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The Effectiveness of Camp Oz in Children's Grief Process

By

Eunhye Choi

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In

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The Effectiveness of Camp Oz in Children's Grief Process

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Abstract

Grieving children need appropriate interventions to help their grieving process. Every year, a one-day grief camp, called Camp Oz is held to assist these bereaved children's needs. To investigate the effectiveness of Camp Oz, parents and children were asked to fill out a satisfaction survey. The results of 2014 Evaluation indicated 80 % of parents and 86% of children were satisfied with Camp Oz. Children were able to remember their loved one, feel safe, enjoy activities, express their story, and make a connection with others. They were less likely to report growth in emotions and behaviors, and learning about grief and coping skills. In 2015, all of the participants were satisfied with Camp Oz. Especially, they were highly satisfied with the experience of feeling safety and making a connection with others, whereas they were less satisfied with development of coping skills and expression of emotions. Through the results, implications and recommendations for future interventions are discussed.

Keywords: Children, Grief, Bereavement, Intervention.

Dedication

This thesis is dedicated to my mother Okim Hwang, who was a warm, sincere, and caring person.

The memories of you and your greatest love are my biggest encouragement and motivation. I

miss you every day.

Acknowledgements

I would like to thank my family and friends for always supporting and encouraging me. I also wish to express my appreciation to my advisor Dr. Sarah Sifers, Camp Oz coordinator Jeanne Atkins, and the members of my thesis committee Dr. Annelies Hagemester and Dr. John Seymour.

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The death of a loved one is a tragic experience. Children have unique needs in dealing with the experience of bereavement. Based on an understanding of grieving children's vulnerabilities, a one-day grief camp, called Camp Oz tries to assist grieving children cope with grief. However, there is limited research examining grief interventions for children. Therefore, this article tries to fill this gap by systemically examining Camp Oz over two consecutive years.

Grieving Process

The grieving process has been described using several different models. Out of those models, Kubler-Ross (1969) indicated the grieving process to consist of five responses: denial and isolation, anger, bargaining, depression and acceptance. Grieving individuals try to deny the reality of their loved one's death. They might express intense emotions such as anger and resentment or grapple with the reality by claiming that the death was inevitable. Sometimes, they become depressed and sad because of the loss, but they eventually accept the death. (Kubler-Ross, 1969).

The grieving process also has been theorized by other scholars to consist of five tasks: understanding, feeling, remembering, integrating, and growing. In the understanding stage, grieving individuals understand why their loved one died and their own reaction to the death. In the feeling stage, they express their emotions such as sadness, anger, guilt, and frustration. In the remembering stage, they remember the memories of their loved one. In the integrating stage, they incorporate their emotional pain into their life. In the growing stage, they become mature through the loss. These perspectives indicate that the grieving process is a personal adjustment after the death of a loved one in which individuals understand death, learn about grief, express emotion, remember the loved one, adapt to changes, and ultimately grow up through the loss described (Dalton & Krout, 2005).

Children's Unique Needs

Some children who have experienced the death of a loved one need assistance to successfully address all of the tasks of grieving outlined above. Such interventions should be informed by children's developmental status. Children are more likely than adults are to explore their emotions and have a hard time dealing with feelings of fear, guilt, emptiness, or sadness. Additionally, they are more likely to present disorganized behavior during the grieving process. Some children regress, demonstrating physiological and social changes and different eating and sleeping patterns (Wolfelt, 1983). Additionally, grieving children need safe and secure relationship with adults (Edwards, 2007). Therefore, some grieving children need an intervention to foster coping skills from supportive adults.

Values for Grief Intervention

Children's unique needs suggest values that should be emphasized in grief interventions to assist bereaved youth including learning about grief, expression of emotion, connection with the deceased, adapting to changes, learning coping strategies, and establishing a support system. (Foster & Holden, 2014; Rozum, 2012; Anderson, 2016; Currier, Neimeyer, & Berman, 2008; Salloum & Overstreet, 2012; Kelly, 2013)

Learning about Grief

Grief reactions can be physical, cognitive, emotional, and behavioral. Individuals who experience the death of a loved might experience physical numbness and shock, deny the death by avoiding or not wanting to talk about the deceased, have difficulty concentrating and making decisions, feel guilty or sad, or have academic difficulties (Beckmann, 1990). Grief interventions should assist children in dealing with those grief reactions.

Expression of Emotion

Emotional reactions include negative and positive feelings such as anxiety, frustration, helplessness, loneliness, depression, ungratefulness, vulnerability, calmness, encouragement, independence, sociability, appreciativeness, and security. To elicit feelings, clinicians may directly request a client's feelings, use open-ended questions, express concern, reflect feelings, catch emotional cues, and name the feelings (Morrison, 2014). These reactions and interventions might be applicable to grieving children.

Connection with Deceased

Caregivers and teachers might encourage children to draw pictures of the deceased and actively engage in conversation about the deceased one to maintain a connection with the deceased (Willis, 2002). Grief interventions may include such activities to honor the memories of the loved one to help children feel connected with their loved one.

Adapting to Changes

Resilience is positive functioning after stress and adversity (Rutter, 1987). Spiritual and motivational factors, cognitive competencies, behavioral and social competencies, and physical well-being and physical competencies increase resilience in respond to stressful life events (Kumpfer, 1999). Grief interventions might encourage children to develop these assets to adapt to changes that result from the death of a loved one.

Coping Strategies

Coping strategies encourage individuals undergoing stressful life events to consciously and volitionally engage in emotional, cognitive, behavioral, physiological, and environmental activities to facilitate personal adjustment (Compas et al., 2001). Grief interventions should

include the information about how to adjust grieving children's emotional, perceptual, behavioral, physiological, and environmental conditions after the death of a loved one.

Support System

Support systems for bereaved individuals such as friends, family, church members, and other bereaved individuals can facilitate coping. Additionally, remembering, gifts, faith, daily activities, physical presence, and communication often are viewed as supportive, whereas avoidance, hurtful comments, time, and pressure often are viewed as unsupportive (Richardson, 2010). Grief interventions should provide opportunities to meet and communicate with their friends, family, and other grieving children to establish support system.

Camp Oz

Camp Oz is a one-day grief camp held by Mayo Clinic Health System - Mankato Hospice. Children, who hear about the camp through flyers and recommendations from clinicians and social workers attend the camp. To help children in the grieving process, Camp Oz provides opportunities to experience various grief interventions, enjoy activities such as arts, crafts, and sports, share their story, and meet other bereaved children. The curriculum of Camp Oz was designed by the Camp Oz Planning Committee, which consist of hospice coordinators, counselors, social workers, and volunteers to help children have enjoyable time, share their story of loss, remember a loved one, express feelings of grief, understand their grief responses are okay, learn coping strategies, make connections with other kids, and preserve hope. This grief intervention has not yet been evaluated with standardized methods and compared to literature regarding children's grieving. Therefore, this paper evaluates the program based on the values discussed above, leading to recommendations for future sessions of Camp Oz.

Method

Participants

Children aged 5 to 17 who had lost somebody significant in their lives attended Camp Oz. Out of 47 attendees in 2014, five parents, and seven children participated in this study by returning the evaluation forms for 2014 Camp Oz. Participants' ages ranged from 7 to 17. Two boys and five girls filled out the questionnaires. The relations of the deceased to child were father, mother, brother, and sister. The causes of death included cardiac arrest, sledding accident, car accident, and suicide. Child's ages at the time of the death were 2 to 16.

Of 46 attendees in 2015, those who returned the evaluation forms consisted of eight parents and nine children (six girls and three boys) and whose ages ranged from age 6 to 16. They were 5 to 15 at the time of the death of parents, siblings, and grandparents, caused by accident, cancer, suicide, heart attack, and congenital heart defect.

Data from a total of X participants and X parents were used in the study.

Measures

2014 Camp Oz Questionnaires. The researchers developed a questionnaire regarding the goals of Camp Oz based on the children's bereavement literature. There were three versions of evaluation questionnaire - one for parents, one for children under 10, and another one for children aged 10 to 17. Each questionnaire was developmentally-appropriately worded. Parents and children aged 10 to 17 responded to survey items based on a five-point scale from "strongly disagree" to "strongly agree" and children under 10 were provided the pictures saying "yes," "no," and "I don't know." Questionnaires are available from the authors upon request.

The questionnaire asked if participants were satisfied with Camp Oz, wanted to participate in the next year's camp, enjoyed activities, understood grief, learned coping strategies, grew in emotions and behaviors, made a connection with others, remembered the deceased, and felt safe and accepted. Parents were asked if they received enough information about Camp Oz, as well as the child's age, gender, relation to the deceased, the cause of death, and the child's age at the time of the death. Responses to all questionnaires were anonymous.

2015 Camp Oz Questionnaires. Questions about the video for Camp Oz were added to the items asked in the previous year. The video describes how children engage in Camp Oz's activities such as music, art, craft, and group sessions. In the video, children voluntarily shared the memories with their loved ones and express thoughts and feelings about grief and loss. The additional questions asked if the video helped participants remember what they learned from Camp Oz, feel connected and comfort, and promote children's resilience.

Procedures

Camp Oz was held October 4, 2014 and again in October 3, 2015. Some participants attended both years, others were new to the camp. Children engaged in activities such as arts and crafts, a magic show, and sports. Children expressed their feelings and remembered the memories of their loved one through their drawing and craft works. They also had two group sessions to share their stories of loss with other bereaved children. At the closing ceremony, they lit candles and had a chance to remember and honor the deceased with family members present. Details on the camp curriculum can be obtained from the authors. After the camp, informed consent and assent forms and the questionnaires were mailed to the addresses of caregivers of all campers. Participants were asked to return questionnaires to Mayo Clinic Health System - Mankato Hospice.

The researcher volunteered at 2014 Camp Oz assisting camp activities and making a video, evaluated 2014 Camp Oz, provided recommendations for 2015 Camp Oz, and served as a planning committee to design curriculum and activities for Camp Oz. In addition, the researcher repeated the process in 2015 from attending the camp to providing suggestions for further grief interventions for children.

Data Analysis

2014 and 2015 Camp Oz Evaluation. SPSS was used to analyze the evaluation. Descriptive statistics were used to compare the means of the variables. Correlations were also examined to see how the variables were related to one another. Independent t-test was conducted to see if there was significant age difference in each item. Also, participants written answers about strengths and weaknesses of Camp Oz, and suggestions were qualitatively analyzed.

Camp Oz Video. The effects of the video if the video assisted children review the experience at Camp Oz, feel connected, comfort and resilience were entered into regression models. The multiple regression analyses were run to examine if video effects predicted participants' satisfactions in each item of the questionnaire.

Comparison. Data regarding participants' overall satisfaction, wanting to participate again, if they were provided enough information about Camp Oz, they enjoyed activities, learned about grief, and coping skills, improved behaviors and emotions, express their story, made a connection, honored the memories of the deceased, and felt safe were collected through 2014 Camp Oz evaluation. The same information was collected from 2015 Camp Oz evaluation as well. An independent t-test was conducted to see if 2015 Camp Oz presents improvements in all of these components compared to the previous camp.

Results

2014 Camp Oz

Overall, 80 % of parents and 86% of children who completed the questionnaire reported that they were satisfied with Camp Oz and the same amounts indicated wanting to participate in Camp Oz again (See Table 1 for 2014 data). One out of five parents, and one out of seven children were not satisfied with the experience at Camp Oz. Satisfaction with the experience at the camp was correlated with participants' wanting to attend the next year's camp such that those who were satisfied with the camp were more likely to want to attend the following year's camp. Overall satisfaction was correlated with every item except for expression of emotion. Learning about grief and feeling safe correlated with every item except for expression of emotion, which was correlated only with coping skills, growth in emotions and behavior, and remembering the deceased. Additionally, participants were highly satisfied with Camp Oz assisting children remember a loved one and feeling safe but less satisfied with growth in behaviors and emotions (see Table 1). There were no age differences in any variables ($p > .05$ for all t-tests comparing children above and below the average age).

Based on open-ended comments, participants appreciated the opportunity for children to meet with others who were in the same situation, diverse activities, respect for children, and provision of a safe place and feelings of not being unique. On the other hand, they indicated that they wished Camp Oz was longer and could better accommodate children's preference regarding activities. Specifically, Camp Oz's activities were focused on younger children and older children had to do the same activities as younger children. Some participants mentioned that it was hard to develop relationships after the camp, and pointed out that there were not enough interactions between children and volunteers/coordinators.

2015 Camp Oz

Among those who returned questionnaires in 2015, all of the parents and child participants reported that they were satisfied with Camp Oz and wanted to attend Camp Oz again (See Table 2 for 2015 data). Overall satisfaction was correlated with feeling of safety. Additionally, significant correlations were found between learning about grief and coping skills, growth in behaviors/emotions and connection, expression of emotions, and remembering the deceased. Participants were highly satisfied with the experience of feeling safe and making a connection with others, whereas they were less satisfied with coping skills and expression of emotions. There were no age difference in any responses ($p > .05$ for all t-tests comparing children above and below the average age).

Open-ended questions indicated that Camp Oz provided the opportunities to meet others who experienced the death of a loved one and feel they were not the only one who had lost a loved one. They also appreciated having caring and experienced counselors and mentors. They also endorsed as strengths of the 2015 Camp as having age separated in activities, camp settings, bringing kids together to share the experience, teaching a great way for children to deal with death. Also, they liked snacks and group activities such as crafts that remind them of a loved one, track riding, making a song, magic show, and capture the flag. However, they regretted that Camp Oz was not long enough and wished to have more than one camp. Some participants did not like lunch and supper, a certain activity, and the magician.

2015 Camp Oz Video

The results indicated that the Camp Oz video helped children review the memories of Camp Oz ($M = 4.56, SD = .51$) and feel connected ($M = 4.56, SD = .63$) and to a lesser degree feel comfort ($M = 4.25, SD = .77$) and resilience ($M = 4.19, SD = 1.05$). Multiple regression

examined whether the extent to which the video to help children review the experience, feel connected, comfort, and resilience into regression models to see if video effects predicted satisfaction in each item, the result of multiple regression analysis indicated that the effects of video predicted children's growth in behaviors and emotions, specifically the effect reviewing the memories. Additionally, remembering the deceased was predicted by video effects. Especially, the effect of the video instilling resilience significantly predicted satisfied experiences in terms of remembering the deceased. Feeling safety was predicted by the effects of the video. Especially, the effect of the video reviewing the memories and helping children feel connected significantly predicted whether or not participants were satisfied with the experience in feeling safety at Camp Oz (See Table 3).

Comparison

Descriptive statistics indicated that means of all variables increased from 2014 to 2015, except for coping skills, expression of feelings, and remembering the loved one decreased. However, independent t-tests indicated that all of the differences were not significant ($p > .05$ for all t-tests comparing 2014 and 2015).

Discussion

2014 Camp Oz

The results indicated that children and parents who participated in the study were mostly satisfied with the experience at Camp Oz except for one parent and children. Participants' satisfaction with their experience was related to their wanting to participate in the next year's camp. The results suggested that Camp Oz especially assisted children in remembering the deceased and feeling safe. The remembrance likely is a result of activities for children to honor the memories of the deceased through drawings and crafts. Meeting other bereaved children

likely helped children feel understood and safe. It is recommended that these strengths be perpetuated in future interventions and Camp Oz 2015 followed these recommendations.

However, participants were less likely to endorse behavioral or emotional growth. This limitation should be understood in terms of the fact that Camp Oz was a one-day event perhaps not resulting in sufficient time to assist each participant's emotional and behavioral problems because bereavement cannot be resolved in one day. Hence, it is recommended that future interventions provide parents and children with information regarding ways to foster children's emotional and behavioral growth as well as having booster sessions. These suggestions were not followed for Camp Oz 2015 due to limited resources.

The results indicated that there were no significant age differences in children under 10 and teens' responses. However, it is suggested that future interventions not overlook age differences when planning activities as older participants reported that the activities were mostly focused on younger children. This could lead to less engagement, which could result in older children not benefiting from the intervention as much as they would have if activities were more developmentally appropriate. Camp Oz 2015 followed these recommendations.

The number of correlations implied that satisfactions in each aspect of the questionnaire (enjoying activities, learning about grief, coping skills, growth in emotions/behaviors, emotional expression, connection, remembrance, and feeling safe) were intertwined. Participants, who were highly satisfied with the experience of learning about grief and feeling safe at the camp, were more likely to be satisfied with the other aspects of the camp. Therefore, it was recommended for the 2015 Camp Oz to preserve the strengths and improve the limitations in these two aspects, which likely would lead to participants' satisfied experiences, and efforts were made to do this for Camp Oz 2015.

Conversely, emotional expression was not related to overall satisfaction. Participants consistently endorsed Camp Oz as providing an opportunity for emotional expression, but this was not related to satisfaction with the experience. On the other hand, emotional expression was correlated with coping skills, growth in emotions and behavior, and remember a loved one suggesting that participants likely felt they benefited from this aspect of Camp Oz. This could indicate that talking about their experiences and emotions might have been unpleasant or uncomfortable, which is a reasonable explanation. Thus, it is recommended that future interventions change the way children share their thoughts and feelings regarding the loss. Camp Oz did not allow for individual attention for children, which could help the children resolve the emotions brought up by talking about the loss. Alternatively, practicing coping skills in group sessions might help children reduce their distress after talking about their loss.

2015 Camp Oz

The results indicated that all of the participants who participated in the study were satisfied with Camp Oz and wanted to participate in Camp Oz again. Overall satisfaction and participants wanting to attend Camp Oz again were higher in 2015 than in 2014. There was no age differences in any responses and no participants complaint that activities were focused on younger children, which was what previous participants in 2014 reported. This suggested that Camp Oz planned activities which both older and younger children could enjoy together in 2015. Participants' highly satisfied experiences in feeling safety and making a connection with others can be indicated as strengths of 2015 Camp Oz. However, coping skills and expression of emotions still were not highly endorsed, in spite of new efforts to improve this area. It is understandable because death is not an easy topic for children to openly talk about, but it is recommended that Camp Oz 2016 include activities that allow children to present their story and

feelings as well as providing education and practice using coping skills. Additionally, information on coping skills could be sent home with participants.

The results indicated that overall satisfaction was highly related to the experience of feeling safe. However, satisfaction with feeling safe decreased in 2015, so efforts should be made to increase this area to previous levels. It might have decreased because children were still not able to openly talk about their story, which was along with participants' lower satisfaction in expression of emotions. It is recommended that Camp Oz provide reminders to participant who felt so that Camp Oz is a safe place to openly talk about their grief without judgment and with understanding from other children who had the similar experiences and supportive counselors and mentors.

Unlike 2014 Camp Oz evaluation, where each variable was correlated with multiple variables, in 2015 evaluation, each variable was related to one particular variable. For example, participants who were satisfied with learning about grief also indicated that Camp Oz helped children learn coping skills. Similar patterns were present in the relationships between growth in behaviors/emotions and connection, and expression of emotions and remembering the deceased. It is recommended for Camp Oz to include these related content together in activities.

The results regarding the effects of Camp Oz video indicated that the video was effective at helping children review what they learned from Camp Oz and feel connected to others who had the experience of loss. In addition, participants' satisfactions regarding growth in behaviors and emotions, remembering the deceased, and feeling safe were predicted by the effects of the video. This indicated that the video could be a helpful tool to improve participants' satisfactions in these areas, which is one of the recommended intervention options. Thus the video should be continued or even expanded.

Even though satisfaction with 2104 and 2015 Camp Oz Evaluation were not significantly different, participants' satisfactions in every aspect except for coping skills, expression of emotions, and remembering the deceased were improved. This suggested that Camp Oz successfully increased participants' satisfaction slightly by improving each aspect to assist grieving children. However, it is recommended that the contents of Camp Oz regarding coping skills, expression of emotions, and remembering the deceased should be enriched for the future. Because these results suggest that Camp Oz improved participants' satisfactions by preserving the strengths and improving upon limitations found in the previous camp, it is recommended to continue evaluations each year, review the implications from the evaluation, and apply them in the future camps.

In addition to recommendations based on this evaluation, the literature on children's bereavement provides suggestions for future interventions. There are a variety of empirically supported intervention options for bereaved youth such as cognitive grief therapy, music therapy, art therapy, and media interventions. These interventions provides tools for helping bereaved youth complete the tasks of grieving. Cognitive grief therapy serves a therapeutic role to help individuals processing loss while maintaining the connection with the loved one (Malkinson, 2007). Music therapy facilitates adaptation and coping as well as addressing trauma symptoms by allowing children to sing, express their feelings, interact with a group, and express feelings to develop personal and group strengths and learn about physical and emotional control (Felsenstein, 2012). Art therapy elicits children's feelings that are hard to describe in words. This allows children to more effectively grieve, gain a sense of mastery and empowerment, integrate traumatic experiences, and reduce feeling of helplessness (DiSunno, Linton & Bowes, 2011). Planning and creating a video helps participants to develop a sense of empowerment, express

suppressed feelings, and adjust erroneous thoughts (Tosone, Gelman, & McVeigh, 2005). Thus, a media-based group approach likely would be a helpful addition to grief interventions. The addition of these components to grief interventions should be evaluated.

Despite the useful information gained, this study was limited by a small sample size. Camp Oz was held in October 2014, however, the questionnaires were sent to participants at the onset of this study, in July 2015. This might have affected the response rate or accuracy of participants' responses. However, this limitation was corrected for 2015 Camp Oz Evaluation, where the questionnaires were distributed to participants within one month. Video questions added in 2015 were analyzed through regressions; however, the certainty of the results could be distorted by the small sample size. These participants likely do not represent the full diversity of bereaved youth. Furthermore, the comparison that the study endorsed was not able to examine how the same participant were differently satisfied with Camp Oz in 2014 and 2015. For future research, the questionnaires should be distributed at or close to the end of the intervention. Additionally, interventions should be evaluated with diverse populations. It also should be able to compare how the same participant's satisfaction increases or decrease in two consecutive years.

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Appendix

Table 1

Descriptive Statistics Correlations between Measured Items in 2014 (n=12)

	1	2	3	4	5	6	7	8	9	10	11
1. Overall	4.33 (1.15)	.90**	.82**	.87**	.69*	.73**	.53	.87**	.71**	.96**	1.00**
2. Participate again	.90**	.91 (.30)	.42	.68*	.40	.61*	.18	.67*	.42	.89**	.94*
3. Enjoyable activities	.82**	.42	4.42 (0.90)	.86**	.77**	.55	.45	.77**	.80**	.78**	.84
4. Learning about grief	.87**	.68*	.86**	4.08 (1.24)	.88**	.70*	.52	.69*	.91**	.87**	.95*
5. Coping skills	.69*	.40	.77**	.88**	4.08 (1.00)	.67*	.64*	.57	.96**	.62*	.77
6. Growth	.73**	.61*	.55	.70*	.69*	3.75 (0.97)	.62*	.55	.67*	.68*	.91*
7. Expression of feelings	.53	.18	.50	.52	.64*	.62*	4.42 (0.79)	.39	.69*	.45	.56
8. Connection	.87**	.67*	.77**	.69*	.57	.55	.39	4.17 (0.94)	.53	.84**	.81
9. Remembering deceased	.71**	.42	.80**	.91**	.96**	.67*	.69*	.53	4.58 (0.51)	.649*	.84
10. Feeling safe	.96**	.89*	.78**	.87**	.62*	.68*	.45	.84**	.65*	4.58 (0.79)	.99**
11. Information provided	1.00***	.94*	.840	.95*	.77	.90*	.56	.81	.84	.99**	4.20 (1.30)

Note: Means along diagonal with standard deviations in parentheses. Above and below the diagonal indicated both parent and child responses except for item 11, which endorsed only parent responses.

* $p < .05$, ** $p < .01$

Table 2

Descriptive Statistics Correlations between Measured Items by in 2015 (n=17)

	1	2	3	4	5	6	7	8	9	10	11
1. Overall	4.82 (.39)	a	.03	.23	.04	.135	-.02	.19	.05	.68**	.09
2. Participate again	a	1.00 (.00)	a	a	a	a	a	a	a	a	a
3. Enjoyable activities	.03	a	4.71 (.59)	-.11	-.36	.02	-.20	.03	-.08	-.15	.09
4. Learning about grief	.23	a	-.11	4.18 (1.07)	.73**	.09	-.18	.08	.04	.05	-.26
5. Coping skills	.04	a	-.36	.73**	3.76 (1.25)	-.18	.07	-.09	.41	.15	.00
6. Growth	.14	a	.02	.09	-.18	4.24 (.83)	-.17	.52*	-.17	.11	-.17
7. Expression of feelings	-.02	a	-.20	-.18	.07	-.166	3.94 (1.25)	-.02	.64**	-.01	.35
8. Connection	.19	a	.03	.08	-.09	.518*	-.022	4.82 (.39)	-.02	-.07	.47
9. Remembering deceased	.05	a	-.08	.04	.41	-.168	.635**	-.022	4.44 (1.09)	.10	.25
10. Feeling safe	.68**	a	-.15	.05	.15	.113	-.014	-.071	.099	4.93 (.26)	.63
11. Information provided	.091	a	.091	-.258	.000	-.167	.354	.471	.250	.632	4.57 (.53)

Note: Means along diagonal with standard deviations in parentheses. Above and below the diagonal indicated both parent and child responses except for item 11, which endorsed only parent responses.

* $p < .05$, ** $p < .01$, ^a Not calculated due to variable being constant

Table 3

Regression Analyses Predicting Camp Oz Satisfaction from the Effects of the Video

(n=17)

Predictor	Overall satisfaction		Enjoyable activities		Learning about grief		Coping skills		Growth		Expression of feelings		Connection		Remembering the deceased		Feeling safe	
	R ²	β	R ²	β	R ²	β	R ²	β	R ²	β	R ²	β	R ²	β	R ²	β	R ²	β
Review		.875		.213		.066		-.041		.539*		-.243		.078		-.034		1.276**
Connect	.266	-.779	.080	.095	.088	.162	.186	-.258	.781**	.409	.431	.049	.034	.070	.932**	-.292	.64	-1.333**
Comfort		-.003		-.234		-.400		.035		-.031		-.121		-.172		.011	6*	.226
Resilience		-.107		-.040		.141		.356		-.041		.697*		-.050		.953**		-.100

Note: * $p < .05$, ** $p < .01$