of deaths in a foreign country and the difficulties of bringing together all the body parts, mean that there are additional elements of trauma that will be inevitable companions to the grief. The formal supportive process put in place by skilled, sensitive and empathetic workers can create a trajectory that will be helpful in these most distressing circumstances. Poor response at such a time can greatly add to the trauma.

Thus when trauma and grief are inevitable consequences of the human disintegration that can occur with mass casualty events, skilled, empathetic, compassionate and informed response is critical at every stage. Australian work in this field has led the way. It has also contributed to the development of international responses to mass deaths.[45]

The *images of particular deaths or of mass deaths*, or mutilating deaths or deaths involving body parts may stay with those bereaved and traumatised. For those bereaved it may be the intense, terrible, powerful *final memory* of the deceased. For grieving to be possible the intensive images and nightmares that represent the trauma must be dealt with. As many clinicians in this field have reported, dealing with this trauma may require careful psychological work, before the emotions of grieving the memories of the loved one in their reality, become possible – in waking or in sleep. The gradual resolution of grief, the lessening of the bonds to the deceased will take time. The trauma, or new aspects of it, may repeatedly come to the fore, alongside the grief, and may require careful support and possibly, skilled intervention. Practical vehicles of advice, information and guidance may also provide a safe framework where the bereaved can also take up options of telling of the trauma, loss or grief.[10] The needs of children can be similarly responded to.

Images of death and horrific death are constantly with us, confronting our fear, fascination, and the need to understand and to overcome. This is also reflected in the popularity of certain TV programs such as the CSI (Crime Scene Investigation) series, where the degree of gruesome death may be too great even for those who know it well. Journalists themselves recognise both the powerful impacts of trauma and grief that they experience, directly or through their human interest stories, or as correspondents covering mass disasters, conflicts, war and other horror. They have now established an institute through the University of Michigan called the DARTCENTER for Journalism and Trauma, to help them build expertise in this field to best assist others and for their own need. A recent conference of their organisation in Sydney highlighted how far they have moved in their efforts to deal with these issues, including research relevant to their needs.[46] Nevertheless images of mass, mutilating and gruesome death are news, and news that is watched.

Many natural disasters, particularly in the last 12 months, have highlighted *how overwhelming trauma, loss and grief may be.* The South East Asian Tsunami with over a quarter of a million deaths and millions displaced from homes and communities; Hurricane Katrina destroying areas as big as Victoria and displacing a city; the Pakistan/Kashmir earthquake with a current count of 70,000 deaths and potentially more than a million displaced from their destroyed communities. Australians have to date been protected from such massive losses directly affecting our land mass, but a great many Australians have been affected by such events – either losing loved ones in those lands, or in their roles in providing assistance and aid. It seems to have been a year of too much death – not only from these sources but from diseases and deaths in developing countries, through conflict, famine, violence, disease and AIDS. Recent reports suggest that death levels from war have progressively decreased. This is good news. But interpersonal violence, and these many conditions, including global climate change and other sources of threat such as that of a potential influenza pandemic, mean we live 'immersed' in death, even if at a distance, and we live with images of trauma.

As we would anticipate, there are many ways we try to *make meaning* of this. It may be that we write or research, as I am doing. It may be that we try to understand intellectually. George Engel once asked 'Is grief a disease?'[47] Of course it is not, but we now struggle with the *naming* of a disease of terrible grief. Diagnostic criteria and measurement scales for abnormal, pathological, complex or traumatic grief have been developed[48] to provide a framework to measure 'how bad', and if what we do to help 'makes a difference'.

Similarly we measure traumatic stress as a reactive process which merges into the Diagnostic Criteria of DSMIV for Acute Stress Disorder and Post Traumatic Stress Disorder. We find a set of evidence based guidelines for this element of human suffering.[49] We also show the images of our brains in their differentiated patterns of response to each.[50] Indeed this may be comforting, but sometimes sadly, more to those providing care than to those who receive it. The danger lies in science replacing, instead of accompanying, the compassionate recognition of one human to another. Like other nations, we have built on science; our spontaneous response remains compassionate and decent; but we do not always understand that the two belong together.

Another aspect of this confrontation with mass trauma, mass loss, mass grief over which we have so little control, is the *social distancing* that may take over. What happens to the other may be seen as not relevant to us, especially if the other is 'alien', different, or far distant, in a world we have never seen and cannot even imagine from our comfort zone. There is deliberate distancing, but more frequently a strategy of distance as a 'survival mechanism', because we cannot feel for all that suffering. Figley[51] has used the term *'compassion fatigue'*. It is important because in a way it describes where we sometimes come to, and where we are in some ways now. It is not a good place to be, so brings an important challenge for the future. How can we care for the trauma, loss and grief of the other; when is it too much; how can we keep ourselves as individuals, and as a nation, 'safe' to feel for, and respond to, the other, even when they seem the most alien? Mass death, terrible threat and uncertain future so often make us retract from the openness in ourselves. We tend to split the world into the 'good' and 'bad' as a rationale for distancing ourselves from those we cannot understand. No person and no nation can be all things to all peoples. But a retreat into fear, a move away from others with the presumption all will threaten us, is not really an Australian way of handling adversity. As a people we have usually faced it honestly, fairly, openly and courageously.

There are a number of further themes that for me have threaded their way through the years of my experience and observation of how we face death, dying, grief, trauma and adversity. The first theme is of *courage and attachment*: the stories of my patients as a young doctor, the hospitals where they suffered and died, the community where they experienced their terrible illnesses, the veterans I cared for in those early days and the many people whom I have known in my years as a psychiatrist. The stories, the narratives that are shared, truly shared are really important. That sharing includes the response to them, the interactions of touch, quiet phrases of concern and understanding, hope, affection for another human being and the potential of a future. The themes of such stories deal with core human issues: the power, significance and centrality of human attachment bonds – the vital importance of those we love and care for; the sadnesses of grieving such losses; the nature of trauma in the psychological sense with its gruesome realities and its threat to one's own survival, integrity and

loved ones; the need for safety, comfort and the recognition and support of others. Resilience as well as courage is another powerful theme across the social spectrum and across all adversities.

The second theme is to do with the deeper, *complex griefs and traumas*. There has been recognition for our soldiers, those who go to war, of the horror of much of their experience, especially of combat and its potentially traumatising effects. We have grieved for them when they have died and cared for those loved ones left behind. We have recognised the importance of their mateship. But we have not recognised their griefs. The book written by a psychiatrist friend of mine, Ted Nadelson, and completed after his death,[52] vividly portrays their grief, from his years of clinical work with veterans: they grieve for the loss of their mates, with whom they have intense and meaningful bonds. They grieve for the loss of the intensity of these attachments and often too for the horror of the way their mates died. They also grieve for the loss of some parts of themselves because of what it takes to learn to kill, to kill others, even when the 'cause' is right. They described how they had lost some part of themselves in some of what they had to do, and how they grieved for this. For me this is an important and emerging theme of relevance in many different ways and potentially now, in Australian society. We are grieving now, with greater awareness, and importantly for our loss of naivety; for the belief we are all 'good' and the others are all 'bad'; we are perhaps grieving as adolescents are said to do normally,[53] for the loss of idealisations that sustain our image of ourselves, for what we have done and what we have not done. Hopefully this grieving will reflect a growing maturity in Australians for how we deal with the systems and structures of our ways of being and the world. Where violence, trauma and grief come together we will always be challenged to make meaning of what has happened, what is happening and its implications for the future, for our own survival with integrity and for the survival of our loved ones.

Another potent theme that has changed and continues to change, and hopefully will do so further in a positive way is in *recognition of the grief and trauma experienced by Indigenous Australians*, what we may have done or may still do that contributes to it, what we can change, and what wisdom we can respectfully learn from them, from their survival in the face of it.[54]

A more honest Australian history has progressively unfolded in the past decades so that the Aboriginal peoples of Australia have become recognised in and of themselves. The extent of the grief that they have experienced is being increasingly acknowledged by the broader community as is the centrality of the trauma, dislocation and denial. The 'Stolen Generations' report, *Bringing Them Home*[55] has documented the losses inflicted by government policies, impacts of colonisation, and the realities of destruction of the most powerful of attachments, those of parent and child. The socially sanctioned rituals of grief in Aboriginal communities could not deal with such loss. They were not losses of death, although the grief was as if a death had occurred. Grief contributes as an ongoing burden with higher levels of premature mortality, infant mortality and tragic, often violent and sudden deaths, as well as ongoing losses through high rates of incarceration. Throughout the past and continuing into the present, trauma has presented another stream of psychological pain and injury. Racism, dispossession, social inequities and social adversities have damaged social and emotional wellbeing, and indeed physical health. Recognising this grief and trauma and acknowledging the great strengths of indigenous peoples in their

creativity, commitment, kinship and courage has become a significant and evolving theme in the panorama of Australian contemporary experience.

Thus, the *contemporary themes of grief, death and dying in Australia are multiple and clearly linked to psychological trauma*. Trauma to do with violence, violent deaths, mass deaths; present, past and potential future threats to life, limb and loved ones is very much to the fore. Systems linked to heath care, responses to spiritual and social need have evolved to more honestly and compassionately deal with the deaths from terminal illness, in the latter years of life, and even when this type of death occurs for children. We have overcome much stigma in dealing with deaths such as those from HIV AIDS, or those of suicide, and in the comfort and care we offer to those bereaved. We have also recognised the capacity for personal growth as well as resilience in the face of such grief and trauma.

But *new ways of death, and threat* have brought with them *tough grief, hard trauma, pressures on our capacities to empathise*, and have added to *our uncertainties*. Australian research is moving to address many of these issues. Systems of response to terrorism in terms of the mental health impacts are being strengthened, so as to potentially meet Australian needs should such events occur.[56]

There is also, in my opinion, an emerging theme of grief that touches our recognition of ourselves as individuals, and as Australians. This relates to the recognition of the realities of who we are, the relinquishment of and grieving for, idealised and nostalgic perceptions of our innocence, our naivety, our sense of personal and national invulnerability. It involves recognition of the good, the bad, the loving, the violent parts of ourselves and others – our own and their imperfections. It involves an honesty which accepts complexity as a reality of life, the fact that we are citizens in a global world, that we do not live alone and separate, and that others are not 'aliens', but rather are people who have families, children, fears, traumas and griefs, just as we do. That even if we cannot feel compassion for them all, we can feel compassion for some, and feel safe enough to feel for them humanly. It also may mean that we recognise the realities of our leaders, our own responsibilities for action for the future, for hope, for growth and building on our strengths, for not becoming victims, for not being helpless. And that we might continue to learn, from the oldest surviving culture in the world, the central value of human attachments, of courage in the face of grief and adversity, of the many different social and cultural adaptations that may see people through such times; and that we will continue to acknowledge and value the positive, compassionate and mature strengths that have so traditionally been seen as part of the Australian character.

Beverley Raphael *is Professor of Population Mental Health and Disasters, University of Western Sydney; Professor of Psychological Medicine at Australian National University; Emeritus Professor in Psychiatry from the University of Queensland and was previously the Director of Mental Health at NSW Dept of Health. Professor Raphael is responsible for the development of Population Mental Health approaches in Australia. She is an internationally recognised expert in the field of trauma, grief and disasters and has been a consultant to the World Health Organisation, and to the Australian and international governments, she coordinates mental health disaster response nationally.*

1   Raphael, B (2005). Life trauma and loss. In Figley, CR (ed) *Mapping Trauma and Its Wake,* Routledge, New York.
2   Freud, S (1920). Beyond the pleasure principle. In *The Standard Edition of the Complete Psychological Works of Sigmund Freud.* Vol 18. London, Hogarth Press, 1955: 3-64.
3   Kellehear A (1999). *Health Promoting Palliative Care.* London, Oxford University Press.
4   Australian Government (2005), Palliative care grief consultancy.
5   Kübler-Ross, E (1969). *On Death and Dying.* London: Tavistock.
6   Lasch, C (1979). *The Culture of Narcissism.* London. Norton / Abacus.
7   Freud, S (1917). *Mourning and melancholia.* Reprinted (1953–1974). In Strachey, J (ed) *The Standard Edition of the Complete Psychological Works of Sigmund Freud.* Vol 14. London: Hogarth Press.
8   Darwin, C (1872). *The Expression of Emotions in Man and Animals.* Reprinted with introduction by SJ Rachman (1979), London, Julian Friedmann Publishers.
9   Raphael, B & Maddison, DC (1976). Care of bereaved adults: Modern trends. In OW Hill (ed) *Psychosomatic medicine* 3: 491-506. London, Butterworth Raphael, B (1977). Preventive intervention with the recently bereaved. *Archives of General Psychiatry.* 34, 12: 1450-1454.
10 Raphael, B (1983). *The Anatomy of Bereavement.* Basic Books, New York; (1986). *When Disaster Strikes.* Basic Books, New York; Raphael B & Martinek N (1997). Assessing Traumatic Bereavement and PTSD. In Wilson, JP & Keane, TM (eds) *Assessing Psychological Trauma and PTSD.* New York, Guildford Press: 373-395; Raphael B, Martinek N & Wooding, S (2004). Assessing Traumatic Bereavement. In Wilson & Keane *ibid:* 492-512; Raphael, B, & Wooding, S (2004). Early mental health interventions for traumatic loss in adults. In Litz, B (ed) *Early Intervention for Trauma and Traumatic Loss.* New York, Guilford Press.
11 American Psychiatric Association (1994). *The Diagnostic and Statistical Manual of Mental Disorders* (4th Edition). Washington, DC: Author.

12 Raphael, B (1977). The Granville train disaster: Psychological needs and their management. *Medical Journal Australia.* 1, 9: 303-5; Raphael, B (1979-80). A primary prevention action program: Psychiatric involvement following a major rail disaster*, Omega* 10, 3: 211-226.
13 Raphael, B (1978). Mourning and the prevention of melancholia. *British Journal of Medical Psychology.* 51, 4: 303-10.
14 Singh, B, & Raphael, B (1981). Post disaster morbidity of the bereaved: A possible role for preventive psychiatry. *Journal of Nervous & Mental Disease*, 169: 203-212.
15 McFarlane, AC and Raphael, B (1984). Ash Wednesday: The Effects of a Fire. *Australian and New Zealand Journal of Psychiatry*, 18: 341-353; McFarlane, AC (1987) Post traumatic phenomena in a longitudinal study of children following a natural disaster. *Journal of the American Academy of Child and Adolescent Psychiatry.* 26: 764-769; McFarlane, AC (1988). The longitudinal course of posttraumatic morbidity: The range of outcomes and their predictors. *Journal of Nervous and Mental Disease*, 176: 30-39.
16 Watts, JR (1995). *Reactions and Follow-Up After Large Scale Road Accidents.* PhD Thesis. University of Queensland.
17 Carr, VJ, Lewin TJ, Webster, RA, Kenardy, JA (1997c). A synthesis of the findings from the Quake Impact Study: a two-year investigation of the Psychosocial sequelae of the 1989 Newcastle earthquake. *International Journal of Social Psychiatry and Psychiatric Epidemiology,* 32: 132-136; Kenardy, JA, Webster, RA, Lewin, TJ, Carr, VJ, Hazell, PL & Carter, GI (1996) Stress debriefing and patterns of recovery following a natural disaster. *Journal of Traumatic Stress*, 8: 37 - 50
18 Bryant, RA & Harvey, AG (2000). *Acute Stress Disorder: A handbook of theory, assessment, and treatment.* Washington, DC: American Psychological Association; Bryant, RA (2004). Assessing Acute Stress Disorder. In Wilson, JP & Keane, TM (eds). *Assessing Psychological Trauma and PTSD.* Second Edition. New York; Guildford Press: 492-512.
19 Pynoos, R, Frederick, C, Nader, K, Arroyo, W, Steinberg, A, Eth, S, Nunez, F & Fairbanks, L (1987a). Life threat and post-traumatic stress in school age children. *Archives of General Psychiatry*, 44: 1057-1063; Pynoos, R, Nader, K. Frederick, C, Gonda, L & Studer, M (1987b) Grief reactions in school age children following a sniper attack at school. *Israeli Journal of Psychology & Relationship Sciences*, 24: 53-63.
20 Raphael, B, Field, J & Kvelde, H (1980). Childhood Bereavement: A Prospective Study as a Possible Prelude to Future Preventive Intervention. In Anthony, EJ & Chiland, C (eds) *Preventive Psychiatry in an Age of Transition.* New York: Wiley, Volume 6.
21 McKissock, M, Director, National Centre for Childhood Grief; Wraith, R, (2000). Children and Debriefing: Theory, Interventions and Outcomes. In Raphael, B, Wilson, JP (eds), *Psychological Debriefing: Theory, Practice and Evidence.* New York, Cambridge University Press: 195-212.
22 Cohen, JA (2004). Early Mental Health Interventions for Trauma and Traumatic Loss in Children and Adolescents. In Litz, B (ed) *Early Intervention for Trauma and Traumatic Loss.* The Guilford Press, New York.
23 Middleton, W, Moylan, A, Raphael, B, Burnett, P, Martinek, N (1993). An international perspective on bereavement related concepts. *Australian and New Zealand Journal of Psychiatry* 27, 3: 457-63.
24 Bowlby, J (1980). *Attachment and Loss.* Volume 3. *Loss: Sadness and Depression.* London: Penguin Books.
25 Middleton, W (1995). *Bereavement phenomenology and the processes of resolution.* MD Thesis. University of Queensland, Australia.
26 Byrne, GJ, & Raphael, B (1994). A longitudinal study of bereavement phenomena in recently widowed elderly men. *Psychological Medicine*, 24: 411-421.
27 Murray, JA (1993). An Ache in their Hearts Resource Package. Brisbane: Department of Child Health, University of Queensland.
28 Kissane, DW, Bloch, S, McKenzie, M, McDowall, AC and Nitzan, R (1998). Family grief therapy: a preliminary account of a new model to promote healthy family functioning during palliative care and bereavement. *Psycho-oncology*, 7: 14–25.

29 Kelly, BJ, Burnett, PC, Pelusi, D, Badger, S, Varghese, FT and Robertson, MM (2004). Association Between Clinician Factors and a Patient's Wish to Hasten Death: Terminally Ill Cancer Patients and Their Doctors, *Psychosomatics,* 45: 311-318.

30 Kelly, B, Raphael, B, Burrows, G, Judd, F, Kernutt, G, Burnett, P, Perdices, M & Dunne, M (2000). Measuring psychological adjustment to HIV infection. *International Journal of Psychiatry in Medicine,* 30, 1: 41-59.

31 Snowdon, J (2001). Is depression more common in Old Age. *Australian and New Zealand Journal of Psychiatry*, 35, 6: 782-787.

32 Raphael, B (2000). Grief and Loss in Australian Society. In Kellehear, A (ed) *Death and Dying in Australia.* Oxford University Press, Melbourne.

33 Selby, J (1992). *A Cross Cultural/Religious Study of the Aspects of Death and Dying*. PhD Thesis. University of Queensland, Australia.

34 Mowll, J (2005). Viewing the Body: Families After Disaster. Presentation to the Second National Consensus Conference: Mental Health Response to Terrorism and Disasters, Sydney, New South Wales.

35 Care and Support Pack, NSW Department of Health.

36 NSW Homicide Victims Support Group.

37 Rynearson, EK (1984). Bereavement after homicide: a descriptive study. *American Journal of Psychiatry*, 141: 1452–1454.

38 Raphael, B, Dunsmore, J, and Wooding, S (2004). Terror and trauma in Bali: Australia's Mental Health Response. *Journal of Aggression, Maltreatment and Trauma* 9, 2: 245-256.

39 Lifton, RJ (1967). *Death in Life: Survivors of Hiroshima*, New York, Simon and Schuster.

40 Raphael, B, (2005). Terrorism and Disasters: Population Mental Health Approach American Psychiatric Association, 158th Annual Meeting, Atlanta, 23 May.

41 Rickarby, C, (1996). Architecture Thesis, Sydney University.

42 Pennebaker, JW & Sussman, JR (1988). Disclosure of Trauma and Psychosomatic Processes. *Social Medicine*, 26: 327-332.

43 Raphael, B & Wilson, J (eds) (2000). *Psychological Debriefing: Theory, Practice, and Evidence.* Cambridge University Press, Cambridge.

44 National Child Traumatic Stress Network and National Centre for PTSD (2005). *Psychological First Aid: Field Operations Guide*, September.

45 National Institute of Mental Health (2002). Mental health and mass violence: evidence-based early psychological interventions for victims/survivors of mass violence. A workshop to reach consensus on best practices. NIMH Publication 02-5138. Washington DC: US Government Printing Office. www.nimh.nih.gov/publicat/massviolence.pdf

46 Raphael, B (2005). *Occupational Mental Health Risks for Journalists.* Presentation to DART Centre for Journalism and Trauma, 2005 Conference, Sydney, New South Wales.

47 Engel, GL (1961). Is grief a disease? *Psychosomatic Medicine,* 23: 18-22.

48 Prigerson HG, Shear MK, Jacobs SC, Reynolds CF, III, Maciejewski PK, Davidson JR, Rosenheck RA, Pilkonis PA, Wortman CB, Williams JB, Widiger TA, Frank E, Kupfer DJ, Zisook S (1999). Consensus criteria for traumatic grief. A preliminary empirical test. *British Journal of Psychiatry* 174: 67-73; Horowitz, MJ, Siegel, B, Holen, A, Bonanno, GA, Milbrath, C & Stinson, CH (1997). Diagnostic criteria for complicated grief disorder, *American Journal of Psychiatry*. 154, 7, 904-910.

49 Management of Post-Traumatic Stress. Washington, DC: VA/DoD Clinical Practice Guideline Working Group, Veterans Health Administration, Department of Veterans Affairs and Health Affairs, Department of Defense, December 2003. Office of Quality and Performance publication 10Q-CPG/PTSD-04.

50 Lanius, RA, Hopper JW and Menon, RS (2003). Individual differences in a husband and wife who developed PTSD after a motor vehicle accident: A functional MRI Case Study. *American Journal of Psychiatry*, 160: 667-669; Najib, A, Lorberbaum, JP, Kose, S, Bohning, DF, and George, MS (2004). Regional brain activity in women grieving a romantic relationship break-up. *American Journal of Psychiatry,* 161: 2245-2256.

51 Figley, CR (1995). Compassion fatigue as secondary traumatic stress disorder: An overview. In CR Figley (ed) *Compassion Fatigue: Coping with Secondary Traumatic Stress Disorder in Those Who Treat the Traumatized*, New York: Brunner-Routledge: 1-20.

52. Nadelson, TN (2005). *Trained to Kill: Soldiers at War.* The John Hopkins University Press, Baltimore.

53 Wolfenstein, M (1966). Effects on adults of object loss in the first five years, *British Journal of Psychiatry*, 212: 1049-1069.

54 Raphael, B, Swan, P and Martinek, N (1998). Intergenerational Aspects of Trauma for Australian Aboriginal People. In Danieli, Y (ed) *An International Handbook of Multigenerational Legacies of Trauma*. Plenum Press, New York: 327 – 339.

55 Human Rights and Equal Opportunity Commission (HREOC) (1997). *Bringing Them Home.* AGPS Canberra.

56 National Mental Health Disaster Response Committee & Taskforce: Co-ordination of National Response to Terrorism and Disasters. Raphael, B (2005) University of Western Sydney.

Death and Dying in Australia – the Contribution of Palliative Care

Ian Maddocks

Death as the 'last taboo'

In the more open societies of the Western world where, increasingly, 'anything goes', death commonly has been characterised in recent decades as 'the last taboo'. In communities where issues of gender, sexual behaviour, race and religion were freely and openly discussed, mention of death was being avoided. Such a peception is still abroad. An exhibition at the Australian Museum in Sydney in 2003 was presented under that slogan, displayed on a striking street sign topped by three larger than life-size vultures, staring down at the passing crowds.
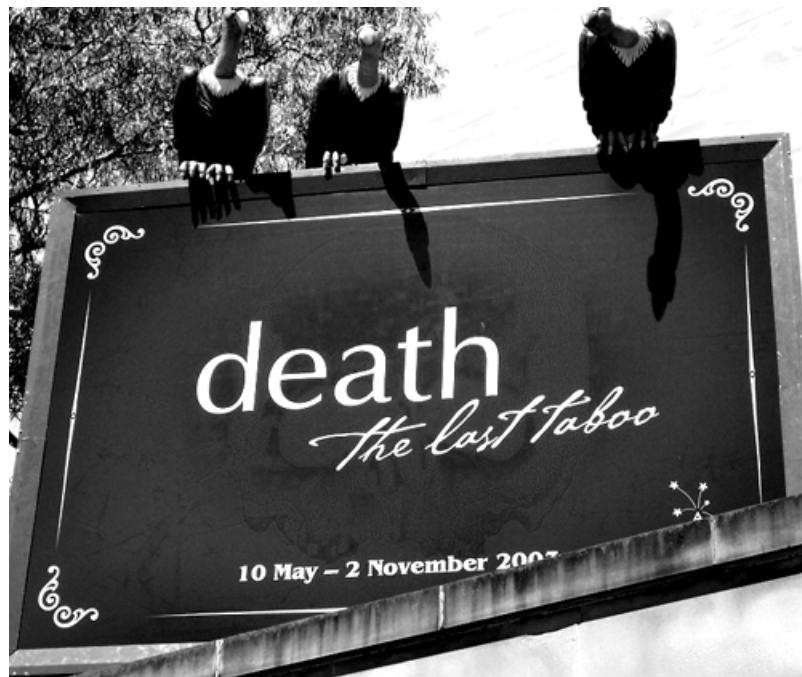
Sign advertising the Australian Museum's exhibit on death and dying, November 2003

(Elements of the exhibit can be recaptured on the Australian Museum website:
http://www.deathonline.net/)

Avoidance of engagement with the matter of death was facilitated by its reality having become separated from personal experience. Through the greater part of the twentieth century, death increasingly occurred less in the home among the members of the family, and more in the hospital, overseen by health professionals. In other cultures it might still be possible for home deaths to be conducted with due attention to traditional practices, and for funerals to be conducted within small communities with a full participation of people of all ages in familiar and solemnly observed rituals[1]. That was the rule in Western cultures 100 or more years ago (see The Dutch Funeral,

below), and remains so in many stable village communities in less developed countries.

The Dutch Funeral. Petrus van der Veiden, 1872; Collection Christchurch Art Gallery Te Puna o Waiwhetu. Gifted by Henry Charles Drury van Asch, 1932..

In the 1970s, I lived in a Papuan village where death was very much a community experience. People from all parts of the community would attend the family in the time before death, and would follow well-known customs for the preparation of the body after death and for a shared grieving; very moving singing supported the open wailing and tears of close family as they embraced and held the body, lying in the centre of the house.[2.]

In modern Western urban communities, however, younger people especially had no personal experience of sitting beside a dying person or seeing a dead body. Within medicine also, physicians who formerly might be expected to sit patiently and largely ineffectually by the bedside, found a new confidence after the arrival of antibiotics around mid-century. They took up the pursuit of a rational mastery over death with enthusiasm, rejoicing in, and applauded for, their new abilities to overcome illness and restore wellbeing. Medicine became increasingly sophisticated, technical and expert, engendering high expectations of success. Death became recognised as an unwelcome and disappointing outcome of intensive medical effort; a failure to be striven against at all cost.

It therefore became quite common to die in hospital receiving complex, if futile therapy, often delivered via attached nutrition and drainage tubes and machines supporting respiration that inhibited intimacy and communication and were uncomfortable for both patient and attending family members. If death occurred in such a situation, it was usual to attempt resuscitation using cardiac massage and intubation of the airway, a bizarre medical ritual that in advanced disease such as cancer was virtually never successful. If, on the other hand, intrusive treatment was not recommended, the patient was commonly moved to a verandah or side-room, receiving only cursory medical attention.

During the same period, death rituals became more removed from the provenance of the Church. Funerals were increasingly conducted by lay celebrants in funeral

company parlours or at cemeteries and crematoria. The notion that the dying individual was being called by God to a higher service, to be with the saints, to rejoin loved ones who had gone before, received far less emphasis. Death remained a matter of some awe, but was more likely to be just an end, and certainly a foreign and unfamiliar territory.

Reaction against hospital death, whether because of intrusive medical activity that was both unnecessary and useless or the general neglect of comfort and support for the patient recognised as dying, was a major stimulus for seeking a better way of assisting inevitable death. It was advanced cancer that raised most concern. Cancer incidence was rising, therapies were most often temporary in effectiveness and often uncomfortable, unrelieved pain was a common accompaniment of the terminal phase. Two possible interventions began to present themselves – palliative care and euthanasia. Both arose from the same concern, and sought the same end; both claimed to affirm patient choice. But they came from different directions.

The beginnings of palliative care

Dr Cecily Saunders is widely recognised as a pioneer in the establishment of this new discipline. As a young nurse in the 1940s, she experienced the poverty of comfort and support that was a common accompaniment of death in the cancer hospital, and she began to plan her life around that challenge. Training subsequently as a social worker, she received encouragement from her patients, and went on to take a medical degree, embodying in her own expertise, the team work of nurse, doctor and almoner. She was a Billy Graham convert, and accepted the religious traditions of the medieval monastery's care for the indigent and dying in adopting the term *hospice.* This was already familiar within modern religious orders such as the Little Company of Mary's Calvary hospitals and the Sisters of Charity's St Vincents hospitals. She died only this year, recognised throughout the world as a true hero, an individual who made a difference.

An important encouragement for the development of better care for the dying came through a new awareness of the effectiveness of simple medications for the relief of cancer pain, oral morphine in particular. The use of morphine mixtures by mouth, common in the 19th century, had been superceded in medical practice by injected morphine carefully restricted to standard doses; these were administered at infrequent intervals under strict medical supervision in the hope of 'avoiding addiction'. Cecily Saunders was one of the first to recognise the value of morphine mixtures and that the doses necessary to control pain varied enormously between individuals and needed no upper limit.

St Christopher's Hospice which she founded in South London in 1967 demonstrated a model of comprehensive care, addressing physical, emotional and spiritual need, that became a major influence, first in Britain, and later throughout the world. The pioneering work of other key individuals was also persuasive. In Montreal Dr Balfour Mount established an in-patient unit for dying people within the Magill Hospital. He coined the term 'palliative care' to describe his work, a label that stepped aside from the religious connotations of 'hospice'.

In the last decades of the 20th century the recognition that most cancer pain could be overcome by simple measures was taken up and promulgated by the World Health Organisation (WHO). Its mantra 'By mouth, by the clock and by the ladder' sought to introduce to all countries the message that cancer pain could be controlled by using

regular doses of oral morphine in however high a dose was necessary to achieve relief. Nevertheless, many countries cling, even today, to regulations governing the use of morphine and other opioid drugs that effectively prevent physicians from implementing WHO guidelines.

The further development of palliative care

WHO steadily expanded its interest from a focus on cancer pain management to more general affirmation of the value of palliative care in a definition that begins as follows:

> Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.[3]

The full definition represents those major aspects of palliative care that its practitioners claim distinguish their work within the wider world of medicine:

- The focus on quality of life rather than length of life;
- Including a patient's family members in its range of interest;
- Affirming dying as a normal process, and the intention to neither hasten nor delay the time of death;
- Relying on a team of workers to offer comprehensive care that embraces emotional and spiritual aspects as well as physical well being.

While it may be argued that individually these characteristics are not exclusive to palliative care, they together comprise an approach and a practice that has won increasing recognition as a discernible specialty. Other characteristics of palliative care that have been equally important in its development in Australia are:

- Its emphasis on a continuity of care with support continuing wherever the patient is housed – whether in hospital or aged care facility, in home or in a special in-patient unit for palliative care, often called a hospice.

- Its avoidance of doctor-dominance, with recognition in its teams that simple measures provided by attentive nursing may bring more comfort than any amount of clever diagnosis or prescribing.

- Its affirmation of patient-centredness, with the needs expressed by the patient remaining central in decision-making, encouraging patient choice in matters of therapy, site of care, nutrition, hygiene or companionship

In addition, palliative care has evolved a style of practice that affirms attitude as of equal importance with knowledge and skill. As the Romanian composer Celibidache said once of music in a radio interview: 'What is written in the score is everything except what is important', so, in palliative care, it is possible to assert that what is written in the textbooks (of which there is an increasing plethora) is everything except what is important; because it is the *way* care is delivered that makes it particularly effective. Again, that 'way' may be regarded as a basic component of any good health care practice – attentive, responsive and compassionate. However, it seems to assume a more central place in palliative care, partly because measures directed at combating underlying disease processes are being terminated.

Palliative care in Australia

Australia is second to none in achieving an almost universal spread of palliative care services in its population centres and rural areas. It has received more generous government funding than in other countries, and its workforce has been nourished by multiple education programs through dedicated University departments in nearly all States (embracing medical, nursing and sociological expertise) together with diverse in-house and distance study programs run in hospitals and through professional bodies. Its medical leadership has found specialist status with its own Chapter in the College of Physicians. Politically, it is held together by a federal peak body, Palliative Care Australia, representing all States and Territories, which is a channel for negotiation with government on matters of standards, accreditation and research priorities, and a vehicle for further encouraging the public profile and professional acceptance of the discipline.

Palliative care has flourished in Australia partly through coming into an accepted place within a well-funded national health scene, but also because of the effort and advocacy of key individuals and non-government organisations. Grass-roots recognition of the unmet needs of dying individuals and charitable fund-raising to establish the first programs and institutions to meet those needs have been important in the development of palliative care in most countries. They have had to start outside established medicine as 'extras' and only slowly come to find a place as an essential component of a comprehensive health care service. In the United Kingdom there was an emphasis on in-patient units – 'hospices'; in the USA community outreach services were more important. My own experience of recognition and engagement with palliative care is illustrative of how palliative care found acceptance in Australia.

A personal journey in palliative care

In 1978, not long returned from 14 years as a physician and academic in Papua, and employed as a sessional physician at Flinders Medical Centre in Adelaide, I read an article in the weekly *Guardian* by distinguished journalist Victor Zorza and his wife Rosemary.[4] They described the death from lymphoma of their daughter, Jane, in an English hospice near Oxford. What impressed me was the description of the serenity and comfort that was achieved for that young woman, not through surgery or chemotherapy, but through careful attention both to her physical and emotional needs in a setting of unhurried natural beauty, a country house with gardens. Even more persuasive, was how the care Jane received had empowered her to provide effective emotional comfort and support for her grieving parents. I took the article to the CEO of the hospital, suggesting that we, at Flinders, were doing death badly, and that it would be appropriate to establish a special unit where the comprehensive care described by Zorza could be offered. The suggestion met with sympathy, but was clearly beyond the scope of the hospital at that time.

A small committee, the Southern Hospice Association, formed at Flinders to further explore how our ideas of a 'hospice' could be established for patients in southern Adelaide. It attracted the personal interest of several hospital and community-based nurses, clergy, representatives of cancer care bodies and doctors. The group began to lobby for resources to bring better attention to dying patients. The Director of Nursing offered a senior cancer-care nurse to undertake a supportive role in both hospital and home for patients recognised as terminally-ill; and with a pain-management physician devoting two sessions a week to medical assessment, a small

program was established. The work was informed and inspired by what had already been established overseas.

There was already in Adelaide a small hospice ward at the Calvary Hospital. Also the small Kalyra hospital not far from Flinders, built in clean mountain air for tuberculosis sufferers and later providing opportunity for convalescent care, had set aside one of its older wards as a small hospice. This was achieving some local recognition, particularly for expert and dedicated nursing care, but was not readily accessible nor supported by adjacent specialist services.

It was clear to our small advocacy group that in the Australian setting, government funding would be of crucial importance and that palliative care needed to be built into the established health service as an integral component, not an extra. Dependence on charitable fund-raising would hardly ensure the healthy growth of what we could envisage – an integrated, comprehensive program of care that included hospital, home and hospice. Gradually we won additional funding to appoint a full-time junior doctor, a volunteer coordinator and a secretary. In the early 1980s the Flinders Medical Centre Volunteer organisation (a major supporter of our initiatives) provided funds for a study of the unmet needs of patients dying in southern Adelaide, gathering data from surveys of patients and families, family doctors, hospital and community nurses. The study demonstrated a poor understanding among family doctors about pain and symptom control, a lack of effective discharge planning from major hospitals, a lack of volunteers to support both hospital care and home care, and the absence of dedicated leadership and adequate in-patient facilities for respite care and terminal care of the dying.

That report became available at a critical time due to a combination of chances. The State government wished to close Kalyra Hospital, the Flinders University failed to win a new chair in Epidemiology (which went to rival Adelaide University); our argument, based on the report's findings, that the un-met needs of dying persons in southern Adelaide could no longer be ignored, led the then Minister for Health to see political advantage in an innovative venture. On his instructions the State Health Department refurbished an inpatient unit in the grounds of the Repatriation General Hospital as the Daw House Hospice and established at Flinders University the world's first Chair in Palliative Care, to which I was appointed in 1988.

Similar stories of individuals and groups, sensitised through example and story to an awareness of what is possible in enhancing the final journey of terminal illness for both patient and family, occur throughout the development of palliative care. Circumstances of chance and opportunity, and the leadership of key persons underlie the development of services such as the Silver Chain nursing service in Perth, the Institute of Palliative Medicine in Sydney and the Mount Olivet Hospice in Brisbane.

The alternative response: euthanasia

Dr Philip Nitschke, Australia's most prominent advocate of the individual's right to accept deliberately assisted dying, has recently published his argument in favour of legislation to allow that course under the title *Killing Me Softly*.[5] Palliative care could be characterised as 'Letting Me Die Softly', summarising the essential difference between these two methods of easing a painful or undignified death. Whereas palliative care intends not to hasten death but to support the terminal phase of an illness with skilled and effective care, advocates of euthanasia point to numerous examples where, they claim, comfort is not satisfactorily achieved. Dr Nitschke and the active euthanasia groups now established in all States assert the primacy of

individual autonomy and the need for maximal assistance to be available for any person whose advanced illness is causing severe distress with no prospect of relief, whether that distress is mainly physical, mental or social (such as feeling a burden to others, or wasting money that might go to the children). Because an individual in such circumstances may be unable to undertake suicide, even through ingesting a large dose of barbiturates, this opinion would ask that a doctor be allowed to administer medication, for example by an intravenous injection, and cause a rapid and painless demise.

The places where legislation to allow physician assistance to die has been introduced were summarised in a recent edition of *The Economist* (an indication of the broad public interest in this matter).[6]

The Netherlands: where the presence of 'lasting and unbearable suffering' certified by two doctors, allows a doctor to administer lethal medication. It has been estimated that approximately 10,000 requests for this assistance are made each year, and 3800 carried out.

The State of Oregon, USA: where an adult, certified as competent and 'terminally-ill' who makes two written requests 15 days apart, can receive a prescription for a fatal dose of barbiturate. Over a period of seven years since this legislation was passed, just over 200 individuals have accessed this help, not usually for unbearable physical discomfort, more usually for anxiety and the wish not to be a burden to others.

Belgium: where 'constant and unbearable suffering' must be present, and a voluntary, well-considered and repeated request, confirmed by two doctors, may allow a doctor to administer a lethal dose.

Switzerland: for a person in a terminal condition, who is mentally competent, free from pressure and who has considered alternatives such as palliative care, may have the assistance of a prescription for lethal medication to be self-administered.[6.]

In the United Kingdom, a current Bill before the House of Lords would allow a doctor to prescribe a lethal dose of medication, but the patient must self-administer it (as in Oregon). It seems unlikely to pass, however.

This brief summary indicates several of the difficulties inherent in writing legislation. There are problems of definition – 'terminally-ill', 'unbearable suffering', 'competent', 'voluntary' and 'free from pressure' may all be interpreted variously. Who is to interpret these? Is 'terminal' a matter of time: how many months until death; or of pathology: an incurable and progressive disease? Family pressure may not be overt or obvious to staff, but clearly appreciated by the patient. I recall one elderly woman who after admission to the hospice recovered sufficiently to go home, which she clearly hoped for. Her family, however, had already sold the house, and were left hoping that mother would die quickly and quietly.

As a palliative care physician, I have generally supported the common opinion within palliative care that opposes the introduction of laws that allow assisted suicide or euthanasia. My concern is not founded in a view of the inherent precious nature of human life, to be protected in every way and never cast off, but in the difficulty of getting legislation right, and the need to go slowly and carefully, taking note of overseas experience. Although surveys in Australia indicate that a majority of public opinion supports the introduction of the right to assisted dying, the questions asked in those surveys are simple and straightforward, and take little account of the

complexities that I recognise. It is certainly true that while pain may usually be satisfactorily controlled, the discomforts of frailty, dependency, fatigue and cognitive failure (as in dementia) do not lend themselves to ready relief. But even for those discomforts, palliative care staff will point to examples of individuals who have raised the question of assistance to die, only later to express gratitude that no such intervention was made. Staff recognise that sometimes a request to die quickly is a reflection of anger and disappointment, and that not infrequently those emotions dissipate in a supportive environment of care and companionship.

The lack of meaning and eroded sense of self that commonly accompany terminal illness can undergo a measure of restoration. 'Dignity therapy' designed for individuals close to the end of life, and piloted in Perth and in Canada, invited patients to discuss issues of most importance to them or what they would most want remembered.[7] The sessions were transcribed and returned for them to leave with family. Most reported a new sense of dignity and meaning following that opportunity. Fear of future discomfort may lead a cancer patient to wish for a quick exit; but another patient may say (as one has said to me), 'I'm glad I'm dying slowly of cancer. My son has said things to me in the last month I never thought I would hear him say'. I guess that the son was able to say, perhaps in a number of ways, 'I love you, Dad', and such a message has a powerful therapeutic effect.

It would be a pity to replace the supportive activity of palliative care with the option of the quick release for reasons spelled out by Alan Kellehear. He affirms the health promoting effect of palliative care in community life, dispelling atavistic fears, allowing closer communication within families in times of crisis, engendering selfless love among family carers and generous service by volunteers.[8]

I do not, at this time, support the introduction of legislation to allow assisted suicide, but I am an advocate for the promotion of effective patient choice regarding future options. It may lead to the preparation of an Advance Directive document setting out patient wishes to be used should a time arise when the individual is no longer competent to make a personal decision regarding care. Alternatively, discussion may lead to the appointment of a proxy decision-maker through a document called Medical Power of Attorney, making that appointee well aware of individual hopes and instructions for care in the face of major illness and incompetence. A program entitled *Respecting Patients' Choices* has recently been trialed in Adelaide to assist people to plan in advance the level of medical intervention they wish to accept for any future serious illness.[9] It has been introduced at a time when the well-publicised case of Terri Schiavo in the USA raised general awareness of the risk of being kept alive in a vegetative state. That may have been a factor in the result that one third of patients who were approached by trained clinicians to discuss future options chose to prepare an Advance Directive document.

In my view, it is the *discussion* around those available documents (still being considered or revised in a number of Australian States) that is more important than any particular message they might carry. It is virtually impossible to anticipate in any specific way future discomfort or how one will wish to have it managed. But if clinicians, together with family and trusted friends, have engaged in conversations stimulated by such documents, they will have the best chance of representing the patient's wishes later on, and of seeing them fulfilled.

The end of the taboo?

Has the concept of death as the 'last taboo' vanished from Australian society? Many will suggest that over the past thirty years it has at least diminished, mainly through the introduction of palliative care and the advocacy for euthanasia. As Kellehear noted in 2001, 'palliative care and euthanasia (are) the main storyline choices for dying in Australian society. Both have at their core the philosophy of a participatory style of heath care. Both have at their heart the current values of health care partnerships, the primacy of patient autonomy and decision-making, and the accommodation of diverse social ideas about "quality of life". The former choice is the object of growing government funding and policy development, while the latter is currently illegal'.[10]

An Adelaide lawyer, Megan Hender, moved by attending the funeral of a friend, noted that it was the first occasion where she had experienced death being talked about, almost celebrated. She felt that a taboo had been broken for her. She subsequently faced the death of her own mother following a major stroke, requiring some difficult decisions about how to manage a period of steady deterioration in an unresponsive loved and important other. She found it a moving and inspiring experience, which encouraged her to gather and publish stories from other people who had 'accompanied' a dying person; she aimed to contribute to a further breaking of the death taboo, and affirming that, through talking and writing about it, a time close to death can 'teach us something about how to live'.[11] She found a very positive message in her experience and in that of others. But a study by Aoun, for Palliative Care Australia, highlights important negatives for those faced with providing care for persons dying at home, referring to 'the nature and extent of the physical, social and psychological morbidity and economic disadvantage that caregivers suffer as a direct result of their caring role in general, and home palliative care in particular'.[12]

Evidence is widespread that death is no longer avoided as a topic for open consideration. There are discussions in all the media about euthanasia, death practices, and end-of-life care. At a community level it has been found easier to recruit volunteers to work in palliative care programs than in many other areas that seek volunteeer assistance, because they report great satisfaction in offering support to very dependent dying persons and their grieving family members. Funerals are less often framed by orders of service from missal or book of common prayer, but involve favourite music (often of the most modern kind), cheerful reminiscence, photographs and slide shows, as well as the opportunity for tears. Two palliative care nurses in Adelaide recently launched a 'personalised service' called *Wonderful Wakes*, inviting people to 'ensure a good send-off' by forward planning that may include preparation of biographical material, choice of music and flowers, and notices for the press. Their clients are invited also to choose the nature of their ceremony, using stories, poetry, humour, dance and music. 'Be creative!', their brochure urges.[13]

But the very popularity and apparent success of palliative care has raised some warnings in several observers. Has palliative care now begun to determine society's view of 'the good death', teaching us to require one where medical intervention ensures a gentle sedation, a painless slipping into oblivion? Beverley McNamara, an anthropologist who has studied palliative care practice in Perth, is not alone in asking whether palliative care has equated the 'good death' too closely with medical control of symptoms. She suggests that if that describes the hospice 'good death', it is an outdated concept, which fails to recognise that, even in a hospice, death is an

inevitable and embarrassing part of life rather than a celebration and a focus of social life.[14] A similar criticism is raised by Oliviere and Monroe, who examined the practice of palliative care in minority populations – ethnic groups, prisons, the gay community, the mentally ill, the very aged, the disabled. They point out that mainstream middle-class values predominate in palliative care. 'Despite our avowed cultural sensitivity, a "heroic script" defines much of what we do, with an insistence on independence, autonomy and disclosure'.[15] We need to remain aware also that in much of Asia (where I have lectured in over 10 countries during the last 15 years) those values are not at all apparent among palliative care patients. In Aboriginal society in Australia, also, there has been relatively little call upon palliative care services. This is partly because of other major health problems that attract greater attention – renal disease and diabetes, suicide, drug abuse and deaths from violence and vehicle accident; partly because many Aboriginal people recognise different priorities in relation to death and dying, including the urgent desire to return home to die on one's own land among one's own people.[16]

Future developments for palliative care

At the first Australian national conference on palliative care in 1991 Professor Alastair Campbell challenged his audience to consider that a major aim for palliative care might be to go out of business as a discipline, by introducing to all health care those principles that it held dear and sought to demonstrate: respect, compassion, teamwork, holistic attention to care. Perhaps because those who heard him were only starting out on a crusade to achieve recognition for palliative care, that message received little recognition. Through enthusiastic representation of the work, cooperative lobbying and public support, the discipline has continued to grow and to win increasing government funding, though largely for research projects and education initiatives, and not for more hospice places or more specialist positions. This official support does, however, reflect a recognition that the principles of palliative care have relevance across all of medicine, and need to be understood and implemented, where appropriate, by all staff involved in health care. There has been a growing interest in the application of palliative care principles and practice within aged care, and government funding has supported the development of guidelines for teaching and introducing palliative care in aged care facilities.[17]

There has been recognition also that palliative care has much to offer end-of-life care for diseases other than cancer, with texts addressing its application in advanced respiratory cardiac and renal disease. A major text on *Palliative Care in Neurology* appeared in 2004[18] and a further handbook encouraging neurologists in the palliative approach for chronic degenerative conditions such as Parkinson's disease, motor neurone disease or multiple sclerosis was published in 2005.[19]

All that is positive and hopeful. But can it be maintained? Will those who will be dying in 50 or 100 years time receive excellent palliative care support? The answer ought probably be a cautious 'no'. A major challenge facing future health services will be to ensure the adequate care of our rapidly increasing populations of aged and very aged persons. A brief examination of the Australian Bureau of Statistics web site will lead the observer to an interactive figure that demonstrates progressive population projections through to the year 2100, with a falling population of younger age groups and an enormous increase in the numbers of elderly.[20] Up to 50 per cent of people over 90 years of age are likely to be demented. Will it be possible to provide carers for these large numbers of frail, dependent and often demented individuals as they

approach their inevitable deaths? Options for their care can be proposed: bringing in young carers from nearby developing countries; or encouraging the younger aged to supplement their retirement incomes by employment as carers. Neither of those options is likely to gain rapid political or social acceptance. The demographic change will almost certainly increase the public demand that assisted suicide be allowed, perhaps with opportunity for an Advance Directive that 'If I become demented, I wish to be helped to die', but that would take us well beyond what is already regarded as politically too difficult to write into legislation.

Will palliative care have something to offer? Experience with the uncomfortable very elderly indicates that both physical and emotional comfort may be enhanced for some by the use of medications such as opioids that are well-established basic measures in palliative care. And the support of a palliative care physician or nurse can assist aged care staff to move from active encouragement of function to a greater focus on dignity and comfort. But the hospice palliative care that we have come to applaud demands a high level of trained staff (at Daw House we managed seven hours of trained staff time per day for each patient), a staff ratio that cannot be funded in an aged care institution. Whether palliative care experience will find expression in this approaching epidemic of frail aged is therefore questionable. Perhaps only the wealthy will be able to expect satisfactory care; the rest of us face a kind of custodial basic care, sequestered from younger members of society, and at risk of regular sedative medication to keep us compliant.

Ian Maddocks retired from the Chair of Palliative Care at Flinders University in 1998. He inaugurated early postgraduate award courses in palliative care in 1990, and was Foundation President of the first national body to represent palliative care in Australia.

Previous appointments included Foundation Dean of Medicine at the University of Papua New Guinea.

He chairs the National Consultative Committee on International Security Issues for the Department of Foreign Affairs.

1. Donnelly, S (2003). 'The nature is all there' – Cultural Influences on Care of the Dying. *Progress in Palliative Care*; 10: 61-64.
2. Maddocks, I (2002). 'Helaga: Death and Dying in Papua'. *Progress in Palliative Care*, 10: 69-71.
3. www.who.int/cancer/palliative/definition/en/

4. Zorza V, Zorza R (1978). 'Death of a Daughter', *The Guardian Weekly,* 118, 7: 1 and 19-20.
5. Nitschke P, Stewart F (2005). *Killing Me Softly. Voluntary Euthanasia and the Road to the Peaceful Pill.* Penguin Books, Camberwell.
6. (2005). 'The Art of Dying. The growing practice of euthanasia', *The Economist*, October: 15-22.
7. Chochinov HM, Hack T, Hassrd T, Kritjanson LJ, McClement S, Harlos M (2005). 'Dignity therapy: a novel psychotherapeutic intervention for patients near the end of life', *Journal of Clinical Oncology* 23, 24: 5520-5.
8. Kellehear A (1999). *Health Promoting Palliative Care*. Melbourne University Press.
9. Hunt, R (2005). Personal communication.
10. Kellehear A (2001). 'The changing face of dying in Australia', *Medical Journal of Australia*, 175: 508-510.
11. Hender, M (2004). *Saying Goodbye. Stories of Caring for the Dying*. ABC Books, Sydney.
12. Aoun, S (2004). 'The hardest thing we have ever done: The Social Impact of Caring for terminally Ill People in Australia', *Palliative Care Australia.*
13. www.wonderfulwakes.com.au.
14. McNamara B (2001). *Fragile Lives. Death, Dying and Care*. Allen and Unwin, Crows Nest.
15. Oliviere D, Munro B (2004). *Death, Dying and Social Differences*. OUP, Oxford.
16. Maddocks I, Rayner RG (2003). Issues in palliative care for indigenous communities, *Medical Journal of Australia*, 179: S17-19.
17. Addington JM, Higginson IJ (eds) (2001). *Palliative Care for Non-Cancer Patients,* OUP, Oxford.
18. Voltz R, Bernat JL, Borasio GD, Maddocks I, Oliver D, Portenoy RK (2004). *Palliative Care in Neurology*. OUP, Oxford.
19. Edith Cowan University. *Guidelines for a Palliative Approach in Residential Aged Care. National Palliative Care Program*. Available on www.health.gov.au.
20. Maddocks I, Brew, B, Waddy H. Williams I (2005). *Palliative Neurology*. Cambridge University Press, Cambridge.
21. www.abs.gov.au, and go to *Population Clock*, and *Animated Population Pyramid*.

Academy News

Workshop Program

The Workshop Committee met on 29 July this year at the University in Adelaide to consider applications for the 2006-2007 workshop round. The Committee received a record number of applications this year with a total of 26 compared with 14 last year. So far, the following applications have received approval with 9 resubmitted applications currently under consideration:

'The impact of globalisation on research education and training and the policy implications for Australia': Dr Margaret Kiley, Professor Frank Jackson, Margot Pearson, and Jim Cumming (Australian National University). Adelaide, 20-21 April 2006.

Research, and particularly research education and training, is changing in many ways, not least being the development of the internet which allows researchers to work with colleagues across the globe with almost as much ease and speed as with local colleagues. Such developments have also changed the nature of research and the ways in which we approach research and research education and training and the way in which we now operate within this richer and more diverse environment. This workshop aims to examine, from a social science research perspective, the issues of research education and training across all disciplines, and combinations of disciplines. The Convenors believe that such an approach will bring together the skills of social scientists and the issues of research education and training in a new and fruitful way.

'Migration challenges in the Asia-Pacific in the 21st century': Professors Amarjit Kaur (New England), Tessa Morris-Suzuki (ANU) and Ian Metcalfe (New England).

The Workshop Committee was successful in securing financial support for this workshop through the Australian National Commission for UNESCO Grant Scheme.

One of the biggest challenges facing our region in the 21st century is the large-scale cross-border movement of people, in particular: international labour migration; migration flows provoked by political instability and natural disasters, and human trafficking and people smuggling. The workshop will both build on and coordinate the efforts of a network of academics, NGOs, human rights activists, relevant government officials and others with interests in mobility and migration issues; gendered governance and security; and border-management strategies of major states in the region. Specifically, the workshop will focus on policy responses to migrants and refugees and migration processes at the border and across borders, against the backdrop of four major challenges: the regulation of populations and cross-border movements; security and epidemiological surveillance issues; international agreements; and new norms of global governance developed by regional and international NGOs and other international organisations.

Recently completed workshop: '*Taking Care of Work and Family: Policy Agendas for Australia':* Dr Marian Baird (Sydney) and Associate Professor Gillian Whitehouse (Queensland). University of Sydney, 17-18th November 2005.

Policy and Advocacy Program

The Policy and Advocacy Committee (PAC) was pleased to host the Academy's inaugural Policy-Research Roundtable on the 23 November at University House, Australian National University, on *Social Science Research and Public Policy: Narrowing the Divide*. The Roundtable was a targeted discussion on ways of effecting much closer links between the social sciences and Government policy-making communities, for mutual benefit. Chaired by Sue Richardson, the Roundtable brought together twenty two ASSA Fellows and senior public servants, including Lisa Paul (Secretary of the Department of Education, Science and Training) and Jeff Harmer (Secretary of the Department of Family and Community Services), to discuss the dimension of the issues confronting policy-makers and researchers and better ways to address shortcomings in the research-policy dynamic. Participants also contributed their views on how research and researchers have been used to good effect at various stages in the policy process, current issues faced by government and social sciences in addressing policy challenges and the capacities of the social sciences to assist in addressing these challenges. A detailed report on the outcomes of the Roundtable will appear in the next *Dialogue*.

The Research-Policy Roundtables are a new initiative to provide a forum where ASSA Fellows, social scientists and senior Public Servants can discuss the directions of policy development by the Government, and the use of scholarly research findings in that process. The PAC is currently considering three new Roundtables for 2006 on the following topical issues: The rethinking of wellbeing, building stronger communities, and investing in our children. Please contact Mark Pinoli, Assistant Director, if you have suggestions for future Roundtables on an area of mutual interest for the social sciences and government.

International Program

Australia-Netherlands Exchange Program

Dr Jeffrey Neilson, Research Fellow in the School of Geosciences, Division of Geography at the University of Sydney has reported on his visit to the Netherlands in May.

Very little has been written on the early development of coffee production and trade on the Indonesian island of Sulawesi. This is particularly true of the southwest peninsula, which presently has a reputation for producing a highly-priced, gourmet product in the international specialty coffee sector. The perceived quality of Sulawesi coffee is partially due to the unique relationship between particular growing communities and the commodity they produce, which has evolved over many years. The primary aim of this research visit was to gain access to archival material held in the Netherlands pertaining to the early development of the coffee industry in South Sulawesi. Professor Peter Boomgaard of the Royal Institute of Linguistics and Anthropology (KITLV), located in Leiden, acted as the principal counterpart for the visit. During my stay, I was able to access collections held at KITLV as well those held at the University of Leiden library and the Royal Tropical Institute (KIT) in Amsterdam.

The sheer volume and diversity of archival material related to Indonesian history held in the Netherlands is, understandably, staggering. Much of this material can only be reasonably accessed through personal visits to the various research institutes and repositories located in the Netherlands. Through the Australia-Netherlands exchange program, facilitated by the Academy of Social Sciences in Australia and the Royal Netherlands Academy of Arts and Sciences, I was fortunate to have been provided with the opportunity to search through some of these collections. During my visit to Leiden and Amsterdam, I located a number of sources relevant to the early development of coffee in South Sulawesi. Some of these sources included standard references such as the *Koloniaal Verslag* and the *Tijdschrift voor Indische Taal-, Land-, en Volkenkunde (TBG)*, whilst others were somewhat more obscure. From a personal perspective, some of the highlights of the collection that I sighted were:

- A detailed and comprehensive overview of the regional coffee trade by B Veth (1883) titled *Eenige Handelsprodukten van de Macassaarsche Markt,*

- *Memorie van overgave betreffende de onder-afdeeling Makale* by EAJ Nobele (1926), published in *Tijdschrift voor Indische Taal-, Land-, en Volkenkunde,*

- *Mededeleelingen van de Afdeeling Landbouw No 11: Agronomische Beschrijving van de koffiecultuur in de Zuidelijke Toradjalanden* (a superb account by BH Paerels of traditional coffee production practices in the northern part of the peninsula soon after the establishment of a colonial presence, and published by the *Departement van Landbouw, Nijverheid, en Handel* in 1927).

From these various source materials, it has been possible to identify two divergent historical developments in the early South Sulawesi coffee industry: the establishment of plantations under a colonial regime in the Southern Districts of Bonthain, Bulukumba and Gowa; and the pre-colonial adoption of coffee growing by indigenous farmers in the Latimojong Mountain districts further to the north. Whilst Makassar-based traders and administrators appear to have had limited knowledge concerning the conditions of production prior to the colonial penetration of the highlands in 1905-1906, there was an early recognition that the so-called 'Boengie' coffee grown in the highlands was a superior quality. The descriptions of cultivation and trade which followed the colonial presence provide some clues to an ethnographic basis for this claim.

The translation and analysis of many of the documents I collected during the visit is still incomplete. It is proposed that these historic materials will eventually be integrated with the results of ongoing research I am conducting on contemporary coffee supply chains in Sulawesi to produce a book for publication. jneilson@geosci.usyd.edu.au.

Dr Eric Beerkens, Postdoctoral Research Fellow in the Faculty of Education and Social Work at the University of Sydney has reported on his October- November visit to The Netherlands.

My visit was related to a research project, 'Knowledge and Innovation in the Asian Competition State', a 3-year postdoctoral research project conducted at the Faculty of Education and Social Work, University of Sydney. This project focuses on innovation policies and higher education policies in Singapore, Malaysia and Indonesia. The purpose of the visit was threefold. First I wanted to talk with scholars and students from sociology, political science and public policy about my research and about mutual interests. Secondly, I wanted to know more about Dutch and European

developments in the field of innovation policy. Since I am familiar with the Dutch and European political, social and cultural contexts, this knowledge will enable me to also better contextualise Southeast Asian policies in this field. A third purpose was to make use of the library collection of the centre I visited.

From 13 October until 4 November I was based at the Centre for Higher Education Policy Studies (CHEPS) of the University of Twente, Enschede in the Eastern part of the Netherlands. CHEPS is currently revising its research program for the coming five years and seems to be giving more attention to research policies and science and technology policies, in addition to higher education policies. My research is making a similar shift and therefore the discussions within CHEPS have proven to be very interesting for my research. In addition to the personal meetings I had with the researchers in CHEPS, I also organised a seminar on 'The Global Spread of the Idea of the Knowledge Society' on 31 October. All seemed to benefit from my presentation and the lively discussion that followed. The 10-15 researchers and PhD students that attended the seminar gave me valuable advice regarding directions for the future of the research project. We also discussed some of the PhD work that is currently being done at CHEPS. On the basis of material that was sent to me in advance (papers or chapters of the dissertations), I commented on and discussed their work with them. As well as the expertise available within CHEPS, it also houses one of the largest collections in the world on higher education and research policies.

I also visited the Innovatieplatform (Innovation Platform) in The Hague. This platform consists of Ministers (the Dutch Prime Minister, Minister of Education and Minister of Economic Affairs), people from business and people from higher education and/or science and technology. Staff there gave me a good overview of the current activities in the field of innovation in the Netherlands and the political and administrative challenges such innovation activities bring along. At the Free University (VU) in Amsterdam I heard the inaugural speech of Professor Henk Overbeek. He is a specialist in Global Governance and Transnational Relations in the Political Science Department of the VU and spoke about international relations and the commodification of higher education. Later, I had a meeting with Professor Frans van Vught, former President of the University of Twente and now (among other functions) a member of the Innovation Platform, Member of the Board of the European University Association and special advisor to Barosso, the Chairman of the European Commission. With him I discussed issues related to higher education and national innovation and issues related to the Lisbon process in Europe. Finally, on 28 November I had a meeting with Dr Loet Leydesdorff at the University of Amsterdam. He works on the relations between industry, government and universities from an evolutionary perspective and is co-editor of the book *Universities and the Global Knowledge Economy: A Triple Helix of University-Industry-Government Relations.*

Overall, the visit has been a valuable experience for me and hopefully also for the researchers and PhD students I met. I have learned a lot about Dutch and European innovation and higher education policies and I am sure that this knowledge will help me in the further stages of my research. I also hope that my seminar and all the personal discussions have helped to contribute to the future work of CHEPS researchers. There are clear links with some of the new research projects in CHEPS and my current research project. Future cooperation and publications will be explored in some cases and are in progress in others. In particular, collaboration with Professor Marijk van der Wende, who was my principal host at CHEPS, will continue in the

future (a joint article will be published in *Higher Education* in 2006-07 and we are currently exploring areas of continued cooperation).

Due to the excellent arrangements, working facilities and secretarial support offered by CHEPS, I have been able to take full advantage of my 3 weeks in the Netherlands and to turn it into a most valuable experience. I am very grateful for the support received from ASSA and KNAW.

Reports from Workshops

Reinventing Gender Equality and the Political

Carol Bacchi and Toni Schofield

The workshop was prompted by the need to revisit the topic of gender equality given international developments in the field and some recent policy changes in Australia. The former includes the proliferation of gender mainstreaming programs in many countries and international organisations, with support for this trend in Australia indicated by the relocation of the Office of the Status of Women from the Prime Minister's Department to the Department of Family and Community. The latter include: the $7 million Federal Government initiative, Boys' Education Lighthouse Schools, the advent of 'men's health' policies, the creation of men-only scholarships for men teachers and an agenda aimed at reducing men's child support payments, substantively a gender issue given the predominance of single mothers as primary carers. The expressed goal of the workshop was to contribute to understanding the complexity of the dynamics contributing to gender inequality and, building on this understanding, to postulate ways forward in policy development. There was general agreement that, in times like these, it is crucial to identify new ways of thinking about the issue and of identifying strategies for change that are innovative and politically astute.

The workshop, organised by Carol Bacchi (Politics Discipline, University of Adelaide) and Toni Schofield (Faculty of Health Sciences, The University of Sydney), took place at The University of Sydney, 28-29 September 2005. It was divided into six sessions, five of which were dedicated to the work of specific researchers. The overall theme of 'what should be done?' united the proceedings and formed the basis for discussion in the sixth session, chaired by the federal Sex Discrimination Commissioner, Pru Goward.

Gender regimes and change strategies

Workshop Paper: 'Gender Politics and Gender Research: Bringing the Two Together', Toni Schofield, RW Connell and Sue Goodwin

This session concentrated on the findings of an important Linkage grant-funded research project (Gender Equity in Public Institutions, GEPI), which examined the gender dynamics operating in the NSW public service. The GEPI project, which took place between 2000 and 2003, involved a partnership between the NSW Premier's Department and The University of Sydney. Its broad intention was to get below the surface of gender equity issues, the well-known statistics indicating women's under-representation in positions of influence, and to identify the organisational processes that give rise to the statistics. RW Connell explained the rationale for the project: where is gender equality in the public service, twenty years on? To answer the question the GEPI project initiated a number of studies and adopted a collaborative design. The project faced particular challenges due to broad debates regarding feminism in the public sector and to the wider phenomenon of new public management, which expected that research operate on a different paradigm, characterised by predetermined 'milestones' and 'deliverables'.

GEPI incorporated an understanding of gender as an organisational property rather than a characteristic of people. The dynamics of gender were described through four

foci: a gender division of labour; gender relations of power; emotion and human relations; and gender culture and symbolism. On the basis of these four gender dimensions the researchers identified three gender regimes in policy processes: a masculine hegemonic regime; a regime of feminist presence and masculinist backlash; and a regime of feminist mainstreaming. These regimes, it was argued, offer dramatically contrasting prospects for advancing gender equality, with the regime of feminist mainstreaming offering the most favourable prospects.

Identifying three regimes in this way has a number of important political implications. First, it overcomes the tendency to generalise the experiences of women in state institutions as patriarchal. Second, by highlighting the specific dynamics that constitute a regime, it opens up the possibility for novel forms of intervention. As Sue Goodwin emphasised, the GEPI study offered public servants a new language and method for describing their experiences, empowering them to devise new strategies. It also placed an emphasis upon institutional restructuring, finding ways to alter organisational processes that produced asymmetrical gender outcomes. Among the most important of these was a proposal to introduce a quota of part-time jobs in the higher echelons of public agencies.

Making gender analysis work

Workshop Paper: 'Gender Analysis and Social Change: Testing the Water', Carol Bacchi, Joan Eveline, Jennifer Binns, Catherine Mackenzie, Susan Harwood.

The second session offered preliminary feedback on a large Linkage-funded project headed in South Australia and Western Australia by Carol Bacchi and Joan Eveline respectively. The project is designed to test forms of gender analysis in use in Canada and The Netherlands and, through an iterative process of close interaction with policy actors, to evolve a method or methods of gender analysis appropriate to Australian contexts.

Gender analysis is a form of analysis applied to mainstream policies to ensure equitable outcomes for diverse groups of women and men. In common parlance the language of gender mainstreaming is used to describe this policy development, though the researchers highlighted the contested nature of this development and the need to direct attention to the specifics of how gender mainstreaming and gender analysis are done.

This focus on process led to several insights. The research indicates that it is inappropriate and counterproductive to impose a model of gender analysis upon policy actors in the form of a set of recommendations and then to expect them to apply it in useful ways. Rather there is a need to focus on the practicalities of implementation, working with public agency workers to identify spaces for change, and to identify and challenge practices that reproduce 'ruling relations'.

It follows that, in order to make gender analysis a meaningful change process, it must be resourced adequately, to allow policy workers time to reflect on the complexity of the issues they are asked to address, and time and space to consult actively with community groups. More broadly, the researchers argue, it is necessary to challenge the current anti-intellectualism in the public sector, a 'counting culture' that reinforces neo-liberal premises about the way the world works. The test of a democracy, they claim, is the degree to which public sector workers and the community in general are empowered to engage in shaping and delivering programs, projects and policies.

Challenging gender stereotypes in styles of management

Workshop Paper: 'Gendered Cultural Processes: Senior Executive Women, Decision-Making and Organisational Change', Colleen Chesterman, Anne Ross-Smith and Margaret Peters.

The third session focused on the findings of a large Linkage Grant project that studied the perceptions of 255 senior executives in Australian organisations from the higher education, public and private sectors about gender and styles of management. The study found that, when there was a 'critical mass' (around 30 per cent) of women employed at senior levels, both women and men believed that women brought major differences to management styles and practices. Women were described as encouraging to staff and colleagues, and as showing 'emotional labour'.

The researchers were disheartened by the tendency to impose simple gender stereotypes upon complex processes. They argued that the focus on 'feminised' ways of managing obstructs critical evaluation of wider gendered hierarchies and social relations within which managerial behaviour operates. On this point they emphasised the ways in which the emergence of the 'greedy institution' poses real dilemmas for senior women who, despite the availability of some flexible work practices, felt a need to value their family less than their career. Workers had to be visible and available. This 'visibility panopticon' invited surveillance and self-regulation.

The researchers pose a challenge to our impoverished language in the discussion of these complex issues and the readiness with which we tend to impose myths upon each other. In their view restructuring of organisational power, culture and decision-making is not best served by emphasising the personal characteristics of women managers. Long-term organisational change requires more than discursive change; it requires structural change.

Research governance and gender

Workshop Paper: 'Suiting Ourselves: Research Governance in a New Generation University', Jane Hobson and Sheila Shaver.

The fourth session directed attention to recent changes in education policies through a focus on research governance at the University of Western Sydney Australia (UWS). Sheila Shaver and Jane Hobson explained that the history of the University seemed to promise good outcomes for women researchers, a promise that has had mixed results. The researchers identified a paradox in the University's mission and history. On the one hand the history of this 'new generation university', with strengths in areas where women have traditionally played significant roles, such as teaching and nursing, has meant that women occupy relatively senior positions at the University. On the other hand, the fact that UWS was an institution without a history of research training has meant that the University's research profile remains relatively underdeveloped. Specifically, 'pink pockets' of teaching and nursing have not realised their research potential.

The University has responded to this dilemma with a collegial focus on teaching loads, early career development, disciplinary interests, a tradition of academic autonomy and freedom - a focus the researchers describe as 'nurturant' but localist. They emphasised the tension between these initiatives and managerial responses to the current Nelson education reform agenda. The federal policy emphasis on 'performance' now, they argue, sits in tension with the collegial efforts to 'nurture'. In their view this raises important questions about the nature of a higher education institution where people may differentially thrive.

Challenging men's privilege

Workshop Paper: 'Undoing Men's Privilege: Advancing Gender Equality in Public Institutions', Michael Flood and Bob Pease.

In the fifth session Michael Flood and Bob Pease argued the case for shifting attention from women's disadvantage to men's privilege. They referred to earlier feminist work on the politics of advantage to illustrate the difficulty of moving the discussion in this direction. Moving carefully between structural and individual explanations of the 'problem', they emphasised the need for individual men to take some responsibility for the ways in which men 'do' dominance. They expressed concern at the way in which many progressives let members of privileged groups 'off the hook'.

Privilege refers to 'systematically conferred advantages individuals enjoy by virtue of their membership in dominant groups with access to resources and institutional power that are beyond the common advantages of marginalised citizens'. It has four key characteristics: it is invisible, normative, naturalised, and bestows a sense of entitlement.

The researchers emphasised the processes of 'accomplishing' gender, race and other forms of difference, echoing understandings of gender, developed in previous sessions, as a dynamic social process rather than as a category of individuals. They also stressed the importance of developing an 'intersectional theory' of privilege, suggesting the need to reflect upon those times when we are dominant and those when we are subordinate to identify the way in which the processes of domination and subordination interact.

Acknowledging that an individual's thinking is shaped by institutional and cultural forces, training programs for men that name and critically interrogate men's privilege in public sector organisations (in the context of an intersectional analysis) were endorsed as a useful form of educational work.

Policy implications

The federal Sex Discrimination Commissioner, Pru Goward (Human Rights and Equal Opportunity Commission), chaired the final session, which brought together the insights generated over the two-day workshop. There were advantages to both universities and policymakers, she noted, in research partnerships between the sectors. As an example she pointed to the Gender Analysis of Policy introductory brochure, designed by Carol Bacchi and Joan Eveline, and published by the Office for Women's Policy, Western Australia (May 2005). She stressed that policy often starts quite randomly, in the idiosyncratic ideas of a minister, and that proposals for change need somehow to be made to fit into the general policy directions of the Federal Government. As one example, Commissioner Goward doubted that the timing was right to mount an analysis of 'men's privilege', given the current view that men are somehow 'slipping' or falling behind. At the same time she thought it might well be possible to raise questions about the risks of having too many men in an organisation, or getting rid of the word 'male' and talking about how people tend to reproduce themselves in appointment procedures. In Commissioner Goward's view, the Western Australian Ministerial Review of the Gender Pay Gap was an excellent example of the type of research that can provide gender-based material to which the federal government must form a response, given current directions in industrial relations policy. Along related lines Commissioner Goward suggested that it might be easier to

defend reforms like maternity leave and family friendly workplaces under the rubric of 'family impact assessment' than 'gender impact assessment'.

At the same time, if gender analysis could be linked to 'poor outcomes' in terms of health or the skills shortage, it had a better chance of a favourable reception. Jo Tilly (Human Rights and Equal Opportunity Commission) suggested that both the concept of 'gender regime' and analytic tools like gender analysis could prove useful if they were translated into something user-friendly for public service workers. This note of realism was not lost on researchers sensitive to the need to be strategic in the design of reform proposals. In this context, the proposal to introduce quotas on part-time senior-level positions in the public sector was discussed as an example. While acknowledging that there were no guarantees that such a strategy would increase women's participation in senior-level positions, Schofield, Connell and Goodwin argued that the focus on the reorganisation of jobs, or the 'labour process', was likely to make it more attractive to policy makers than mandating more positions for women. Such a proposal, they explained, offered a wider pool of skilled staff and, therefore, improved recruitment prospects for employers. It also provided greater flexibility for qualified and experienced staff unable or unwilling to work in full-time senior-level jobs because of family and/or other significant community commitments. As Commissioner Goward noted, one of the advantages of such a proposal was that it did not require reform of the Sex Discrimination Act.

Links between language and method featured significantly in recommendations for strategic interventions. The language of 'gender regime' and 'unfinished business' offered policy workers new ways to reflect on the equality agenda, while there was caution expressed about invoking stereotypes as ways of describing management styles. At the same time the structural constraints imposed by neo-liberal policies in the domains of education and workplace relations highlighted the need for contestation at this level.

Participants emphasised the importance of paying heed to specific contextual factors in shaping reform recommendations. What is possible in one setting may not get a hearing in another setting.

RW Connell stressed the need for new generation thinking about gender equality politics. He identified the following suggestions coming out of this workshop:

Strategies for Change

- identifying 'mainstream' policies as venues for intervention
- including men as agents of change
- emphasising the 'outcomes' and 'benefits' of reform proposals

Cultural Change

- recasting the picture of inequality by using statistics as measures of advantage rather than disadvantage, and talking relationally rather than categorically about gender
- tackling gender stereotypes (again!)

Organisational Reform

- producing templates for local gender assessments to allow organisations to understand their own gender regimes
- offering practical methods for managers to encourage more equal workplace gender relations, drawing where appropriate on the new public management

- finding ways to target organisational processes that produce gender inequality rather than targeting groups, eg 'quotas' for part-time senior- level jobs

References: Bailey, Alison (1998). 'Privilege: Expanding on Marilyn Fry's Oppression', *Journal of Social Philosophy* 29, 3; Bacchi, Carol (2005). 'Affirmative Action for Men: "A test of commonsense"?' *Just Policy*, 36, March: 5-12; 'Boys' Education Lighthouse Schools Project', *Public Education Voice*, 19, 3. http://www.acsso.org.au/pev3.htm (Accessed 30/10/05); Eveline, J (1994). 'The Politics of Advantage', *Australian Feminist Studies*, 19: 129-54; Office for Women's Policy (2005). *Gender Analysis: Making Policies, Programs and Services Gender-Aware.* Perth: Office for Women's Policy; Schofield, T (2004). *Boutique Health: Gender and Equity in Health Policy.* Australian Health Policy Institute Commissioned Paper Series 2004/08, The University of Sydney; Smith, Dorothy (1999). *Writing the Social: Critique, Theory, and Investigations.* Toronto: University of Toronto Press; Todd, T and Eveline, J (2004). *Report on the Review of the Gender Pay Gap in Western Australia,* Ministry of Consumer and Employment Protection, Perth; 'New deal for lone dads', *The Australian*, 29 September 2005.

Publication plans

Papers from the workshop provide the core material for a proposed special edition of *Policy & Society: Journal of Public, Foreign and Global Policy*. The papers will be revised in response to discussions at the workshop and will then be subjected to a review process. These papers may be supplemented by others from researchers who had originally planned to participate in the workshop and/or from other leading researchers in the field.

How Organisations Connect: Investing in Communication

Stuart Macintyre, Simon Ville and Gordon Boyce

Introduction

This workshop was organised by Professors Simon Ville (University of Wollongong), Gordon Boyce (Queensland University of Technology, QUT) and Stuart Macintyre (University of Melbourne) at the Queensland University of Technology, 26-7 August 2005. Additional funding and administrative support was kindly provided by the School of International Business, QUT. The workshop discussed the challenges facing organisations in seeking to build successful and sustaining external relationships with other bodies.

Communication between organisations has always been an important and beneficial form of collaboration. The inter-organisational domain provides the setting for a mutual exchange of complementary competences with the prospect of building synergies if the collaboration is sufficiently wide-ranging and sustained. Unfortunately many, perhaps most, inte-rorganisational collaborations fail to satisfy the expectations

of their initiators. We argue that this is because most organisations under-invest in the complex and multifaceted task of external communication relative to the potential benefits it can yield, instead concentrating their resources upon the productivity and efficiency of internal operations. Some of the key themes that authors and discussants were asked to consider were as follows:

1. Has there been an underinvestment in managing inter-organisational relationships, that is, neglect of the 'external architecture'? What skills are needed to make the most of the external architecture? What are the advantageous features of it?
2. What is distinctive about negotiating styles, for better or worse, in terms of their capacity to help build congruence?
3. What particular obstacles are encountered and solutions presented for communicating across sectors (such as public vs private), national, and other 'cultural borders'? What types of intermediary capabilities are particularly valuable in forging inter-organisational relationships?
4. What type of role, if any, is there for third parties or bridging organisations?
5. Are there potential shifts in the institutional environment that might improve inter-organisational communication?

Therefore, the aim of this workshop was to increase our understanding of why inter-organisational collaboration has a high failure rate and establish what can be done to improve the prospects of success. We sought to do this by focusing on the development of institutional norms governing patterns of interaction and through the examination of historical case studies of collaboration. Economic history, in particular, provides a fertile setting for investigating many of these issues, particularly as they relate to business enterprises, labour markets, and economic policy. The workshop therefore provided an opportunity to highlight the importance of work being undertaken in economic history and its nexus with related disciplines in the social sciences in Australia. We believe that this cross-disciplinary role of economic history, partly the result of recent institutional changes at Australian universities but also within a longer tradition of research, is not very well known or closely understood within the social science community. Many of the contributors were drawn from an economic history background but have linked their work across, and contributed to, other disciplines including economics, history, management, organisational behaviour, and international business. The workshop included a mix of senior scholars, middle rank academics, and early career researchers.

Program

Full draft papers were circulated to all participants a month beforehand, authors were given an opportunity to address their paper at the workshop, followed by comments from an expert discussant, and then discussion amongst all workshop participants. The program sessions were organised around one or more key issues.

The first session provided some theoretical and conceptual frameworks. Clegg contrasted collaboration with a more common human inclination towards hierarchy as alternative forms of authority. Heterarchy (multiple power bases) and responsible autonomy (through accountability) provide the environment for collaboration. 'Inter-organisational synthesis' represents the achievement of successful collaboration. While this process need not be linear, nor does it necessarily require an environment of harmony and uniformity of viewpoint, certain building blocks are necessary. These include agreeing on a vision and mission, negotiating a cultural order, and providing leadership with high 'emotional intelligence', that is able to read the context and

understand each stakeholder's needs, wants and expectations. Trusting relationships, but with some degree of circumspection, and the language and technology of communication play an additional role in effective relationship building. Boyce complemented Clegg's paper by exploring the idea of communicating infrastructures. He explained these as cognitive maps or negotiating frameworks that shape and focus discussion, and behavioural standards that determine the form and range of discourse, adjustment, and learning. Infrastructures can either be public, providing a standard template, or private and so customised. In addition, they operate at different levels from encompassing meta-structures to more specialised subsidiary structures. Empirical examples provided include the 'gentlemanly capitalism' meta-structure, whose norms heavily influenced the manner in which business and social organisations interacted in nineteenth-century Britain.

In the second session, inter-organisational communication in international business was the focus. Weickhardt, former Chief Executive Officer of Orica, provided an informal overview of the problems of communicating across geographic and cultural borders experienced by a large international organisation. Schmelter-Kelly's focus was on the communication challenges faced by western multinationals in building relationships with domestic firms in an East European economy. Language and cultural differences were seen as the key barriers to effective communication. In session 3, Ville and Merrett analysed the history of the Melbourne Wool Brokers Association, drawing attention to the strong associative capacity of this bridging organisation and its ability to achieve efficiency improvements for the rapidly expanding wool trade. In the same session, Shanahan reviewed the long term historical changes that have altered the institutional framework surrounding the employment relationship and in particular the employment contract in Australia. The importance of institutional structures have ebbed and flowed over time, as governance structures such as the common law, criminal law, labour statutes, wages boards, a range of conciliation and arbitration courts and commissions, and union and employer associations have been used to intervene in, and regulate, the employer-employee relationship. Session 4 focused on technology and innovation as part of the process and outcome of inter-organisational relationships. Mann's study of inter-organisational collaborations in R&D found these to be most successful when partnerships were long term, strong, and involved few members. Mowatt examined the interrelationship between innovation and the control of supply chains in two consumer industries in Britain, groceries and magazine publishing. A helpful distinction was drawn between control and innovation networks. Ratten investigated alliances in the Australian ICT sector, finding that prior collaborative experience and social capital connections between organisations were important determinants of effective communication. In session five, Singleton focused on the evolving and fluctuating relationships between the central bank, the government, and the trading banks in Australia since the early twentieth century. Several factors have shaped interaction in the monetary system, including shared beliefs and values (or their absence), legislative arrangements, the quality of communications, and personalities. Ryan and Brown examined contractual arrangements between government and community organisations and the resulting implications for the distribution and use of power. Variation in the provisions of these contracts provided a basis for developing a typology of different state-community sector relations, namely: state-directed, paternalism, and partnerships.

The final session of the workshop, led by the convenors, was a broad-ranging discussion of the workshop papers, drawing some general conclusions and policy implications. In addition, a mapping exercise was undertaken of the various approaches that had been used to address the central question of how to build effective inter-organisational relationships. This produced a template document that has been sent back to authors for guidance in revising their papers for the workshop publication. There are many approaches to relationship building and we do not expect to produce a single or entirely consistent perspective. However, individually the papers provide rich evidence of the different historical and contemporary circumstances in which inter-organisational collaboration has occurred.

Policy and conceptual implications

The use of history and interdisciplinarity provides important conceptual insights and policy implications in the field of inter-organisational relations. It confirms that relationship building through collaboration rarely comes naturally to organisations and individuals. Left to their own, most people will continue to look inwards and focus on the hierarchical relationships of their prime organisational affiliation, be it the firm, government, or other setting. It is frequently a trigger that pushes organisations into collaboration, historically often a crisis. Policy is important to nourish the benefits of collaboration in 'normal' circumstances. The long historical view reveals that there are overarching communicating infrastructures that need to be understood and then harnessed to make connections and build bridges. At the same time, the institutional forces that govern relationships in a nation evolve gradually and are not easily susceptible to sudden changes in the rules of the game; policy must be circumspect, and understand and work with institutional historical foundations.

On the other hand, personalities and their interplay can make a difference in the shorter run. Choosing the right mix matters. While social capital and other sources of cohesion help to smooth relationship building, little of additional value will be achieved without some diversity of opinions and approaches. Thus, a transaction cost minimising environment is not necessarily preferable. More specifically, strong, enduring relationships based on few partners have been shown to generate highly beneficial outcomes. Successful cooperation may be helped by previous collaborative experience or, failing that, the organisation of workshops designed to impart an understanding of working in an environment of structured bargaining. Other educational roles might include the promotion of ethical standards and modes of conduct in business that foster outward-looking cultures based on trust and relationship building, and discourage opportunism. By example and suggestion, government agencies should seek to create within their own jurisdictions cultures that encourage communication, deal-making, and fluidity in the stock of prospective bargainers.

Bridging or third party organisations can play a role in building successful inter-organisational collaboration. Such organisations, including, for example, industry associations, should not be viewed as necessarily rent-seeking vehicles of restraint. Among their other roles are quality assurance, education, and dispute mediation within an industry. There is a strand in the public policy debate that seeks to promote enhanced levels of communication and cooperation within Australian industries. Networks, whether organised around associations or 'flagship' firms, thrive on and promote trust and cooperation between competitors, suppliers and buyers. Additional support to existing industry and professional organisations in order to help them

extend their communication lines within the business sector and with outside constituents is desirable.

The changing technological environment has provided opportunities and challenges in relationship building throughout history, particularly in terms of the nature and context of communication. Electronic communication, for example, facilitates more immediate cross-organisational communication but its role in building effective relationships needs to be carefully considered. The rapidity of ICT development over the last decade may require a reassessment of its impact upon collaboration and an updating of government policy announcements, for example in the early 1990s, regarding approaches to business networking.

Finally, and most broadly, in addition to incorporating these insights into policy thinking, simply making people and organisations aware of the range and functions of communicating infrastructures should be a government function.

Participants:

Presenters: Simon Ville (University of Wollongong); Gordon Boyce (Queensland University of Technology); Stewart Clegg (University of Technology, Sydney); David Merrett (University of Melbourne); Leon Mann (University of Melbourne); Martin Shanahan (University of South Australia); Philip Weickhardt (Productivity Commission); John Singleton (University of Wellington); Vanessa Ratten (QUT); Simon Mowatt (Auckland University of Technology); Kerry Brown (QUT); Neil Ryan (QUT); Lydia Schmelter-Kelly (QUT).

Discussants: Stuart Macintyre; David Merrett; Paul Robertson (Griffith University); Diane Hutchinson (University of Sydney).

Water Justice: *Un*learning *In*difference in Freshwater Ecologies
Stephen McKenzie, Emily Potter and Alison Mackinnon

Preamble

The two-day workshop was held in Adelaide on 9–10 September 2005, jointly sponsored by the Academy of the Social Sciences in Australia and the Australian Academy of the Humanities, and organised by the Hawke Research Institute for Sustainable Societies at the University of South Australia. The workshop grew out of an ARC Special Research Network seed funding application in 2003, entitled *Re-imagining the eco-social sustainability of the Murray-Darling Basin*. Seed funding was awarded and, although the application did not result in full network status, members found the network very productive, leading to two successful ARC grants and a meeting at Waikerie in 2004.

The first day of the workshop was held at the State Library and the second at the Art Gallery of South Australia and we thank staff of both organisations for their participation. Senior researchers such as Stephen Muecke, Deborah Rose, Alison Mackinnon and Gay Hawkins were joined by early career researchers and completing PhD students such as Emily Potter, Sharon Pepperdine (Geography, University of Melbourne) and Jessica Weir (Centre for Resource and Environment Studies, ANU).

Fay Gale opened the workshop, commenting that the expertise that had been gathered was considerable, as were the challenges that we had posed ourselves, and that the workshop was a strong example of the kind of interdisciplinary collaboration the ASSA was keen to foster – experts in law, Indigenous studies, geography, cultural studies, environmental sciences and history were all present.

Brief thematic summary of presentations

There were 18 papers presented at the workshop. While these were grouped in the program as much as possible according to the discipline of the presenters(s), it became clear as the workshop progressed that significant thematic groupings were emerging. As the intention was to create a cross-disciplinary conversation, it was pleasing to see cultural and policy issues addressed across disciplines.

Indigenous perspectives

Six of the eighteen papers approached the issue of water justice from an Indigenous perspective. Two related papers from a group comprised of Daryle Rigney, Steve Hemming, Richard Walker, Meryl Pearce and Robert Hattam began the workshop. These papers, while focusing in particular on the *Ngarrindjeri* people, also spoke in more general terms about the neo-colonial positioning of Indigenous knowledge within white Australian discourse – that is, the positioning of traditional landowners as 'keepers of sacred knowledge about holistic environmental stewardship' rather than as actors with economic rights, needs and responsibilities. The Indigenous concept of the river as a living being – also touched on in papers by Rod Giblett and Deborah Rose – should be interpreted by policy makers and sustainability workers as an indication that, if the river is destroyed, so is the Indigenous culture that it supports. Jessica Weir's presentation on the Murray Lower Darling Rivers Indigenous Nations (MLDRIN) group also focused on the difficulties faced by Indigenous leaders in being heard by policy makers as modern voices trying to construct a sustainable future, rather than as traces of a cultural heritage that was almost, but not quite, gone.

History, nature and culture

This was perhaps the strongest theme to emerge from the papers presented. Some papers dealt directly with the issue of public perception of 'natural', that is, at what point do cultural structures become part of the 'environment' of a region? Others questioned our historical understanding of the river, also asking about the positioning of some conditions as 'historical' or 'cultural', and others as 'modern'. Stephen Muecke's reading of the Khazan coastal drainage system in Goa suggested that these structures had become a vital and indelible part of the culture, environment and economy of the region. Conversely, Helen Cheney's paper on the weirs on the Hawkesbury-Nepean suggested that, while the community considered these to be a cultural landmark, they were known as the cause of much environmental degradation, and that cultural and environmental notions of 'sustainability' were in opposition in the region. Peter Gell's paper argued that we have no clear view of the pre-European state of the Murray and that our only accurate perception of the river is as a modified

state. Consequently, managers and decision makers have little idea of what a 'sustainable Murray' might really look like, and thus can only make decisions based on very short-term data. Alison Mackinnon's paper on failed utopian settlements along the Murray in the late 1800s pointed out that the problems posed to pastoralists by the Murray's uneven flow were clearly known and understood in the late nineteenth century, but that the lessons learned were subsequently ignored.

Policy and management structures

Several sections of the workshop focused on aspects of governance and policy development. Jennifer McKay's paper revealed that Australian water management is drowning in a complex array of providers, user groups, management boards and trusts and policy organisations, and there is a considerable need to rationalise this into a more workable system. Paul Starr's paper questioned the widely held notion that our water supply is poor, and noted that our real problem is in managing the allocation of what is collected rather than a lack of initial supply. His paper employed an innovative combination of policy analysis and cultural studies approaches. Geoff Syme's paper, based on CSIRO research on public attitudes to water regulation, noted that, while a range of tools are available for predicting or estimating the impacts of changes in the availability or use of water, there is no commonly accepted method for comparing or aggregating the 'value' or 'benefits' of these different types of impacts. His conclusion – that 'it is not possible to develop a meaningful or comprehensive account of water benefits [or water justice] without reference to human perception of benefit' – may be used as an organising theme for part of our publication. It underlies the cultural and political basis of any acceptance of behavioural change.

Waste water and community attitudes

There were interesting parallels between Anna Hurlimann's paper on the generally positive reception to waste water recycling in South Australia's Mawson Lakes housing project, and Gay Hawkins' cultural history of sewage. Hurlimann's paper showed that, although the Mawson Lakes residents had indicated (in surveys) an overall level of satisfaction with the waste water use system, the level of concern increased as the type of water use moved into the area of personal hygiene (clothes washing, teeth brushing, showering, etc). Hawkins argued that the invention of modern plumbing and sewage disposal in the late eighteenth century had created a new understanding of personal hygiene and respectability, and a new and highly personalised series of relationships to water and its use and disposal. Once again, we found that when it comes to water what may seem 'natural' is in fact relatively new, when compared to the antiquity of the river systems by which we live, and that in some cases human culture *can* adapt to changing circumstances of water use. There is an element of hope in this message. While waste water re-use schemes are plagued by the 'yuck factor' in Australia today, they may quickly become a natural and accepted part of our water culture if there is a general perception of public benefit.

Artistic representations of culture and nature

There were four papers specifically on visual art (Emily Potter, Deborah Rose, Rod Giblett, Trish Carroll/Mandy Martin), three of these including an Indigenous element. Rod Giblett asked that we 'take on board an indigenous colour-coding of water as red, as water, like blood, that is both life-giving and death-dealing, the lifeblood, of this great, wide brown body of land'.

Emily Potter discussed Paul Carter's *Nearamnew*, a groundscape artwork in Federation Square in Victoria, as an example of the sort of 're-imagining' of the Australian landscape required if we are ever to lose our essentially European attitude to water control and live with our rivers in their natural state. 'Our suspicion of the moist and damp', as Carter writes, is a product of a western ontology that defined the self in opposition to uncertainty, instability and horizontal movement, and attempted to put water 'in its place', neatly circumscribed by physical boundaries and by management systems. 'The problem for western culture', writes Potter, 'is that much is occluded in this mythic rendering of our environment, least of all the failure of these myths to sustain our ecological health'.

Deborah Rose noted in summary that 'water penetrates the major issues of our society: reconciliation, decolonisation, democracy, justice'. Her paper itself touched on the Indigenous notion of rivers as alive, an idea depicted in a key image for the workshop, a Wiradjuri rock painting from the Lachlan valley showing the river as a timeless being, both alive and generative of other life. Mary Martin and artist Trish Carroll closed the workshop by providing an account of the collaborative process by

The Spirit River: A Wiradjuri rock painting in the Lachlan Valley depicts the river in red, as a timeless, living being. The kangaroo and emu remind us of the river's power to give life to the land around it..

which they develop artwork in the Lachlan River Valley in central NSW. The presentation pointed to the dual inspiration for artistic creation: the love of the valley landscape, and the desire to protect the Indigenous heritage of the area.

Action on publication

The group is keen to press on from the workshop to develop a book and Hawke Research Institute staff are currently in the process of approaching publishers. In the event that a full book is not possible, publication of a collection of papers in a journal will be sought early next year.

Policy Implications

The same body of water can have multiple meanings – for human and environmental health, income, culture, spirituality, and amenity. Hence it is vital that we begin to locate water policy within other paradigms than the engineering and economic frameworks in which it is normally considered. Although metrics do have a place, we must acknowledge the values underlying measurement and find a way to achieve an integration of the economic, environmental and social/ cultural dimensions in water policy frameworks. There is a need to create institutions that can create and adopt policy frameworks which take into account that our water governance systems serve many different stakeholders with widely different views over a long period of time.

Therefore we note:

- The need for better legal definitions of water which reflect the different meanings of water
- The importance of critical and informed public participation in projects and decision-making processes on environmental flows or changes to water use
- The vital importance of historical, archaeological and palaeobotanical knowledge of water systems in determining the 'natural state' of rivers (not just their current state)
- That processes of negotiation with stakeholders must be well resourced, have good facilitators and good community feedback loops
- That these debates will be a particularly important site for reconciliation with indigenous people

Some studies found strong community support for conservation values, despite the general acknowledgement that economic priorities force us back into patterns of unsustainable water use. Therefore we note:

- The need for communities to have strong and multiple voices on water and other resource issues
- That indigenous communities must be strongly involved in natural resource management, and Indigenous leaders must be heard by policy-makers as modern voices trying to construct a sustainable future, rather than as traces of a cultural heritage which is almost, but not quite gone.
- The need for greater understanding of ethical and moral basis of decision making on natural resource allocation and the values of water
- The need for procedural justice and distributive justice systems to operate in parallel
- The need for an understanding of ways to insert fairness and justice into current processes.

Books
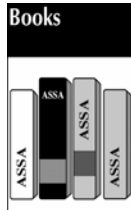
The New Province for Law and Order: 100 Years of Australian Industrial Conciliation and Arbitration. Edited by Joe Isaac and Stuart Macintyre. Cambridge University Press, Melbourne, 2004.

This book celebrates a century of conciliation and arbitration at the national level in Australia, following the passage of *An Act relating to Conciliation and Arbitration for the Prevention and Settlement of Industrial Disputes extending beyond the limits of any one State* on 15 December 1904. The Act established the Commonwealth Court of Conciliation and Arbitration which was the precursor to the Australian Industrial Relations Commission. The relevance of the book to recent events is heightened by the Federal government's intention to undertake the most radical reform of industrial relations in Australia since the 1904 Act. This could see the effective demise of the Australian Industrial Relations Commission through a significant reduction in its powers. The government is also threatening to use the corporations power in the Commonwealth Constitution to legislate directly on a range of industrial relations matters, in order to overcome limitations in the industrial power on which the current Act is based. However, as the book amply demonstrates, those who fail to learn from history do so at their peril! Those responsible for the current reform proposals in the Federal government would be well-advised to read the excellent contributions in this book.

The volume comprises eight chapters on a number of key themes related to the arbitration system by leading academic scholars and practitioners. It also contains valuable information about changes in the tribunal and its membership throughout its century-long existence. Although the book is not strictly a history of the arbitration, each of the chapters examines the way in which the parties and the institutions have evolved and changed over time. While the authors are not uncritical of the arbitration system, they do present generally positive views of the role of the tribunal and are reasonably optimistic about its future. Michael Kirby and Breen Creighton, for example, argue that, despite the inevitability of change, 'there will continue to be a need for a national system of some kind to supplement and modify the outcome of unregulated market forces'. Although the editors acknowledge that 'the persistence of industrial conciliation and arbitration over a century is no guarantee of its future', they also point out that 'all [previous] attempts to abolish it have failed'. While David Plowman predicts that significant change is likely to follow the coalition parties' success in gaining a majority in the Senate, Bill Harley warns that 'the force of long history on institutional arrangements should not be discounted'.

Several chapters deal with the evolution of the arbitration system. Tim Rowse examines the tortuous passage of the arbitration bill and the debate which surrounded the introduction of compulsory arbitration of industrial disputes. He is sceptical that the claim by Alfred Deakin, in 1903, that the tribunal would achieve equality of contract between employers and employees. Stuart Macintyre commends the parties in the arbitration system for the distinctive practices and customs which they have adopted in order to ensure the tribunal's effective operation and independence, despite various legislative changes over many years. Kirby and Creighton explain how a more liberal interpretation of the Commonwealth's industrial powers, by the High Court, has enabled the federal tribunal to extend its jurisdiction, despite legal challenges by some employers. The economic and social policy roles of the tribunal are examined by Keith

Hancock and Sue Richardson. They express concern that the reduction in the tribunal's award-making role, in recent years, has contributed to growing inequality between those who are 'industrially strong' and others whose bargaining power is weak. They lament the decline in the tribunal's historical role in enforcing 'a fair day's pay for a fair day's work'. Gillian Whitehouse has similar concerns about the effects of the move away from a more centralised system of wage determination to enterprise-based bargaining, which has disadvantaged women and indigenous workers.

Several chapters focus on the changing roles of unions and employers in the industrial system and the effectiveness of the tribunal in managing conflict between the parties in the workplace. Malcolm Rimmer ponders the question as to why trade unions in Australia broadly accepted compulsory unionism, compared with many of their counterparts in other countries. He notes, however, that the Act provided unions with the protection of awards and legal status. Furthermore, before the Act was amended in 1996, it also encouraged the formation and operation of unions as legitimate and necessary participants in the industrial relations system. Over the past decade, however, unions have faced one of their most difficult periods, now that union preference in awards is no longer available and compulsory unionism is illegal. Employers' support for the arbitration system has significantly declined in recent years. Several major employers' associations, which previously supported the centralised system, have become reconciled to enterprise bargaining and have urged the Federal government to further dismantle the arbitration system. David Plowman highlights the role of the Business Council of Australia in leading the movement in favour of enterprise bargaining but argues that employer bodies will continue to act in both 'reactive and adaptive' ways in accordance with the prevailing government's policy. However, it is difficult to envisage employers welcoming a return to a centralised system and any reforms which would strengthen the unions' bargaining power.

Unlike the period of industrial turmoil in the 1890s, which gave rise to the formation of the Federal arbitration system, there has been a significant decline in strikes in recent years. Bill Harley notes, however, that while there have been periods of heightened industrial unrest during the past century, and some industries remain more strike prone that others, the system of conciliation and arbitration has generally assisted the resolution of disputes without the protracted strikes found in many other countries. Even when union membership was at its highest historical level, the average loss of productive time from strikes was less than one day a week per employee.

Given the determination of the Federal government to implement industrial relations reforms, which would further erode the authority and power of the Federal tribunal, it

remains to be seen whether this book will be regarded as the 'last hurrah' of the old system, or cause policy-makers to reconsider their proposed reforms. The campaign by the trade union movement against the Federal government's planned reforms appears to have won a surprising degree of public support. To paraphrase Mark Twain's famous saying, 'the death of the arbitration system may be greatly exaggerated!' The contributions to this volume provide strong evidence in favour of the tribunal's ability to persist despite adverse circumstances and to continuously 'reinvent itself' by adapting to change. The book is a timely and authoritative account of the reasons for the establishment of the system, why the Federal tribunal has proved so resilient for the past century, and why Australia's conciliation and arbitration system may yet survive in the current century.

Russell Lansbury

Markets in Vice; Markets in Virtue. By John Braithwaite. Federation Press, Leichardt, NSW, 2005.

John Braithwaite was recently awarded the Prix Emile Durkheim for 2005 and indeed was described in the Prize citation as 'The New Durkheim'. To provide a highly critical review of his fifteenth and latest book would therefore be brave. Fortunately such courage is not called for. *Markets in Vice, Markets in Virtue* is fascinating. It deals with the challenging topic of tax avoidance in an innovative way based on original field interviews on a cross-country comparative basis. It uses an economic framework but with lashings of law, public administration, sociology and philosophy.

But there are modest flaws in the glass. There is a need for greater conceptual clarity and, properly interpreted, the framework is not new, even if the application is. The evidentiary base in the application is somewhat patchy - partly because of 11 September disruption of Braithwaite's New York interviews. The sample is only loosely defined and mostly anonymous, which does qualify the evidentiary standing of the supporting research, a difficult issue in any social research into vice.

To reconstruct Braithwaite's argument let us start with markets. Markets are a wondrous device. Competitive markets promise to provide what buyers want at least cost. But they may fail to deliver on their promise and they are amoral. Governments can seek to compensate for market failure where those markets do not in fact operate efficiently in giving buyers what they want at least cost. Tax then becomes necessary to support the purposes of government and therein arises the vice that John Braithwaite is concerned with here: tax avoidance.

Indeed aggressive tax planning itself becomes a market, with competing advisers (investment bankers, law firms, accounting firms) particularly seeking to meet the desire of individuals and companies for tax minimisation, and promoting the opportunities assiduously ('contagion' Braithwaite calls it, meaning dissemination and emulation of a tax payment innovation judged to be adverse for society). Of course the market only exists here because of government. The resultant market for tax planning, like all others, reflects only whatever moralities buyers and sellers choose to bring to the market place.

Braithwaite singles out high wealth individuals and large corporates for attention. These groups may or may not in fact be any more intrinsically prone to tax evasion than ordinary individuals and smaller firms, though sometimes Braithwaite does come

close to saying so. But he does have an argument, not much developed, that firms may be more prone to tax evasion than individuals because failure to do so becomes a competitive disadvantage: they will incur higher costs relative to competitors. More explicitly he argues that large players are more prone to tax evasion simply because they can: they have more complex operations and they have access to the necessary expertise. In the language of economics, the market has (dis)economies of scale such that greater size facilitates greater vice.

The vice, in Braithwaite's eyes, seems to come from a reduction in progressivity in taxation and, though less clearly enunciated, in reduced equity between persons in like situations. A further 'public good' argument based on for respect for law, as well as equality and equity in law, could be made. Government can seek to override markets further to reflect judgements of vice and virtue beyond what the buyers and sellers are willing to do.

In part the market may be self-regulating. Braithwaite feels that in the past professional ethics have played a strong moderating role for bankers, lawyers and accountants on the supply side, and that reputational effects have played a role on the demand side since many clients wish to deal with reputable firms for intrinsic (eg, own ethics) and extrinsic reasons (eg, less likelihood of audit). But self-regulation is arguably insufficient and Braithwaite's proposition is that modern pro-competition policy may have enhanced markets in vice (such as 'aggressive' tax planning) as much as in virtue (such as, say, in textiles and clothing).

The bulk of the book examines how well two governments (including their tax officials) respond to this challenge. The task that Braithwaite posits is how to 'flip' markets for vice into markets for virtue - or, more prosaically, how to reduce tax evasion operating through aggressive competitive tax planning, especially at the smart end of town. The governments are Australia and the USA, and the judgement is that Australia had made a better fist of the task.

This is partly a matter of degree. In Australia cases of absence of tax payments by the wealthy and powerful are still legion. Australian of the Year Patrick Rafter was paying no Australian income tax when so honoured. And media mogul Kerry Packer famously declared to a Parliamentary Committee that 'If anybody in this country doesn't minimise their taxes, they want their heads read'. The Joint Public Accounts Committee of Parliament revealed in 2001 that 80 individuals each with a net worth over $30 million were reporting taxable incomes of $20,000 or less. But such glimpses into the Australian scene, pale against US examples such as how Enron paid no income tax at all in four of the last five years of its existence, how Microsoft received more in tax breaks than it paid in income taxes for the five years to 2000 and how the CSX Corporation paid no income tax in four of the five years before its CEO became US Treasury Secretary.

Partly the Australia-USA difference is cultural lag. Australia is, as Paul Keating might have it, at the 'arse end of the universe', so innovation in most things takes time to arrive at the periphery from the centre. But arrive it does, given the globalisation of advice through major accounting firms in particular. Accordingly Braithwaite attributes a greater part of the difference to better public management in Australia.

This is the really interesting bit. Contrary to most areas of national life, sports aside, Australian public management has in fact been highly creative, leading most nations in anything from HECS and Child Support through Immigration Points Selection to

controlling Money Laundering and improving Public Financial Management. In corporate tax Australian revenue has been increasing sharply for fifteen years while that for the US has been falling sharply. Braithwaite attributes this squarely to smarter regulation. Given that Australia in 1915 invented the progressive tax system with rising marginal rates of taxation, it seems only appropriate that the country contribute now to reducing tax evasion.

The tax evasion which is the focus of the book is tax shelters, called 'aggressive tax planning' in Australia. It arises when contrivances, whose dominant purpose is avoiding tax, are used in order to shelter income (or wealth) from being taxed, drawing on asymmetric treatment of profits and losses across entities. It involves generating tax losses, deferring recognition of income, or converting the nature of income into a lower taxed form. Funds are shuffled between entities so that losses are counted where they generate the biggest benefit and profits are counted where they are taxed the least.

The key point he wishes to make is that smarter regulation in tax compliance is not just tougher enforcement. Rather it involves understanding the nature of the tax avoidance market itself, recognising that there is a lot of intrinsic and reputational enthusiasm out there for 'honest, low fuss' tax compliance, and devising strategies that can use the good competitive forces to minimise the role of what he calls 'the fiscal and moral termites'. This is the notion of 'flipping markets in vice to markets in virtue'.

The key bureaucratic vehicles for this in Australia have been Tax Office initiatives such as the Transfer Pricing and Record Review Improvement Project, the High Wealth Individual Taskforce, the Corporate Consolidations project, the Promoters Taskforce and the Registered Software project. What Braithwaite does is to seek to elicit general principles behind the stated success of such projects. He does so based on extensive interviews with the market participants in Sydney and New York.

The resultant set of features of a more virtuous tax regime are:

- *Flexibility*: through focusing on allowing alternative processes that provide the required performance ('meta regulation') and by using a more principles-based tax law rather than a rules-based approach
- *Networking*: seeking information and partnerships from stakeholders, including encouraging and rewarding whistleblowers and using professions to ban contingency fees and use fee for service ethics instead
- *Targeting*: going for the sources of supply contagion by penalising promoters heavily and auditing their clients closely
- *Responsibility*: ensuring that responsibility is imposed on all those who are responsible - and not allow buck-passing, eg, requiring strict liability with respect to lawyers' opinions
- *Transparency*: requiring shelter disclosure and book-tax disclosure and perhaps even full tax payment disclosure for corporations
- *Parity*: paying tax officials salaries benchmarked to the private sector to retain top officials and even attract private practitioners
- *Education and Information*: ensuring that clients are aware of all related fee structures in advice and have access to certification and ratings of practices and firms by the Tax Office, professional bodies and market rating agencies

- *Tailoring*: building a pyramid of response from cooperation and facilitation, escalating to more severe penalties when and where light touch responses do not succeed

Some of these make use of competitive market principles to strengthen virtue further, eg, through the structure of fees and incentives, the payment of market salaries or the encouragement of alternative compliance systems. Others are more administrative in nature and so do not flip markets as such, but regulate them. Braithwaite's view is that Australian tax officials have created a system building on these principles more than most countries, including the USA, and that this (not high corporate tax rates) explains growing corporate tax revenues here - and, presumably, some of the complaints by business of too high a tax burden. The irony is that this may come more from ethical tax administration than from punitive tax parameters. Indeed there is evidence that, once concessions are allowed for, Australia's effective tax rate is quite moderate by industrial country standards.

The creativity and liveliness of the study is very welcome and a lot of originality is to be found in the application of the approach in these areas and its extension to detailed concrete policy administration prescriptions. Still, social market conceptions have been in existence for some time as a vehicle for reducing the conflict between markets and regulation. They have been the basis for interventions in the social arena, eg, earned income tax credits used to reduce welfare dependence, or in natural resource use to reduce environmental damage where market systems are increasingly deployed for ecological gain (eg, emissions trading, water trading).

The novelty in the book is a new and more vibrant vocabulary for this market use (eg, 'flipping', 'contagion', 'termites'), application to markets where value judgements as to the moral standing of the activity are central, and the creative evidentiary use of field research for market analysis. This is a welcome extension of market analysis since economists have long sworn off using qualitative evidence and making the necessary value judgements and have resisted providing any operational content to their empty conceptual boxes of 'merit' and 'demerit' goods. Fortunately criminologists do have the necessary fortitude - or at least John Braithwaite does, and he has shone much light on a topic at the core of the legitimacy of the mixed economy. Correspondingly, we look forward to more in this vein as Braithwaite looks beyond fifteen books and Durkheim, toward possibly a Bradmanesque twenty.

Glenn Withers

The Poverty Wars: Reconnecting Research with Reality. By Peter Saunders. Sydney: University of New South Wales Press, 2005.

In this careful, judicious and measured book, Peter Saunders provides the clearest yet description of how we have comprehended poverty in the past and might comprehend it better in the future. The book is partly a synthesis of major ideas and debates, partly a discussion of methodological and conceptual challenges, and partly a call to arms. For all its emphasis on wars, it is a calm and reasonable account, especially when compared to the recent work of the other Peter Saunders, from the Centre for Independent Studies. That Peter Saunders seems to relish the war of words for its own sake; this Peter Saunders quickly makes clear that point-scoring and self-interested academic pugilism are part of the problem in poverty research, not the solution.

This Peter Saunders has also recognised the importance of doing research in ways that show respect and do justice to those who are its subjects. He is particularly keen to overcome the limitations of approaches to poverty that over-emphasise statistical measurement or the false hope of exactitude; "we must move beyond", he says, "sole reliance on the idea of statistical poverty and accept that evidence based on the experience of poverty is as important as counting the numbers below the poverty line, wherever it is set" (p 57). Saunders offers a succinct review of new definitions and concepts, such as deprivation and exclusion. He explains different ways of explaining poverty's causes, offering a sharp and effective rebuttal to the claim that they can be located in the behavioural, moral or personal failings of the poor.

Most of all, this is a book that makes a defiant stand for the role of research in conceptualising, measuring and tackling social problems. The social scientist is crucial, "because we need a clear understanding of the nature and causes of poverty before we know what kinds of actions are needed to combat it" and in order to show that "interventions will have observable effects" (p 14). At the same time, researchers must use a wider array of methods and incorporate a greater variety of data. *The Poverty Wars* is a plea for - and a striking testament to - the power of synthetic, exploratory and multidisciplinary research and of conversations across academic borders. Much of this has been said before, in other ways and by other writers, but it has rarely been said so clearly and modestly; at the very least, Saunders writes, we must overcome the disconnection between quantitative studies of poverty's extent and studies "that highlight causes and consequences by studying the experience of those who are poor" (p 129). Amen to that.

In the end, Peter Saunders wants us to win a war, the war about "philosophy and ideas" (p 2), by mobilising information, arguments and evidence. The only war worth fighting, he reminds us, is the one that takes ending poverty as its objective. It is a war that must be based upon clear statements and careful explanations. It must bring together governments, researchers and welfare agencies, and it must include - and indeed begin with - poor people and those who work most closely with them. In the war to tell the truth about poverty, we must begin by listening to those who suffer it and bearing witness to the truth they know. This is a war, as Peter Saunders insists, that can be won. Yet it is also a war, regrettably, that might still be lost. In the future, people will look back at the widening divisions of early twenty-first century Australia and ask "who stood against this?" They will also want to know who offered Australians clear, accessible and rigorous explanations of what was going wrong and how they might begin to put it right. They will do well to start with this masterful book and with the new research activity it deserves to inspire.

Mark Peel

Officers and Committees

Academy of the Social Sciences in Australia

President:	Professor Sue Richardson
Executive Director:	Dr John Beaton
Research Director:	Dr John Robertson
Treasurer:	Professor Bruce Chapman

Executive Committee: Professor Sue Richardson (Chair), (National Institute of Labour Studies, Flinders University of South Australia), Dr John Beaton, Professor Bruce Chapman (Centre for Economic Policy Research, Australian National University), Dr Michael Keating (Research School of Social Sciences, Australian National University), Professor Stuart Macintyre (History, University of Melbourne), Professor Leon Mann (Psychology, University of Melbourne), Professor Peter Saunders (Social Policy Research Centre, University of New South Wales),

Committees: Standing Committee of the Executive; Finance Committee; Membership Committee; International Program Committee; Workshop Committee; Research Committee, Early Career Award Committee, Policy and Advocacy Committee, Symposium Committee, Summer School for Indigenous Postgraduate Students Steering Committee and Panel Committees.

Branch Convenors: Professor Candida Peterson (Qld); Professor Graeme Gill (NSW); Professor Ann Pauwels (WA); Professor Jeff Borland (Vic); and Professor Mary Luszcz (SA)

Panels:

A *Anthropology, demography, geography, linguistics, sociology.*
Chair: Dr Diane Gibson
B *Accounting, economics, economic history, statistics.*
Chair: Professor Russell Lansbury
C *History, law, philosophy, political science.*
Chair: Professor Marian Sawer
D *Education, psychology, social medicine.*
Chair: Professor Max Coltheart

_____

28 Balmain Crescent, Acton
Postal Address:
GPO Box 1956
Canberra ACT 2601

Telephone:	02 6249 1788
Facsimile:	02 6247 4335
Email:	ASSA.Secretariat@anu.edu.au
Web site:	www.assa.edu.au