

SUPPORTING GRIEVING CHILDREN: *DRAGONFLY DANCE*

by

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ABSTRACT

The following is a synthesis of the literature focused on ways of supporting healthy grieving in children and a related children's book based on the findings. I have produced a book on grieving that is intended to be used by caregivers and educators to support bereaved children. The support strategies that are discussed here and reflected in the book *Dragonfly Dance* include ideas from traditional therapeutic approaches, expressive arts, pet therapy, grief camps, adventure therapy, and group therapy. The tasks of grieving are also described through selected literature. *Dragonfly Dance* incorporates many of the known activities that support transition through grief.

Keywords: loss, grief, therapy, counselling

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Chapter 1: Introduction

Supporting Children in Grief

Loss, such as death of a family member, or other traumatic experiences may lead to long-term behavioral problems for children. Common behavioral issues may include acting out, regression, isolation, and avoidance of triggers. These issues require extra patience, more time listening, and co-regulating using breath work or other grounding techniques and additional support (Heath & Cole, 2011). Educators are generally aware that supports provided by caring adults have been shown effective to reduce anxiety and decrease overall long-term harm (Rosner et al., 2010). Navigating the grief journey with children poses a significant challenge to practitioners. Often there are repeated absences, regressions to younger states of maturity, and upheavals in the clients' lives such as multiple moves to various caregivers, making communication, care, and consistency a challenge. Institutional settings are rife with situations where processing of grief cannot occur or does not easily occur. With conditions such as PTSD or blocked access to services, children can experience childhood traumatic grief, where grief symptoms range from moderate to severe. These symptoms may include longing, dissociation, somatic, and emotional distress (McClatchy et al., 2009). In the field of education, there is support for arts-based, trauma-informed interventions for mitigation of long-term trauma affects in children who have experienced loss (Coleman & Mackintosh, 2015). Some forms of therapy may help children regulate their own difficult feelings and become more aware of the emotions of others while building competency through various activities. A partial list of these activities includes painting, pottery, music, dance, rhythmic movement, and drama. Studies have shown that expressive therapy effectively reduces hyperactivity, aggression, dysregulation, anxiety, fear, sadness,

and withdrawal, and mitigates school problems such as lack of concentration, motivation, and completion (Chen & Panebianco, 2018).

Significance of the Project

Bibliotherapy is a well-established support for children following a death (Heath & Cole, 2011). A new book that deals nicely with the topic of death is *A Sky of Diamonds*, by Camille Gibbs. It deals with the process and the metaphysical aspects of death (Watson, 2016). A book often used in classroom settings to incorporate discussions of loss is *The Tenth Good Thing about Barney* (Viorst, 1987). This book is a clear description of both lighthearted and serious elements of cat ownership. It has been criticized for being upsetting to children whose cats or dogs may have died because of its straightforward approach (Wein, 1982). *The Leaf*, by Leo Buscaglia (1982), is a useful teaching book; however, it is long, wordy, and complex. It is very deep and philosophical, so many children cannot grasp the meaning (Kolencik & Bernadowski, 2007). A more recent book is *The Rough Patch*, by Brian Lies (2018). This book deals very effectively with the ideas of withdrawal, depression, coping, and re-entering life. Lies uses the metaphor of a garden to tell the story of mourning and healing after the loss of a dog. Each book has strengths and weakness, and the authors use diverse approaches to dealing with grief.

In this project I conducted a literature review on ways to assist grieving children with a special emphasis on using books. The main part of my project is the illustrated book I have created that is built on the information from the literature reviewed and hopefully serves as an artistic teaching tool that can also serve as a legacy for my late husband Toni's grandchildren, who will never meet their grandfather owing to his untimely death. The main questions arising from my experiences supporting children include: How do children

experience grief? How do they cope with loss? What has been most helpful to them in their grief? I wanted to see if there was anything new in the literature regarding approaches and techniques in this area. Prior to reviewing the literature, the sense that I had was that everyone is different and responds and heals differently. My guess was that best interventions vary from child to child, culture to culture, age to age, personality to personality and gender to gender, and these ideas are reflected frequently in the research. The literature has helped me see that variations in approaches are necessary and so are foundations such timely responses, meeting attachment needs, and addressing cultural considerations.

Purpose

My purpose with this work is to assist practitioners in providing additional support to bereaved youngsters. I have sought to produce a tool that can be utilized by caregivers to support grieving children. Caregivers would be important people who are relationally involved with the child such as parents, grandparents, youth care workers, and various other support workers, whereas practitioners would be authorized professional counsellors or therapists. This book will provide a springboard for discussing the aspects and stages of grief. I see this project being useful for one-on-one work or group activities. For example, it would be useful in Rainbows, a support group for grieving children as well as other group programs which are discussed in this proposal. The reason I created this tool is my experience of seeing the constant loss of parents and grandparents in my school. It is unrelenting. The processing and connections from therapy and relationship building techniques as they are presented here can often produce resilience in young people. Often children move from not interacting or negatively interacting to building connection with peers and teachers. In developing this book, I would like to help mitigate the difficulty of grief and perhaps be a catalyst for

someone's post-traumatic growth. For example, my reading of other people's experiences of grief and how they coped has inspired me to heal, start a new career path, and enter graduate studies. It is my desire to see the emotional and psychological growth of children, especially from the interventions provided by support networks addressing children's grief. This book focuses on grieving and will hopefully provide children with a deeper level of compassion and connection than they had before the experience (Rosner et al., 2010).

Background of the Project

A 2008 American study found that there were at that time over 40,000 grieving children around the world who had lost a parent from war and violence alone (Stroebe, 2008). While statistics about missing and murdered Aboriginal women in Northern BC or victims of drug addiction are difficult to pinpoint, there is a crisis in Northern BC, particularly in rural areas, which leaves many young people experiencing grief. The numbers of murdered and missing women were reported at upwards of 3,000 by the opera *Murdered and Missing*. However, this number is thought to be too low and is likely closer to 4,000 (Jenkins, 2016).

Grief is a difficult subject, especially with children, and it deserves awareness and consideration. It often presents as withdrawal or acting out behaviors. Many children exhibit somatic disturbances such as headaches, sleep difficulties and stomachaches. Common presentations may include a variety of stressful emotions, inappropriate sense of responsibility for the death, wanting to talk about the person they lost, or dreams where they see the deceased (Heath & Cole, 2011). Generally, in the past the idea was to keep busy. This idea is still very much in circulation, and I even heard it the day on which I wrote these words. I have always liked the adage that feelings that you push down move to the basement

and lift weights. Many people try to help themselves by keeping busy and repressing emotions, and children are no exception. There is no one size fits all intervention. There is so much diversity that a variety of responses are necessary, depending on the factors present. Blumberg (2014) note that preschoolers often return to clinginess, bedwetting, thumb sucking, tantrums, fear, stubbornness, and other types of regression. Young children may display nightmares, fear, or stubbornness, among other signs. Older children may isolate or experience mood swings, anger, irritability, or denial, while teens may experience depression, hopelessness, risky behavior, withdrawal, attention issues, and limit testing. Initially the grieving child may undergo a period of seeming overwhelmed, and sometimes extreme symptoms will appear. Problems can occur with eating and sleeping in any age category. During the transition phase there can be anxiety and irritability. With certain children, separation anxiety can affect school attendance. Eventually, the process may bring the child to a reorganization process with which they can move forward to a new normal and experience hope and possibility.

With so many nuances and variables, the desire is that this project will bring clarity to practitioners helping children through the process of grieving from loss. In any age category, grieving generally takes place in little slices. It is important to note that a grieving student may be stuck in a state where there is total preoccupation with the loss, or the opposite, complete repression of it. My goal is to highlight the best approaches and communicate these in an age-appropriate way that will be well received, through literature.

The main part of my project is my book *Dragonfly Dance* that brings together many of the positive aspects of the literature discussed here and my personal observations from experiencing trauma, both my own and that of the children that I serve. The target audience is

children aged seven to twelve. Beginning tasks that address disorganization, the changes, the upheaval, and symptoms of grief are included throughout the book in an age-appropriate way with the metamorphosis symbol of the dragonfly. The middle section of the story addresses the metaphors for loss. Images include nurse stumps, salmon, dragonflies, and butterflies. In this part of the book, the emphasis is on transition, the ways people heal, and different paths. I have included a discussion of the child telling a caregiver about how it feels to have others engage in teasing or prying. This discussion indirectly targets some unhelpful responses to grief. The ending is about new horizons in addressing grieving children, and the tasks of grieving. If grief, especially traumatic or complicated grief is not addressed there can be prolonged grief, depression, problematic internalizing, and externalizing, with the most common outworking being anxiety and/or depression (Spuij et al., 2013). I have not found articles directly addressing the long-term effect of grief on children. It may be that the variables of suicide, overdose, murder, and poverty, systematic genocide and domestic abuse make it hard to tease out that one variable.

Personal Location

I am a northerner. I was born in Vermilion, Alberta. We often had winters that plunged below -40 and I am used to isolation as well as the beauty of the land. I have been a teacher, and school principal since 1991, and I am currently working as a counsellor in an inner-city school in Northern British Columbia. I am also an artist, potter, and musician. My niece and nephew lost their father, and through them I have gained insights. I am acquainted with shame, guilt, fear, hope, faith, and transcendence. Based on my experiences and learnings about the proven effectiveness of holistic, child-centered therapy, I wanted to explore the literature on children and their grief. More specifically, I was interested in finding

out more about what the limiting factors were, what the best approaches were, and how to use them judiciously based on an understanding of the whole person. I have helped others process loss both in and outside of my career. I have observed differing styles of memorializing and shared in the grieving experience with people of all ages. I know that unconditional support and connection help the grieving process immensely while platitudes may infuriate those grieving. Additionally, I know that expressions of caring and empathy, as well as compassion, help a lot with the process. My approach is informed through a spiritual lens. I am a Christian, and I look to Jesus for strength and meaning in my life. I recognize that in many cultures, spirituality has been a large part of making meaning regarding grief and loss. The areas that are supported within a spiritual framework are containment, meaning-making, attachment, and comfort. Ceremonies and rituals are part of the acceptance of the reality of the loss and provide social connection. My intention is to support connection to hope, life, nature, goodness, and healing. I try to be mindful and inclusive of different worldviews and I think children must be respected in their need to follow their personal spirituality in interactions. An important spiritual concept that is dominant in the book I have written and illustrated relates to paradoxes and holding things in tension. For example, paradoxes within loss, like the new life that comes after death, or that death can bring pain but also growth (Groen, 2008). For me, the sections that highlight salmon, and dragonflies speak powerfully about these ideas.

In 2015 my husband died. I worried excessively about how our son was grieving. He worked and travelled and studied, but he was not really interested in therapy. He went once to appease me because he knew I was worried. The counsellor explained that the needs of a 21-year-old male were quite different than my own. As a school counsellor I work with many

children dealing with grief and loss, and I am passionate about supporting them through the difficult season of grief. I have on average five students per year that experience the loss of a parent or other significant relational connection. Often, they are raised by grandparents or other family members, sometimes siblings. They struggle so much with fear, despair, anger, and hopelessness. One little girl that recently lost her grandpa to Covid-19 said, "He was the only person that I had that really loved me." My goal was to write a book that helps to normalize the grief reactions and produces hope that there is life after loss. Also, I want to showcase the various ways that people can process grief and the tasks involved.

Overview of the Proposal

I have written and illustrated a children's book that supports the grief journey. Because I work in a school setting, I am heavily influenced by the ARC modality of therapy for children because of the strong emphasis on being trauma informed. The ARC model is a common intervention for children impacted by trauma. ARC stands for attachment, regulation, and competency (Arvidson et al., 2011). ARC was developed by Kristine Kinniburgh and Margaret Blaustein working in a Trauma Center affiliated with the National Child Traumatic Stress Network (NCTSN), a United States based consortium of sites dedicated to improving services for children. Attachment in their model targets include support for caregivers, and an emphasis on reciprocity. Regulation targets understanding of emotion and body states and the corresponding behaviors and skills. Helping a student develop competency builds up the individual with a positive self-concept and identity. Another model is the circle of courage by Martin Brokenleg. Generosity, independence and belonging and mastery are the four parts of the circle of courage by Martin Brokenleg, whom I heard lecture at UNBC and who also very much informs my thinking (Brendtro et al.,

2014). Martin Brokenleg is a person who is influential in working with street involved youth. One benefit of Brokenleg's work is that it fits into the circle which is used in indigenous practice, and there are wonderful posters that reflect the key concepts. Also important is that it normalizes grief and may include how the body feels and behaves around grief. I like his work because it relates to the whole person. This orientation is extremely similar in nature where the generosity and independence pieces are oriented toward regulation. In the culture of my school community generosity and giving are foundational. The whole feast system is built on giving. Also, there are codified gifts that are proper to give for certain situations. For example, a visiting chief would receive a gift of tobacco. The elders guide us in this wisdom. My main view of the literature is somewhat filtered through this lens. I have been very influenced by my own family's involvement in social justice, helping with cooperatives, sponsoring boat people and so on. It was part of the culture that I was raised in.

I do work with the students to attach, regulate, and often incorporate skill-building as a vehicle to process the situation. For example, building a memory box for grief includes many different artistic processes. The literature review provides the foundation for the work, and the finished product, the applied section, and the illustrated story book. I have crafted a project that reflects the literature reviewed in the paintings and the conversations that are present in the story.

Chapter 2: Literature Review

Children's Grief

This literature review provides the foundation for the book I have written and illustrates common themes within the grief journey. My goal is to highlight what is helpful on the journey. More specifically, this literature review supports my project by compiling research on the best interventions for grief in children, which is the basis for the book. The book highlights things people have found most helpful, and what obstacles they must face when it comes to grief. Often grief is mis-identified as depression, but the sadness is actually a normal process of grieving. I think the whole topic of supporting children through grief is important because the times we live in are hurried, and daily routines and interactions are fast, yet healing is sometimes slow. Even though we are busy and disconnected as a culture, children still need wise support, time, and patience in coping with grief. One idea that also is not generally discussed around the effectiveness of interventions is the danger of leaving children with no support. Hoffmann et al. (2018) assert that no support is a sure way to invite psychological difficulties. So even if the interventions are showing modest results, at least the child is supported and not suffering alone, which can cause bigger problems. Below, I will discuss the current research and common interventions in the areas of simple grief and loss, complicated grief, and childhood traumatic grief that are commonly used. The areas that are covered in the literature review are the overarching themes of multiculturalism and connecting to the individuals grieving style. These principles guided me in the construction of the story. Also included is a brief discussion of expressive arts and arts-based interventions, mindfulness, music, play therapy, animal assisted therapy, adventure therapy, and grief camps. These approaches in particular are emphasized because they are highlighted

in my story. Bibliotherapy is also discussed because the story itself is intended to be used for bibliotherapy.

Grief Types

There are several types of grief that can occur. Most commonly occurring in my workplace at the school is CTG, childhood traumatic grief. There are often overdoses, suicides, and more recently Covid 19 deaths. Often children experience complicated grief that is difficult to resolve and address because the relationship to the deceased was so dysfunctional or there was abuse or neglect from the parent that died. This adds layers of difficulty to an already onerous experience. Then there is straightforward grief and loss, where there is a natural death that is not sudden, traumatic, or unexpected. McClatchy et al. (2009) suggest that there is little difference in the extended grief inventory scores (EDI) and the UCLA PTSD scores for children losing a parent expectedly or unexpectedly in a traumatic sudden unexpected loss. To sum up, experiencing the loss of a primary relationship is extremely hard for a child, no matter the surrounding circumstances. In the story that I wrote, I put many different types of people in the portrayals of coping and interventions, and also portrayed the suffering of the individual.

Foundational Studies

Burton et al. (2012) have pointed out the diversity in experiences with childhood bereavement based on culture and geography alone. Here, insights into the process from American and Chinese perspectives were compared, which led to the realization that a holistic view must be taken whenever dealing with complex issues like grief. Interventions for childhood grief have been studied extensively through qualitative data collected throughout the process of narrative therapy, pet therapy, or play therapy. Spuij et al. (2013)

noted that connections between the theoretical basis of the interventions tested and the results of these studies are difficult to find in the research or they focused on generic measures of distress rather than symptoms. Another problem was that the methodology of numerous studies was flawed in that the participants were not randomly allocated to treatment and control groups. This study had a large, population-based sample and used varying design samples to find that the severity of the cancer had an impact on the psychological distress; however, interventions are not suggested. So, there are disconnects in the methodology and in the application, indicating that this is an area for further development in the research. For my purposes in the writing of a story I decided to depict differences in the characters, showing people from different culture groups within a variety of experiences.

A meta-analysis by Currier et al. (2007) suggested that except for timely, responsive approaches with greatly distressed individuals the great majority of interventions do not produce statistically significant results. The grief interventions didn't produce results any better than other psychotherapeutic approaches. There was an agreement that the closer in time the treatment was to bereavement, the better. The thought was that the more extensive the time lag between the trauma and the treatment, the less successful the results. An important factor was the perception in the child that there was a genuine need for treatment. Yet another factor was that children that were already showing signs of difficulty benefitted more. This is important in my decision to make my book free as a read aloud on you tube, and inexpensive on-line. I wanted to make it quickly accessible to people in poverty, in so far as I am able.

Rosner's study in 2010 combined qualitative and quantitative research looking at the successes of various arts-based approaches in grief therapy found positive results (Rosner et

al., 2010). Compared to Currier et al., it had a 73% overlap in results but had broader and more positive results. While they found positive correlations between arts-based therapy, the writers said that they did not share the new pessimism. They did many of the same statistical processes as the first study, but also differentiated the results, and focused on more variables. The results were not lump sum, but rather teased out grief symptoms, anxiety, and social adjustment. There were good effect size gains for music therapy and brief school-based psychotherapy (Rosner et al., 2010). Both the Currier and Rosner studies reported attrition in the participant groups (Currier et al., 2007; Rosner et al., 2010). For example, the Rosner et al. study, which consisted of multiphase literature research from database keywords such as grief, grieving, bereavement, bereaved and mourning combined with meta-analysis of participants under 18, reported a 75% drop out for children in control groups. Also, there was a lack of differentiation in some sections regarding gender which affected results. Rosner et al. (2010) also discussed the finding that CBT produced better results for females while EFT produced better results for males. This means that although gender differences need to be studied and applied to children, they have addressed the methodological problems and there is good support for arts-based interventions and music therapy.

Tailored Approaches

It is well documented in the research that different types of losses warrant different approaches. For example, McClatchy et al. (2009) found that when comparing the effects of sudden/violent loss and expected loss, there is not a statistically significant difference in the Extended Grief Inventory EDI or the UCLA PTSD scores for the two types of losses. However, it seems that sudden traumatic loss slows down and delays the healing process due to intrusive thoughts. The intrusive thoughts delay the integration of grief tasks. This study,

which focused on parentally bereaved children ages 7-16, showed that there were no significant differences in the index scores. The reliability for expected loss was .929 and .914 for unexpected loss, and the reported rate of trauma in the form of PTSD was high in both incidences. One of the reasons for this was thought to be that even in cases of expected death, the child has experienced continually an event that threatened death or serious injury to self or others repeatedly, and that the response often involved fear, helplessness, or horror, which fulfills the DSM IV category for PTSD. The other complication was magical thinking with expected death, in which children think they could have prevented or that they caused the death. The categorical measures of time were at 3, 6, 12, 24, 36, and 48 months since the loss and showed no time effect on complex traumatic grief symptoms. The sample size was N=70. This shows us that the children who experience expected loss will benefit from addressing the anticipatory grief symptoms and that being supported in that their grief is not ranked less difficult or painful than a sudden loss. Children who have had sudden traumatic loss will need more support in dealing with intrusive thoughts. Also, both groups would benefit from arts based, body based, and music-based interventions within a trauma informed perspective so that they can express their story with titration, ensuring safety and stabilization.

Practitioners working with difficult situations, such as childhood grieving need to be aware of factors in the lives of the children. These include grieving style, whether internalizing or externalizing, instrumental or intuitive, gender as defined by the child, location, how they are situated in geography and culture, and age as it affects the level of understanding. Also important is personality, in so far as it may predispose a child toward a narrative approach, as opposed to a musical or arts based approach. It also affects the degree

of parental involvement, and their relationship to the school environment. As Desmond et al. (2015) and German (2013) show, therapy involving books and art lend themselves to conversation and the whole interplay of arts-based interventions and narrative streams. Arvidson et al. (2011) discusses an approach that appears successful, and it is well represented in grief and trauma research. The use of arts-based and trauma-informed approaches in the ARC model is well-supported; reading books to children is often a good way to approach important conversations with them within a comfortable setting. This is because the process is already understood, familiar, and comforting to many children. Salloum & Overstreet (2008) produced research that has combined narrative, with the camp therapy model to decrease symptoms of post-traumatic stress and trauma in youth who experienced loss from Hurricane Katrina. To demonstrate the value of narrative therapy, the authors of that study tested the same group of youth before, during and after their treatments. Thirty-two out of an original fifty-six of the students ended up completing the traumatic grief measure test throughout the entire process, which demonstrates a high retention rate (Salloum & Overstreet, 2008). The number of children who exceeded the clinical cutoff for depression decreased from 40% at pretreatment to 20% post treatment, to 4% at follow up after the study and its accompanying therapy had been completed. Most of the children in this study said that talking about their experiences and understandings of the trauma had been very helpful: “It helped me to get rid of my grief and trauma out of my body,” “it helped me to tell my thoughts about who died and who got hurt,” “it helped me to stop thinking about the hurricane”, and “I learned I can talk to someone when I am having problems” (Salloum & Overstreet, 2008, p. 500). To sum up, the combination of the arts based, and expressive therapies in combination with the adventure therapy and narrative, was helpful for grieving kids, especially if they were from adversity. This is important in that the models in the

research are presented as options for the main character in the story. It's reflected in the illustrations as well.

Jacobs (2018) conducted a study during a refugee crisis whereby she observed how narrative therapy and art therapy could potentially, with the guidance of practitioners such as herself, guide young unaccompanied boat refugee children in navigating actual and imagined “storms.” One child said, “I never thought of it that way; when there is a storm in my life it feels as if it’s never going to stop but talking about it like this makes me realize that that is not true. It always has a beginning and an ending” (Jacobs, 2018, p. 279). In this qualitative study, Jacobs found that collective narrative practice creates a foundation for addressing hardship. Studies such as this one, makes it easier for practitioners to see concrete evidence of how their interventions can impact children who have all experienced similar grief and trauma. This shows that the process involving narrative and arts-based interventions together is useful in group settings and has a resiliency and community building aspect that is very beneficial. This is depicted in the story that I wrote, in the grief camp illustration. This page shows older children around a campfire; they are sharing their stories and gaining strength from one another.

Process Oriented

Geldard et al. (2018) found that positive therapeutic changes are “faster, more effective, and more enduring if the approach is purposely changed along the way at different junctures in the healing process” (p. 85). It is helpful to move from first aid, to feelings, to feelings and thoughts, then to thoughts, feelings, and behaviors around grief. As the renowned trauma expert Bessel van der Kolk expounds, people need to be grounded, and be

within the window of tolerance to reprocess any aspects of the grief or loss within a trauma perspective (Van Der Kolk, 2013).

Tasks

Szymanowska (2014) discussed traditional models discuss reducing personal ties with the deceased, addressing the internal tension, modifying structure, duties, and roles; and developing new relationships in the outside world. Wolfelt et al. (2002) challenged traditional stages of grief by proposing six tasks that are appropriately addressed for kids that are grieving (shown below).

Six Tasks of Mourning

1. Acknowledge that the death is real.
2. Process painful feelings with support.
3. Integrate memories into current and future thinking.
4. Redefine self and relationships.
5. New meaning in one's life — making sense of it.

Themes Within the Tasks

Children often feel isolated, experience a loss of hope, engage in self-blame, and avoid conversations about death. They often are feeling afraid of other losses, and experience frustration with other people's reaction to their own state. There are also many individual differences which must be taken into consideration. The idea of grief tasks is important, because whereas people used to think of grief as something that occurred in a linear fashion such as the traditional stages of grief, now people understand that the tasks can be concurrent or isolated, and that there are often reversals and revisits. Also, with children the grief tasks

can surface at any point in their life after the death of the parent. They may grieve appropriately as a child but then experience resurfacing grief again at their graduation or wedding when the loss becomes conscious again. The Grief Help model reduces the tasks down even more simply into four (Spuij et al., 2013). These tasks are outlined directly in the new horizons conversation of the story. This is also indirectly shown in that the character goes from withdrawn and isolating to out in nature to connecting and processing with someone who he loves.

Grief Help Tasks of Mourning

1. Facing the reality and pain of the loss.
2. Regaining confidence in yourself, other people, life, and the future.
3. Focusing on your own problems and not only those of others; and
4. Continuing activities that you used to enjoy.

Multicultural Issues

These tasks of mourning stated above, must be sensitively addressed to respect a diversity of clients. Spuij et al. (2013) conducted a nine-session behavioral study through Randomized Control Trial (RCT). Their goal was as follows:

To examine tentative mediators of the effects of Grief-Help, (i.e., maladaptive cognitions and behaviors and positive parenting), and (3) to determine whether demographic variables, child personality, as well as symptoms of PGD, anxiety, and depression in parents moderate the treatment effectiveness. (p. 395)

That study demonstrates that there are many strategies for grief interventions, and they are influenced culturally and personally. This informed the production of a story that shows culturally different people processing in different ways. It's not just one type of person. Also, the main character is somewhat androgynous. My hope was that children from a wide variety of backgrounds could project themselves into this character.

Personalized Approach

Unfortunately, the grieving style is overlooked and dismissed in some of the literature. Children are on a continuum of intuitive to instrumental, with blended patterns across that continuum. Intuitive grievers express emotion and states rather directly, whereas the instrumental grievers have a more cognitive-behavioral problem-solving style that circumnavigates the pain somewhat. They are more likely to construct a memorial or volunteer. Volunteering allows the griever to make meaning out of the loss, and to contribute in a way that counters the negative impact with a positive proactive response. Problems occur when the person's style and the approach are disconnected (Nader & Salloum, 2011), so it is important to get the right fit. A person's needs will also depend on the level of trauma. CTG (Childhood Traumatic Grief) is often what I encounter in my workplace. Severely traumatized kids will need to have a lot of work that is "bottom up". Body work, and exercises informed by poly-vagal theory are most appropriate. Any reprocessing could be highly triggering for a child. I feel that our responsibility is to be reciprocal to the needs and state of the child. I also think that we must co-regulate with them and make a safe space as the traumatic death often breaks trust and calm in general. The children I serve have also had collective trauma, and part of the healing is choosing the healing path over retributive paths, perhaps part of post-traumatic growth (Cherland, 2012).

The indigenous community where I serve has a remarkably high level of adverse childhood events. They suffer from intergenerational trauma, poverty, traumatic events, and sometimes neglect before they ever come to the event of losing a person. Their physiology is often already very aroused or very shut down. The reality of their lives is often repeated loss, being in a state of mourning that seems to them unrelenting. The added pressure of Covid pandemic has also placed an increased burden on the anxious, depressed, or suicidal kids (Porges, 2020). The need for cultural sensitivity and the ability to co-regulate has never been greater.

In summary, the approach for non-complex normal grieving may be well served in a group such as Rainbows or within a grief and loss group within a school community. Complicated Grief, Childhood Traumatic Grief and situations where there is a mixture of conditions should most definitely be addressed within an ARC framework, or other trauma informed model, where there is safety and stabilization for the child, grounding and body-based therapies are used by specifically trained practitioners. One cannot stress enough the necessity for practitioners to have specific training in the modalities presented.

Cognitive Behavioral Therapy

There have been several CBT orientations that target specific problem areas, such as not accepting the death, that can keep kids stuck and lead to problem behaviors such as regression, hopelessness, and clinginess (Spuij et al., 2013). Grief Help is an example of a CBT based program that includes nine sessions for kids and five sessions for parents. It is currently being studied in comparison to the supportive counselling model by the Dutch (Spuij et al., 2013). Narrative reprocessing in combination with coping skills are the focus in CBG grief and loss groups such as Rainbows. Groups such as this support thousands of kids

across Canada. In Prince George there are currently 100 people on the waiting list for Rainbows groups. The feedback from the kids who have been in these groups is extremely positive. One of the main findings in their results is that the children benefit from supporting each other and not feeling like they are the only one going through that difficulty. The stigma of being an orphan or having a split home evaporates as they share support with each other and are empathized with by a loving adult (Rainbows Prince George, 2020).

Expressive Arts

Expressive Arts incorporates a variety of creative processes, art, music, writing, drama and dance to access meaning and process emotions. Berrol (1992) showed that studies have found value in dance and movement, as they are productive in regulating and expressively releasing emotion. It also helps with grounding and connection to one's own body and can be integrated with mindfulness. Visual art can also provide many therapeutic activities that incorporate creating a visual record of the relationship with the deceased. Interventions shown to have been helpful are collages, memory boxes, quilts, visual journals, and sculptures made from significant objects (Desmond et al., 2015; Neimeyer, 2012). Grieving kids can communicate nonverbally in a safe way through expressive arts, conveying difficult things that they may not have the vocabulary to express (Berrol, 1992). This is important in that the variety of arts-based approaches in the book could easily be used by a practitioner to use expressive arts with the child. The therapist could have a conversation with the child about what would be the best fit for them. They could have some input and control around the process and their preferences. A very visually or linguistically oriented child may prefer the tree of life activity whereas a musically oriented child may prefer a playlist.

Mindfulness

A new way of processing based on Eastern traditions is the use of mindfulness with children combined with some CBT (Semple & Lee, 2011). Mindfulness has been shown to help with anxiety and depression which are associated with the stages of grief. For example, sometimes focused listening or tasting is used to become present in the moment. Essentially, mindfulness activities distract from distressing thoughts and help with becoming present in the moment (Arvidson et al., 2011; Cacciatore et al., 2014; Semple & Lee, 2011).

Music Therapy

Music therapy is the use of listening, responding, producing, and performing music as a therapeutic process. Rosner et al. (2010) is one of multiple studies that has found music therapy to be an extremely popular method for guiding youth through grief. Music therapy was used after the Second World War as a treatment for shell-shocked vets who had experienced grief and trauma for extended periods of time.

Of all the studies reviewed over the course of my project, results from music interventions were the strongest. Rosner et al. (2010) found that the greatest reduction in stress responses occurred in music therapy, with effect sizes of 0.99 and 1.63. They also suggested that, given the low number of studies that have been performed, much more research needs to be done in this area, with an agreement around terms such as complicated grief, and using childhood traumatic grief (CTG) model assessments. Other suggestions were to differentiate the studies in addressing multiple factors such as age and gender, and documenting and communicating attrition results more consistently. The tables in this article are immensely helpful because they present the type of intervention, topics addressed, gains and effects, and settings all differentiated across the spectrum. Even with the modest

quantifiable evidence, many different approaches are effective in helping children deal with grief and loss through the provision of a trauma informed, positive, relational, and trusting environment, including connection to outside supports (Rosner et al., 2010). Bruscia's (2012) book about the use of music therapy for specific cases found that, overall, it can decrease negative symptoms related to grief, connect to positive emotions, and provide cathartic and memorializing experiences. Music gives nonverbal outlets for emotions associated with traumatic experiences, reduces anxiety and stress. It brings about positive changes in mood and affect, and produces feelings of control, confidence, and empowerment. Music gives positive physiological changes, such as lower blood pressure, reduced heart rate, and relaxed muscle tension. Also, it may allow emotional intimacy with others, produce relaxation, and facilitate meaningful bonding times with participants (Bruscia, 2012). The same author notes, however, that in the early unfolding stage of grief it is crucial that music therapy is used with caution as some music can be very triggering. Music within a trauma informed perspective is often highlighted in studies such as Arvidson et al. (2011).

Play Therapy

Play therapy provides an opportunity to story in a non-threatening once-removed fashion. There are a multitude of play therapy approaches that offer a safe way to process the difficult themes of grief and loss, with the added benefit of being somewhat indirect. Play becomes a fictive space that acts as a screen to externalize the inner conflicts and issues, giving the person a chance to process in a safe environment (Neimeyer, 2012). I have successfully used drama for reprocessing the grief narrative. There is limited research on this technique for youth. Such inquiry could be dangerous because of the trauma and dissociative aspects involved in re-living the loss. A trauma informed perspective would have to ensure

that the child was grounded and present. That would be hard to do while they are in a role. Gestalt, play therapy and sand tray type activities are much safer, because of the concrete fictive space (Angelini, 2010).

Play therapy helps children to be consciousness of breathing patterns and used to incorporate breathing exercises. It also helps them think about the body as a core distal relationship and how it affects communication, dipping into corresponding postures as they relate to negative and positive states. Grieving children make connections to triggers and body states by engaging in different types of rhythmic movement. Relationships can also be explored with concrete objects (toys) which represent others and reactions to them. For older children dramatic activities and role play can become an extension of these concepts. Play therapy helps people get unstuck from immobilizing actions (Angelini, 2010). This is reflected in the story as a boy engaging in play through sand tray.

Adventure Therapy/Grief Camps

This modality incorporates outdoor activities within the therapeutic process. Adventure therapy has a variety of experiences that have been incorporated to develop mastery, competence, connection, and trust. These core building activities drive down anxiety, and build confidence, and foster self-regulation in children. Some of the activities are canoeing, camping, fishing, ropes courses, adventure initiative problem solving, knot tying, nature crafts, campfire building, and hiking. Adventure experiences and bereavement camps have been shown to be highly effective in helping orphans who have experienced natural disasters, wars, and loss of parents due to AIDS. These interventions also cross over with the mindfulness therapies in that there is a spiritual component to soaking in the beauty and peacefulness of nature. Spending time around a campfire, stargazing, at the beach and

fishing are shown to be meditative and restorative. There are limitations to the research on grief camps, as one cannot know how much being in nature is responsible for the growth as opposed to the interventions. Grief work results improve when trauma is dealt with first; the triggers must be dealt with so the positive association to the lost one can be accessed. A meta-analysis of several grief camps in sub-Saharan Africa made a remarkably interesting find (Katisi et al., 2019). The study found that the kids who came in with the lowest resiliency and coping scores came away with the biggest gains, having improved in coping and reduction of negative symptoms. The males had a "reliable change" of a 26.7% positive increase, and females a 25.89% improvement with grief symptoms. Of the kids that came into the study, 11% of boys and 8% of girls reported lower stress. The was N=649, which is a composite of 7 separate grief camps (Katisi et al., 2019). The conclusion was that the outdoor therapy provided during EARTH camps increased overall childhood resilience in participants and built interpersonal relationship and problem-solving skills. Katisi et al. went on to explain that the camps were beneficial for all participants and that a quarter of the participants displayed significant results; they were hopeful that the skill based interventions would result in post-traumatic growth as time went on and children returned to their own communities with a new skill set.

There are around 16 million AIDS orphans globally, meaning that the interventions are comprised of large groups in affected countries. Children who lost family members reported increased family communication and acceptance of grief feelings after camp. Swank (2013) discussed how an outdoor playground activity such as "ropes" can guide children who are grieving through normalization of feelings, increased knowledge about death, positive changes in attitude and self-esteem, and improved behavior after participation in outdoor

programs. Qualitative studies have shown that emerging themes such as addressing and expressing the range of feelings, grief as a process, support, coping, empowerment, and hope are the main issues that require addressing. The outdoor activities and ropes courses provided opportunity for these issues to be addressed (Swank, 2013). Also, these camps give children an opportunity to get away from the pain and just play, providing titration (Clute & Kobayashi, 2013). These therapies would in my view, be more suited to instrumental grievers who process by doing. This is incorporated in the ropes course illustration page, and the campfire page in the story.

Animal Assisted Therapies

Animal assisted therapies use animals such as dogs or horses, within the therapeutic work. They build on the pre-existing animal human bond. The use of animals can help the practitioner foster attachment in the child. The pets help increase trust and attachment bonds. One study showed how determining the child's unmet attachment needs and individual differences suggests ways to specifically use pets in meeting those needs (Zilcha-Mano et al., 2011). When working therapeutically with children, a pet can be used as a communication mediator. Pet therapy helps build a bridge between service providers and vulnerable kids, with the animals fostering positive relational bonds and attachment (Maharaj, 2016). Pet therapy has been proven effective, especially with homeless children, at facilitating connection, soothing, and grounding them and helping them to navigate difficult situations in life. The same release of endorphins that happens when humans hug and connect happens when humans hug and connect to a pet. The therapy dogs also benefit and experience a release of oxytocin. White (2010) states that trauma symptoms decrease with a therapy dog. Considering that many of the children who lose a parent have experienced trauma either

earlier or concurrent with the loss of their parent, including therapy dogs in reaching out to bereaved youngsters seems like a win to me. My own observation of therapy dogs is that they provide unconditional positive regard, empathy, and congruence. They also hold space better than many humans. The use of a pet to bring comfort in the story is built into the suggestion of therapy dogs page with the dog and frisbee illustration.

Bibliotherapy

There is an abundance of literature that supports the use of bibliotherapy within a grief support context for children. (Corr, 2004; Johnson, 2003; Koehler 2010; Lee et al., 2014). The essential thing about books is their versatility. They can be used in parts, for a picture walk, as a springboard to discuss topics, for a comforting way to access meaning, or address topics such as spirituality and the afterlife. Other uses are story drama, extension with creative writing activities, responding to visual art, and character studies. Often the use of a book can be something that a child will revisit many times after it is initially used to discuss or process an idea. It gives a permanent record of the concepts. The illustrations and story give a schema to organize the events and situations in the child's mind.

Educators and counsellors frequently read to children as a way of guiding them through problems. When the child is interested in a book and has both a desire to read or be read to and the cognitive ability to apply concepts to their lives, bibliotherapy has been effective. In Pehrsson (2005), it's purported that there is not much empirical research available in this area, but plenty of studies, application techniques and anecdotal reports. A caution is offered by Pehrsson for practitioners who may risk losing sight of the original counselling intent of bibliotherapy in favor of a focus on improving reading (2005). Given that, a need exists to further gather empirical data on the value of bibliotherapy and

storytelling. Narrative exercises such as letter writing, tree of life activities, directed journaling, compiling poems and play lists, loss characterization, retelling with coherence and regulation, and creative writing activities have been successfully used in addressing loss and hardship (Jacobs, 2018; Madigen, 2002; Neimeyer, 2012). One very compelling idea for me was the idea of taking the child's anecdotal comments, compiling them into a letter and reading them back to them. In one study it became apparent that bereaved kids fared better with coping skills and narrative processing than with just coping skills (Salloum & Overstreet, 2012). An intriguing book for older children experiencing grief is *A Sky of Diamonds*, by Camille Gibbs (2015). This book targets an audience aged approximately five to ten and is told from the perspective of a girl, Mia, who is concerned about her dad, who is suffering alongside her from the death of her mother. The feelings of loss, empathy, anger, pain, and grief are consistent with other literature, but what makes this book stand out for me is its creative, or artistic, approach to healing. Mia resolves things with the help of loved ones in an artistic way. This is inspiring both for me as an artist, and as a practitioner with an appreciation for bibliotherapy (Gibbs, 2015).

The application of these concepts are synthesized in the design of the story. Also, the appendix and applied section are also replete with suggested activities and extensions that may be of benefit. It's my hope that this will be a meaningful and helpful story to those youngsters who are experiencing grief. It was especially important to me that the design and production would be incredibly open and easy for the reader to project themselves into the story. The art production was made to be somewhat meditative with sections that are produced with flowing meditative, balanced, lines, and an attention to detail. The balance,

color, pattern, and repeated themes from nature are used as a reflection to the pattern and repetition of the life cycle, which includes death as a normal part of life.

Strengths and Limitations

The reason I compared the relative strengths and limits, was to ensure that the modalities shown in the work agreed with the therapies that were reasonably effective. There appears to be more qualitative research around bereavement in youth, because often the of research that yields results relies on conversations and reflections, not quantitative studies. For example, bibliotherapy has lots of anecdotal evidence but not as much empirical evidence. A lot of ideas about interventions for children are produced in studies derived from grief theory, which is constructed from research on adults and then tailored to children. There is a lot more qualitative research than quantitative because it is easier to analyze sessions qualitatively than to get specific data on them. There is good support for the use of camps and combining traditional talk therapy with a narrative approach. The Salloum and Overstreet (2008) research with children who had lost parents in hurricane Katrina is compelling. They found that there was a significant decrease in of post-traumatic stress symptoms, trauma effects, and distress after administering ten weeks of manualized grief and trauma interventions. As previously addressed in the new research section, there were statistically significant gains for participants in their studies, and the results were differentiated to reflect many different aspects.

There is much work to be done around the efficacy of attaching policy to therapy based on research and observations. Input from families who have experienced trauma is valuable, but sometimes difficult to obtain. The range of experience by different age groups, personal traits, environments, and relationship circumstances poses another problem for those

wishing to draw concrete conclusions about what works best in trauma recovery situations (Nader & Salloum, 2011). More studies are needed that measure grief interventions with consideration of the contextual forces such as culture, location, personality, traits, and economic situations (Nader & Salloum, 2011). Based on observations in my own sphere, poverty is an aspect influencing grief response which I have not seen reflected in much of the literature. I have been thinking about this and my guess is that poor or indigenous people are underrepresented in media, and probably in academia. Another issue is the opioid crisis. According to the B.C. Coroners Service (2021) the fentanyl crisis in B.C. is 74% worse than last year, when 984 people died of overdose, whereas in 2020, 1716 people died. The overlapping Covid-19 crisis has complicated things because people are isolating and therefore often using alone. Also, the role of intergenerational trauma and the compounding effects thereof have put indigenous people particularly at risk (Mitchel et al., 2019).

Much of the literature about the role of the expressive arts as a valuable therapy tool is anecdotal, therefore research that provides quantifiable results demonstrating impact, such as the Katrina study, would be valuable to guide practice for educators. Studies on adult populations experiencing grief have shown that attachment style impacts grief response, thus attachment style has emerged as one of the primary paradigms for understanding grief (Currier et al., 2015). However, literature connecting attachment style to childhood grief is limited.

These limitations were a map to things you cannot discuss or purport in the creative story. They acted like a fence to say, that would be beyond the truth of the research. I don't go into attachment styles or anything like that in the story. I do emphasize attachment and

love in the characters, but it is incidental and more of the creative side of things. To sum up, the stronger research was used to choose the modalities that are woven into the story.

Summary

This growing body of research that supports the variety of interventions discussed and reflected in the story. The range of effective therapies is vast, but I have highlighted the use of the most common interventions. All the therapies discussed are reasonably effective. Regarding the available children's literature, the missing pieces that I see in this area are the tasks of grieving, the best ways to cope within the context of grieving styles and the diversity of ways of coping. In the story I wrote, I only addressed the tasks of grieving. I felt it was too long for a children's book to do more than tasks, and interventions. My view is grieving styles is its own book.

Training and programs that address traumatic grief are needed in schools and universities. Attention to variables such as culture, age, gender, location, personality, grieving style, parental involvement, and school-based programs are needed. Release time and support for caregivers to be trained in Rainbows or modules at MyGrief.ca would be helpful. Grief camps are shown to have excellent results and are not running in our area. These camps could help with speedy intervention, producing better results. Check-ins by the practitioners involved in each specific case are needed to find out if sustained positive results continue over time. Families and individuals need to be brought into the dialogue by asking what they want, need, missed, and were most upset or helped by, especially in indigenous populations. In the appendix and applied section there are resources added to help connect people through web sites, a training manual, and suggestions about possible ways to use the book.

Grievers need to be part of the process in determining what programs and supports would be helpful. Their own styles, temperament, and location need to be appreciated and respected. To be respectful, the voices and needs of the people involved need to be considered and brought into the planning of support services. In the community that I serve, one of the main aspects of decolonization is that the processes and planning of systems need to be established within the context of a conversation that gives a voice to everyone in the circle. Also, from an aboriginal perspective grief is very much a part of life, a meaningful part of the life cycle, by contrast within a medical model grief may at times be pathologized. My goal is to use these general considerations as I move forward in my work with the people that I serve. I also feel that I have incorporated some of the feedback in a synthesized form that gives voice to what the children I serve have expressed to me. For example, the child that is fetal on the bed in their room reflects a therapeutic conversation from one of my students. The notion of death as a natural part of life is reflected in the death of the salmon, the nymph, and the nurse stump in the story.

Chapter 3: Applied Section

Introduction

I have written a book for children aged five to nine that addresses the tasks of grieving for school-aged children through the metaphor of a dragonfly. Dragonflies symbolize metamorphosis. The book can be used in home or institutional settings, and children would participate in a dialogue with the caregiver during the reading of the book. The middle of the story includes a scene with many children doing different things that guide the process of grief. This section could encourage discussion of differences in life and grief processing with the overall goal of demonstrating how complex the subject is for any living being, and yet holding that in tension with the normalizing fact that death is a part of life, a natural event.

I have been thinking about the common problems that children face including anger, fear, and anxiety. Also common is a belief that they are responsible for the death, a desire to talk about the deceased, dreaming or seeing the deceased, not wanting to forget, and desiring to stay connected to the deceased (Heath & Cole, 2011). I have addressed these topics in my book, while keeping it within a reasonable length.

The book can help generate questions that would create opportunities for children to discuss their own situation with their care providers. I hope to provide something that is comforting and encouraging to children who are navigating unfathomable turmoil. For this reason, the book ends on a note of promoting engaging in meaningful activities together as a way of providing new connections where a primary connection was lost, and I hope that it will encourage expression of painful emotions if necessary.

Process of Book Development

The sequence of production was to write the literature review, and then brainstorming and webbing of the pertinent themes found in the literature affecting students. To guide me in the decision towards publishing *Dragonfly Dance*, I have made a binder with color codes for the salient issues and taken notes. I also observed and reached out to classroom teachers with questions about their experiences and provide expertise.

The next step was building story boards with rough sketches of the story. I then wrote the dialogue, and then sketched, painted, photographed, and inserted them into the Publisher document. The creative process that I used was around themes. I had ideas about metamorphosis and the idea of death as a beginning. I always loved Fernando Ortega's song dragonfly, and I would sing and play that song as I wrote. Ideas came to me when out walking with the dog. I had butterflies and chickadees that landed on me and wouldn't go. I felt they were comfort from a divine source that I couldn't really explain or understand. I often would sketch up a set of paintings, usually five at a time. Then I would do a wash of yellow, play the piano, think about the paintings while I played. Then, I would go back and do the next wash. The stories and characters are a composite of children in my care, family members, and myself. As I was writing, the idea of modelling comfort and support within the interplay of the characters became important to me. Sometimes, when I was stuck and couldn't think of what to write, or how to write, I would just paint and add layers of rhythm and pattern to existing images that helped me to ground as I meditated on the work. After that was done, the pages were formatted and designed to contribute to the artistic flow and the meaning of the story.

Format

The story *Dragonfly Dance* will be available as an online version with black line masters and suggestions for use, while the story alone will be shared through YouTube. It will also be uploaded in a digital format to Teachers Pay Teachers. Each page is laid out simply with illustrations to guide the text. The different modalities for processing the pain of grief and loss and the stages of grief are highlighted in the story. The YouTube version will be useable during therapy sessions with any practitioner, or during Rainbows sessions.

Parameters

This project would be useful with children aged five to twelve. It is not suitable for early childhood or adolescents unless adapted or modified or considering cognitive development. It can be used in a sequential way or with a focus only on certain sections, as the child is able to connect and use the content for their unique situation. Often, we use a picture walk for one session, briefly scanning through the pictures and using the artwork to elicit responses, which is sometimes enough for a person to experience progress. The deeper concepts that can be pulled from discussion of metamorphosis (represented by the concept of a dragonfly), life cycle and other natural concepts can give meaning to an otherwise exceedingly difficult concept. The book will also be useful as a starting point for discussion of the best way for classmates and friends to understand support for grieving peers. This can be used as a springboard to discuss the common themes that come up for the children as they grieve.

Ethical Considerations

There are a multitude of effective interventions that are shown to support children. Care must be given to match the right intervention to the specific situation of the child, their

grieving style, personality, age, trauma history, culture, and type of loss. In addition, assuring that trauma symptoms are addressed by providing support in a safe appropriate manner is imperative. Helping young people address the tasks of grieving, and providing support and care is important for their future development and positive functioning. No child should have to face the confusion and difficulty of grief without support and understanding. I think there is a need for children's books to support the communication of these concepts for caregivers, in ways that highlight the healing journey.

One cannot stress enough the importance of the need for practitioners have specific training in the modalities presented. The book is intended to showcase many ways to healing. The intention isn't to suggest that the classroom teacher or school counsellor engage in say expressive arts therapy, rather that it's something that can be resourced and accessed. There are a variety of approaches that are effective, but most specifically bibliotherapy and general expressive therapy would be most closely aligned with the application of this book. Expressive therapy includes arts based therapeutic interventions which are often used by integrationists who work with children within an expressive therapy framework. One example would be, drawing your hand, putting the things you can control on the inside, and putting things beyond your control outside the drawing of your hand. The child will often add colors and images to make it meaningful for themselves. Art therapy proper, would be an authorized practitioner in art therapy, specifically trained to use the art process as a vehicle for therapy. They have advanced training in the technical and process skills, art theory, communication, history, and cultural context, as well as fully accredited therapists. Essentially, they are equally at home in the psychotherapy context as they are the art context.

I have been thinking of the common problems children face. Important concerns are the need for avoiding hot spots, those areas that trigger and cause the individual to flood and ensuring that one provides thoughtful support. Considerations for practitioners practicing any of the forms of support discussed here can be gleaned from ideas that reoccur in the literature: Lewis (1997) suggests the following considerations:

Don't tell us what to do:

- Don't pry.
- Don't tell us how to feel.
- Don't poke our wounds to see how far we have come.
- Don't tell us your theory.
- Don't pretend closeness when there was no relationship before the loss.
- Don't exclude us.
- Don't make us second class or call us an orphan.
- Don't explain away our pain.
- Don't tease us.
- Don't expect us to cry if you are, we may already have cried enough.

However, Blumberg (2014) suggests:

- Do listen, care, and offer help.
- Do stay in touch but give us enough space.

- Do tell us you care for us and love us.
- Invite us even if we cannot join you.
- Do include us.

Reflections

The broadness and diversity of the data on this subject made this project a challenge because there were important elements in so many of the readings and resources. Wading through all the information is an expedition of its own.

I have found some excellent compilation lists of books to support grieving kids; I will provide a list in the appendix. Since starting this project, I have also taken the Rainbows training course and am planning on getting something started in my school. The Rainbows training course is a one-day course that goes through the basics of how to support bereaved children through the implementation of the Rainbows courses. They have a developed curriculum, provide sample activities, and educate facilitators about how to implement the course and effectively communicate with caregivers. The way that their program is set up is very much in alignment with current practice and is relatively easy to implement because of the strong structure. Some of the problems I have with it are that the reading levels of the workbook journals are too high for my kids who are often suffering from complex trauma and are also developmentally delayed. However, if I use a lower level it doesn't address the grief topics most urgent to that age group. I have also worked together with classroom teachers who have shared their expertise and experience. I ask them for their feedback and receive support and direction from their expertise. My kids really like doing arts-based, project-based, group and narrative activities as well as pet therapy and bibliotherapy, but I

must usually scribe for them or use technology. So, because of the matrix of poverty, trauma, and grief, they need to have support in ways that are beneficial to them.

Chapter 4: Dragonfly Dance



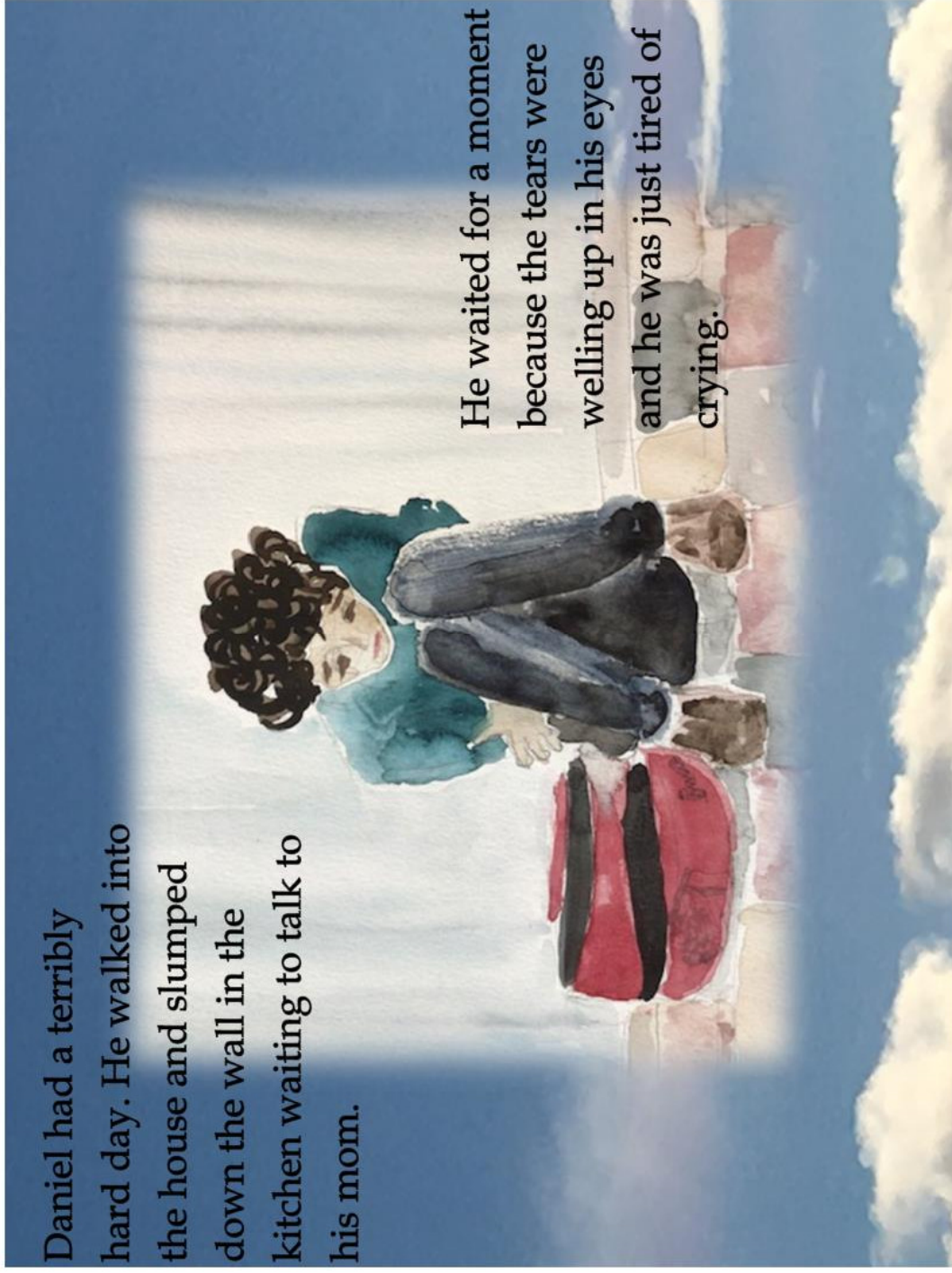
Dragonfly Dance

Lessons on Loss from Nature
Written and Illustrated by Patricia Kristinsson



Daniel had a terribly hard day. He walked into the house and slumped down the wall in the kitchen waiting to talk to his mom.

He waited for a moment because the tears were welling up in his eyes and he was just tired of crying.





"Hi Daniel, how was
your day?"

That was all it took, tears
splashed down his face and hit
his knees and started to soak
his homework bag.

"It was horrible mom, I think if one more person says something thoughtless to me I am going to freak out. They tell me what to do, try to get me to do things I know will just upset me too much, and give me theories about why bad things can happen to good people. I just want to tell them all to shut up."

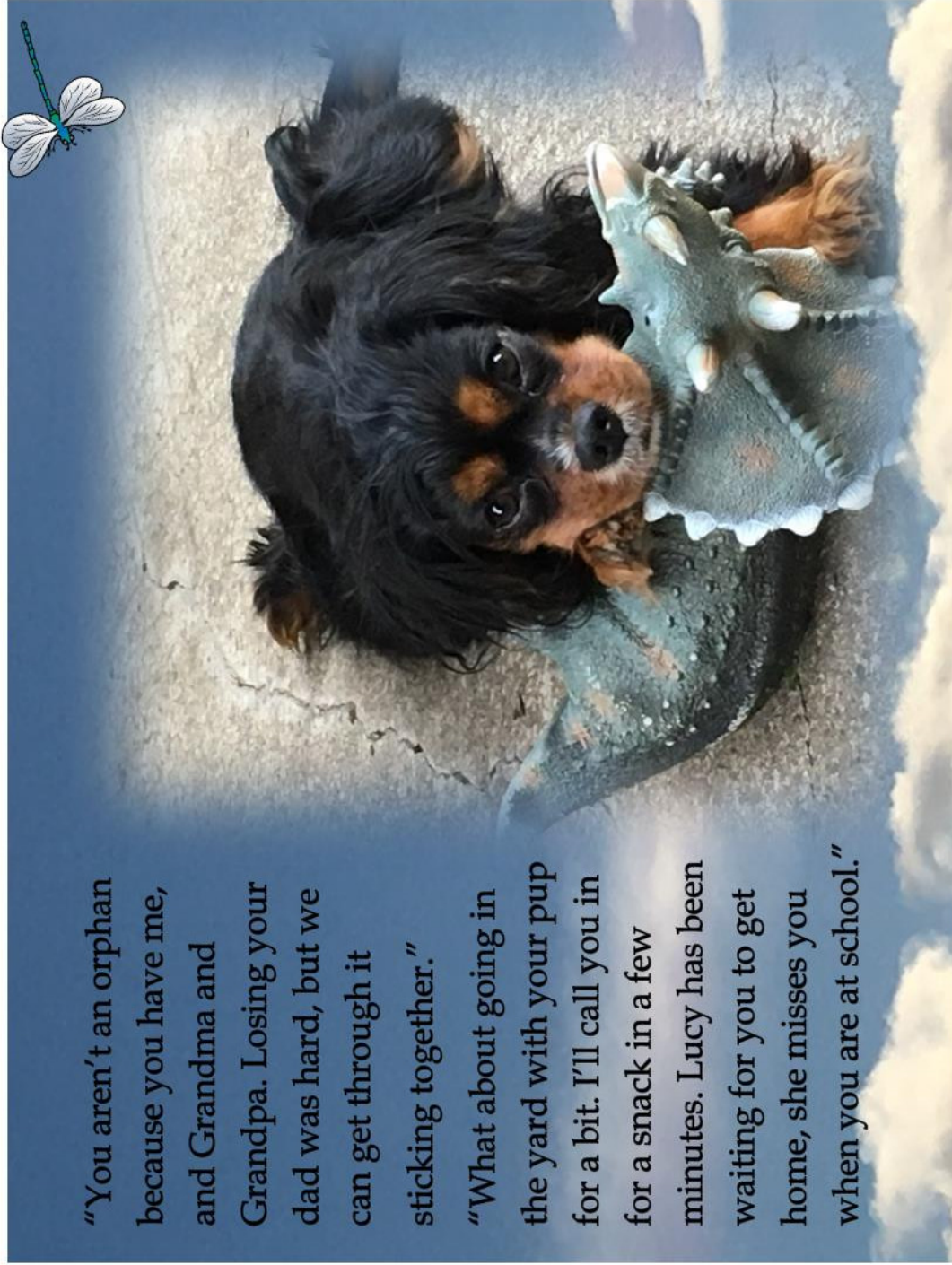
"Sounds like someone could use a break from all the well meaning people..."

"The worst is mom, at first everyone just wanted to pretend they were my best friend, now they are just excluding me. One kid today even teased me and called me an orphan..."



"You aren't an orphan because you have me, and Grandma and Grandpa. Losing your dad was hard, but we can get through it sticking together."

"What about going in the yard with your pup for a bit. I'll call you in for a snack in a few minutes. Lucy has been waiting for you to get home, she misses you when you are at school."

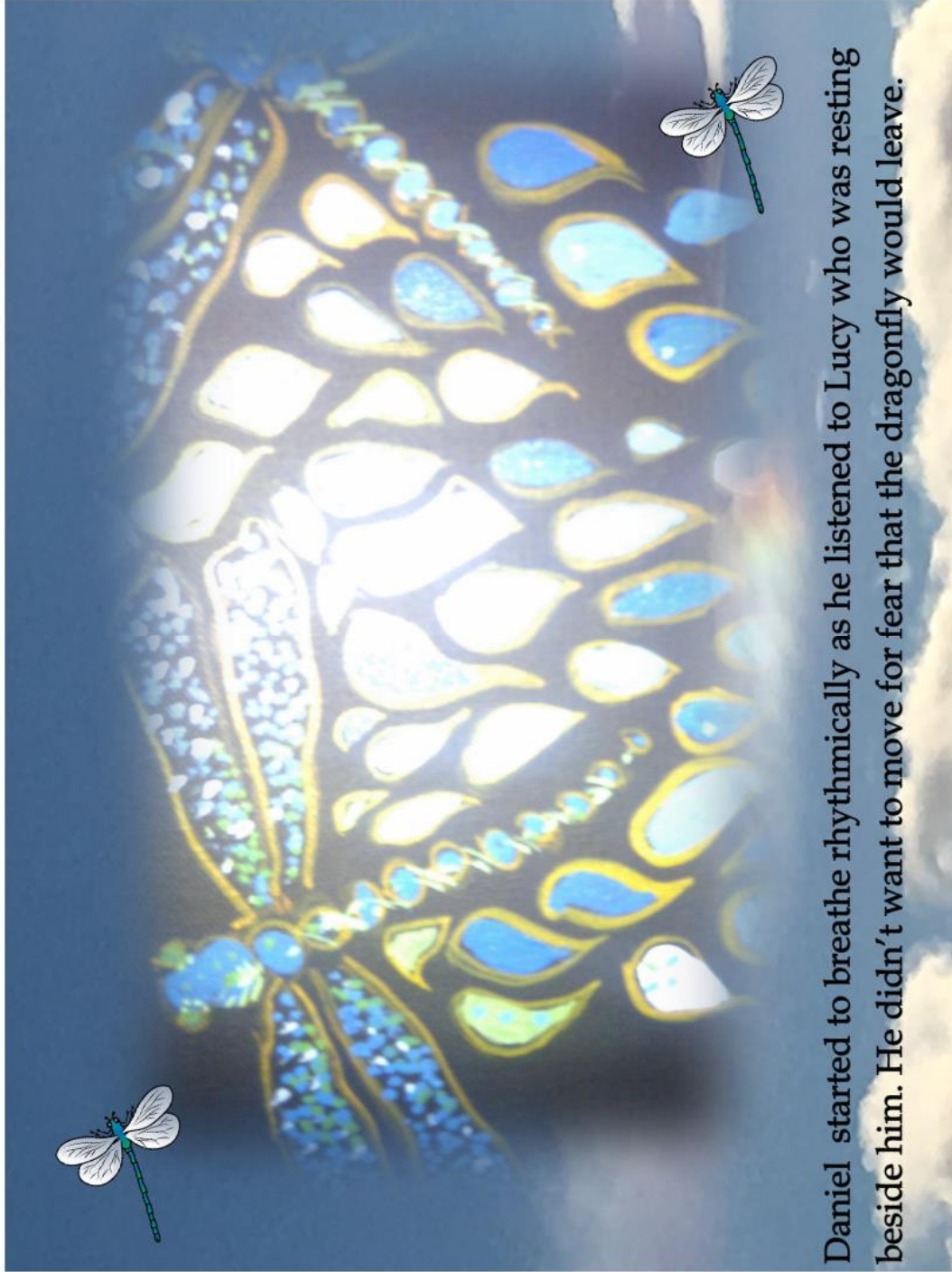




"Here Lucy, here pup pup pup..."

Daniel felt better as he ran his fingers through the fur of his pup and chased the soccer ball together. They ran and ran and ran, and eventually collapsed on the grass for a rest. It felt good to get some air. As he was resting, a dragonfly came and landed on his knee. The colors shimmered in the sunlight. The dragonfly stretched its translucent shiny wings that looked like they were carved out of silver.

Daniel stared, mesmerized. It felt good to look at something mysterious and beautiful; for a moment it took his mind off of the swirling thoughts of the day.

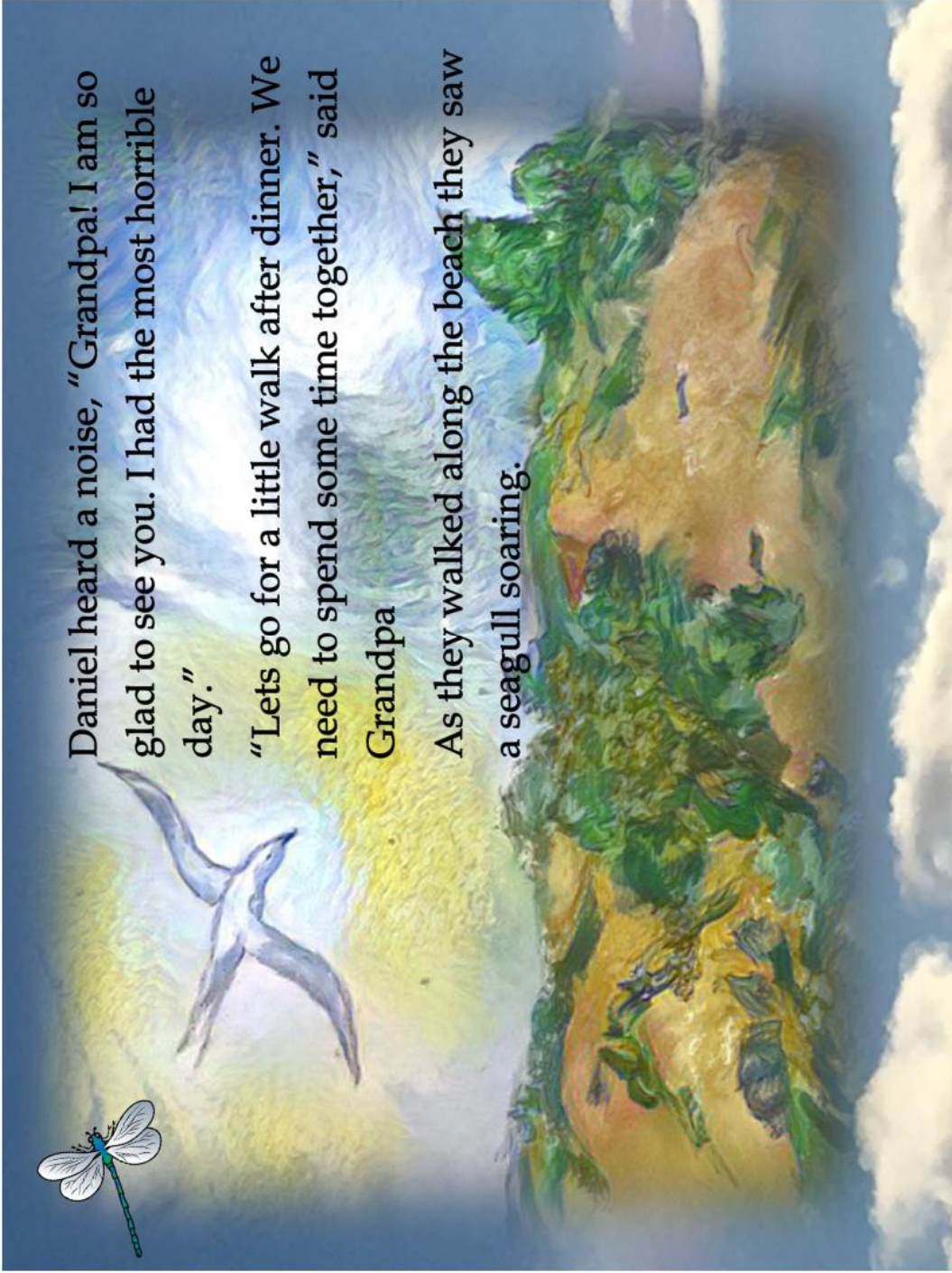


Daniel started to breathe rhythmically as he listened to Lucy who was resting beside him. He didn't want to move for fear that the dragonfly would leave.

Daniel heard a noise, "Grandpa! I am so glad to see you. I had the most horrible day."

"Let's go for a little walk after dinner. We need to spend some time together," said Grandpa

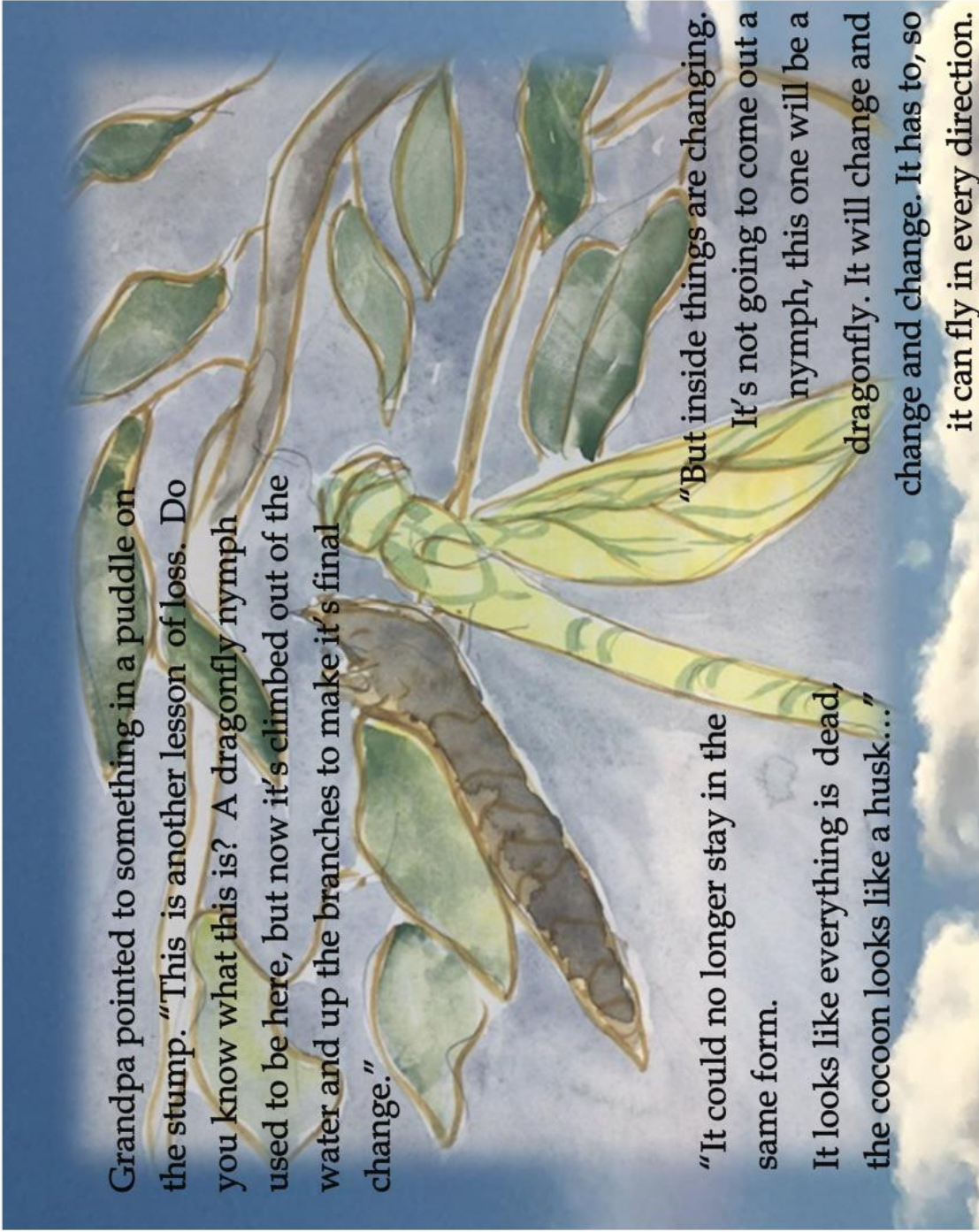
As they walked along the beach they saw a seagull soaring.



Daniel and his Grandpa walked along the beach then headed into a wooded area, where they saw a nurse stump. Grandpa asked, "Daniel, what do you see when you look at this stump?"



"I see a dead tree Gramps", Daniel replied. Grandpa said, "It's true that the big tree died, but there are new little trees all growing out of the stump because of all the light, nutrients, and moisture. It would be too dark for those little trees to grow if the canopy wasn't opened up a bit. Now there is room for them to grow."



Grandpa pointed to something in a puddle on the stump. "This is another lesson of loss. Do you know what this is? A dragonfly nymph used to be here, but now it's climbed out of the water and up the branches to make it's final change."

"It could no longer stay in the same form.

It looks like everything is dead, the cocoon looks like a husk..."

"But inside things are changing.

It's not going to come out a nymph, this one will be a dragonfly. It will change and change and change. It has to, so it can fly in every direction.

Grandpa led Daniel to a stream nearby. "This salmon is so tired, it has been at sea for four years and now it's climbed up rocks and waterfalls, sometimes going across stretches with no water. It's fins are shredded and there are pieces missing. It's lost parts of itself."



But, inside it carries a generation of new salmon in the form of eggs. It will spawn and then it's body will feed the eagles.

Daniel and Grandpa spent the rest of the day just soaking in the nature and feeling good being together. It was so nice to see the water and the blue sky. It soothed Daniel's jangled nerves.

Daniel was so tired when he got back to the house that he just HAD to sleep. He only walked for a while, and usually he wouldn't be so tired but he just fell asleep. When he woke up, all the sad feelings just came flooding back in. Memories of the problems and all the pain came back to his mind.

Grandpa knocked at the door, "want some gingerale?"



"Grandpa, I am still really sad. And everything that people say seems to bug

me. I feel like

crying all the

time, and I just

can't focus or

think. What can I

do? The kids at

school were even

teasing me and

bugging me

calling me an

orphan.

Gingerale

won't...fix it." Daniel started to cry and Grandpa gave him a big hug.

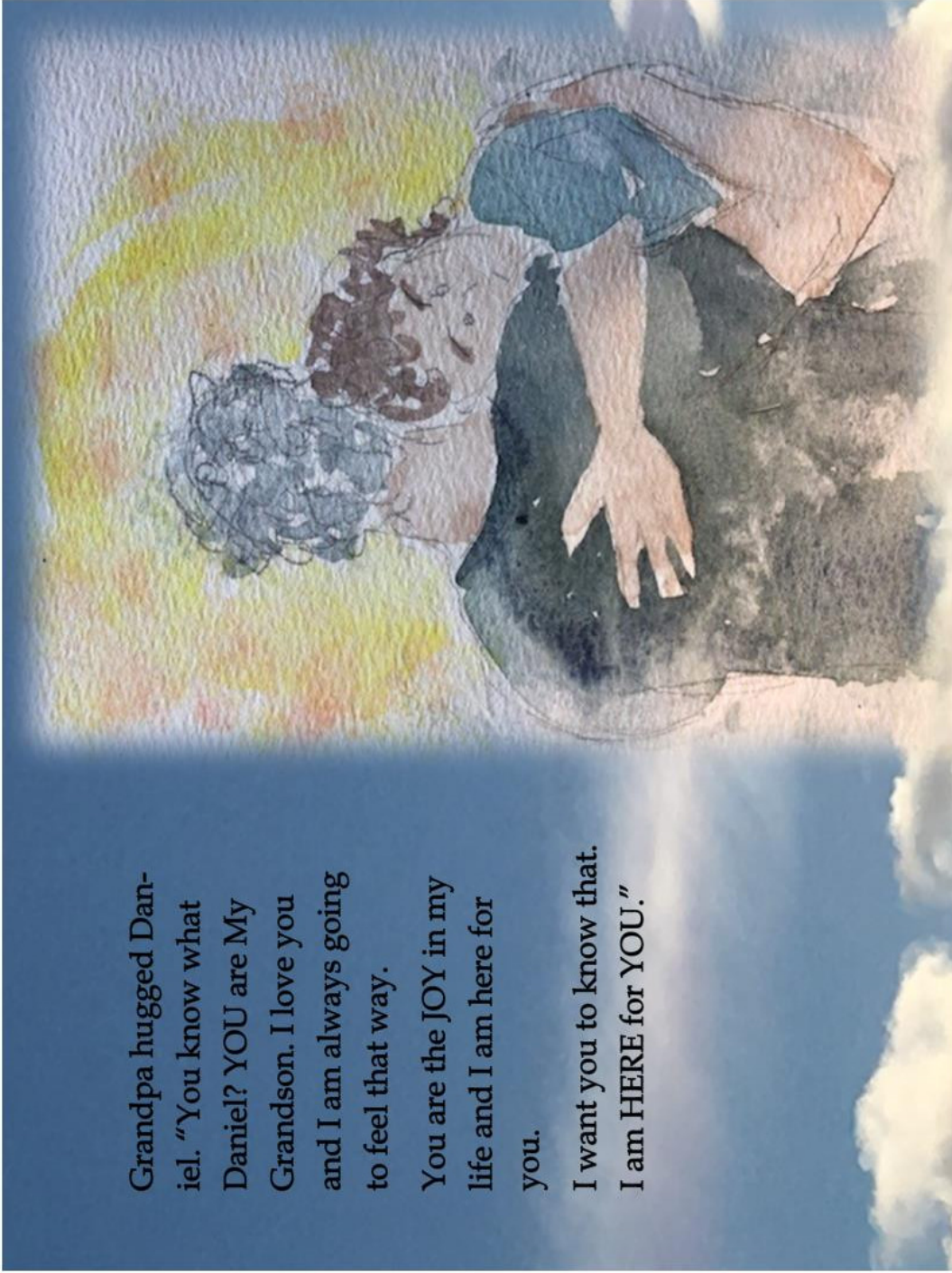
"I can't sleep very good, and I feel achy all over. I feel like I just want to stay in my room and never come out."



Grandpa hugged Daniel. "You know what Daniel? YOU are My Grandson. I love you and I am always going to feel that way.

You are the JOY in my life and I am here for you.

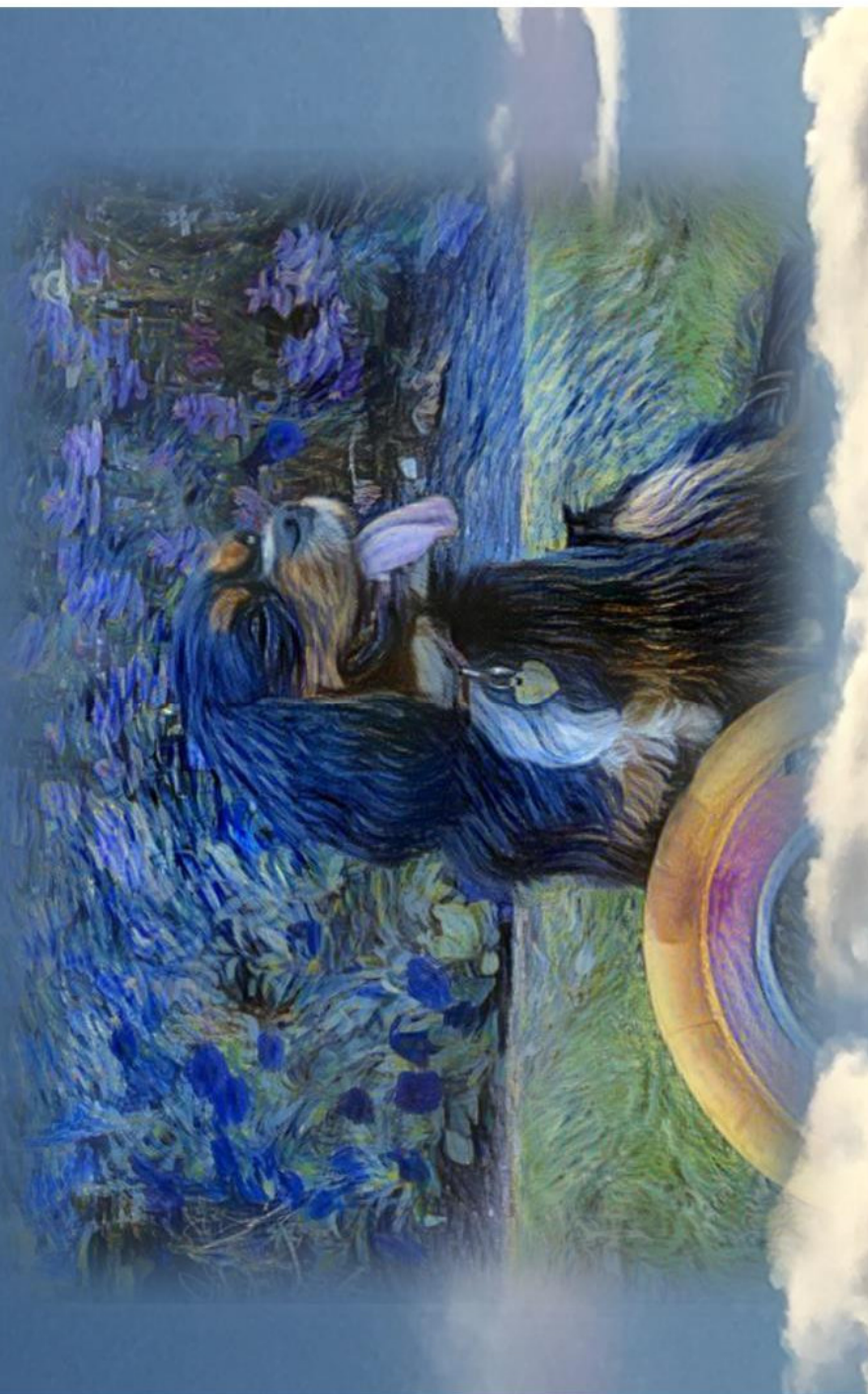
I want you to know that. I am HERE for YOU."



"Daniel sometimes it's too hard to face these things alone. Sometimes we need help from a counsellor. When we talk things over and tell our story and what we are feeling it can help a lot."



“Sometimes we need help from a comforting animal that connects to us without too much talking. Therapy dogs are great!”

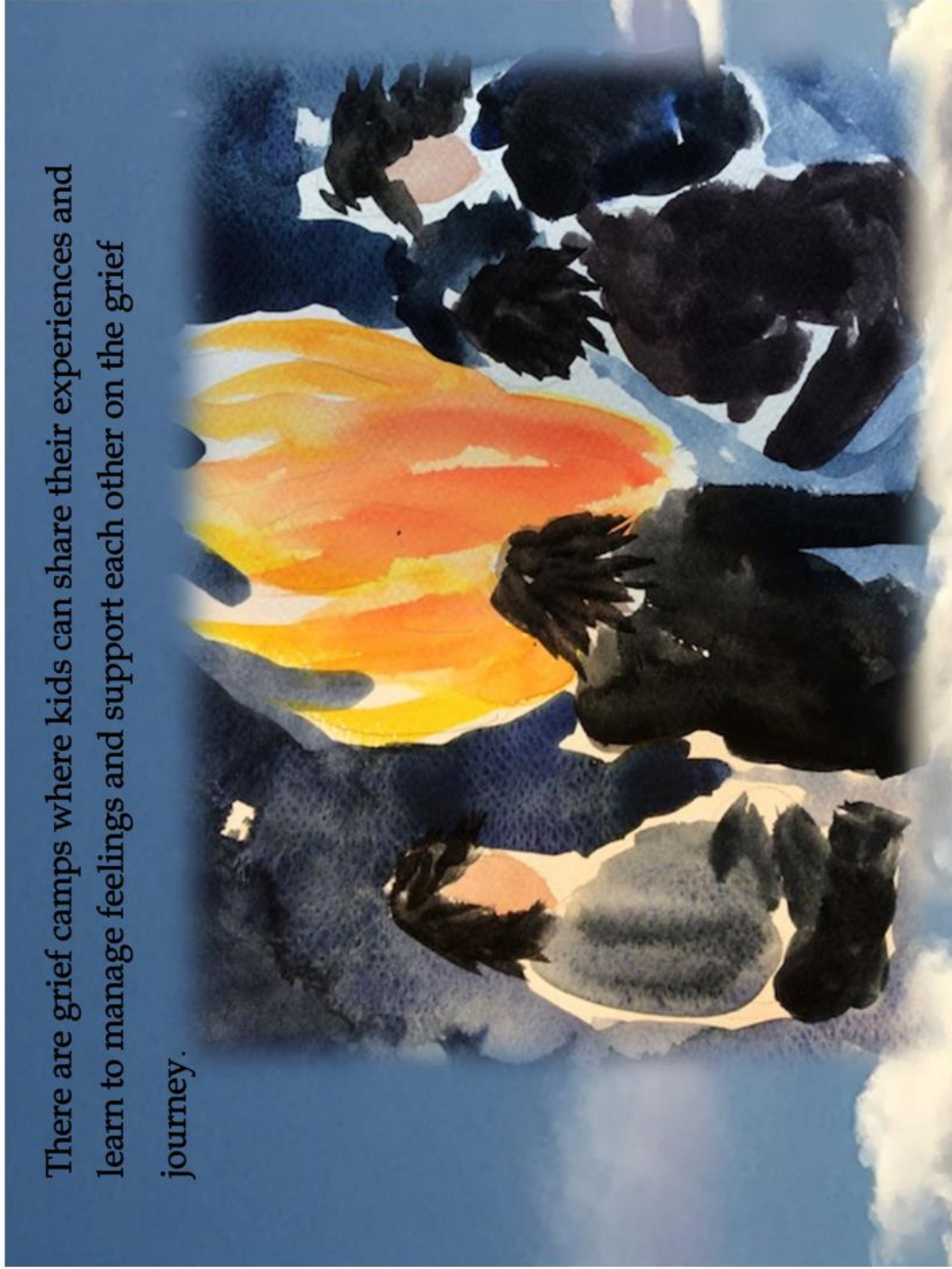


"Sometimes we need a new experience that helps us feel brave and confident again."

"Sometimes we need to be with others that have gone through what we have, to encourage and support us."



There are grief camps where kids can share their experiences and learn to manage feelings and support each other on the grief journey.



"Some counsellors help us with singing, playing music, dancing and making art that lets out the feelings inside and helps us understand."



"Just feeling the materials and enjoying the colors and textures can make us feel more grounded and present. We can also express things that are too hard to talk about with words sometimes."

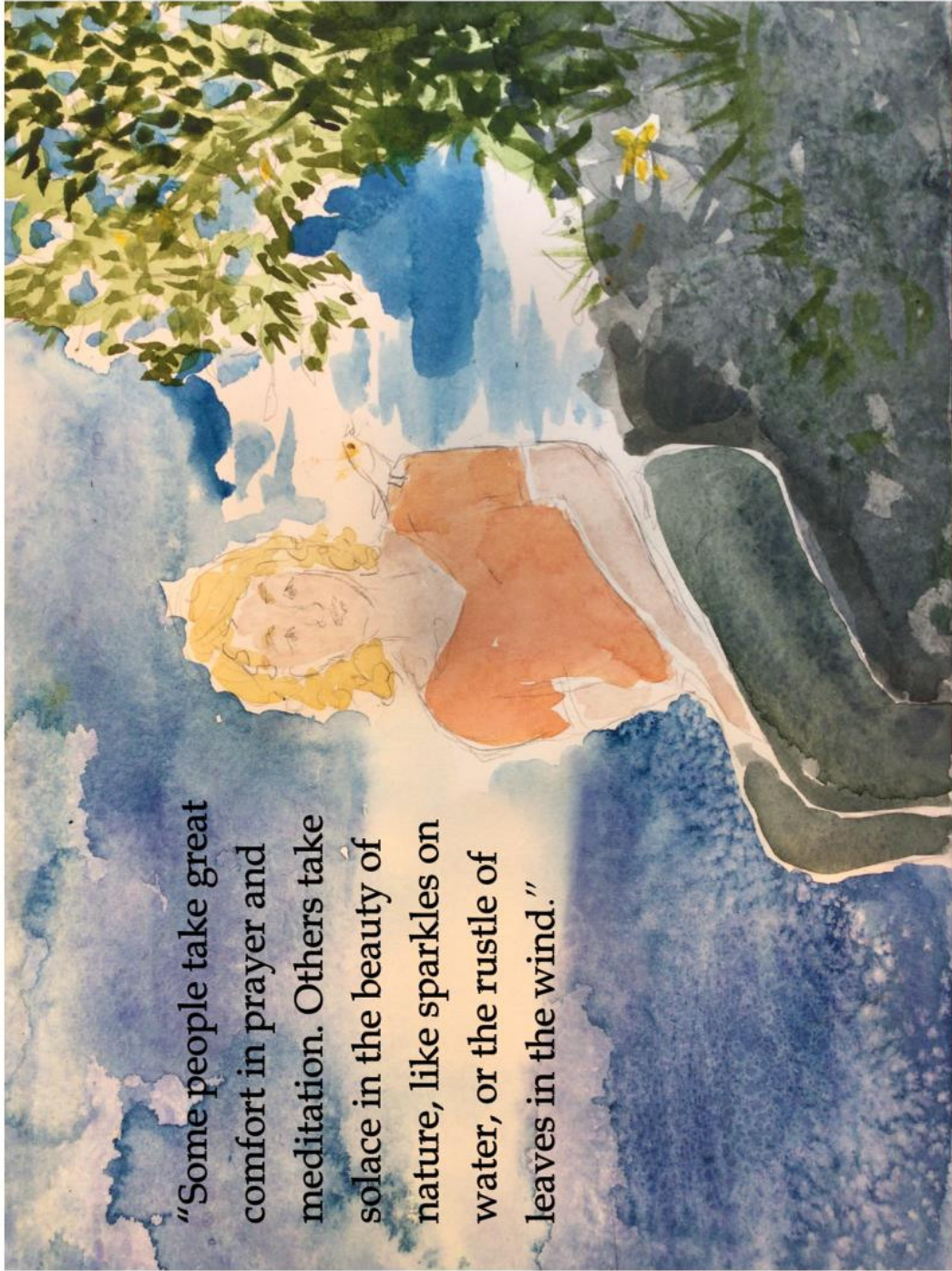


Music will sometimes lift our spirits. Sometimes it helps us remember. Sometimes it helps us feel our feelings and express them.



Dancing can help us move our bodies and feel more grounded and settled. It can let out feelings we might not get out with talking.





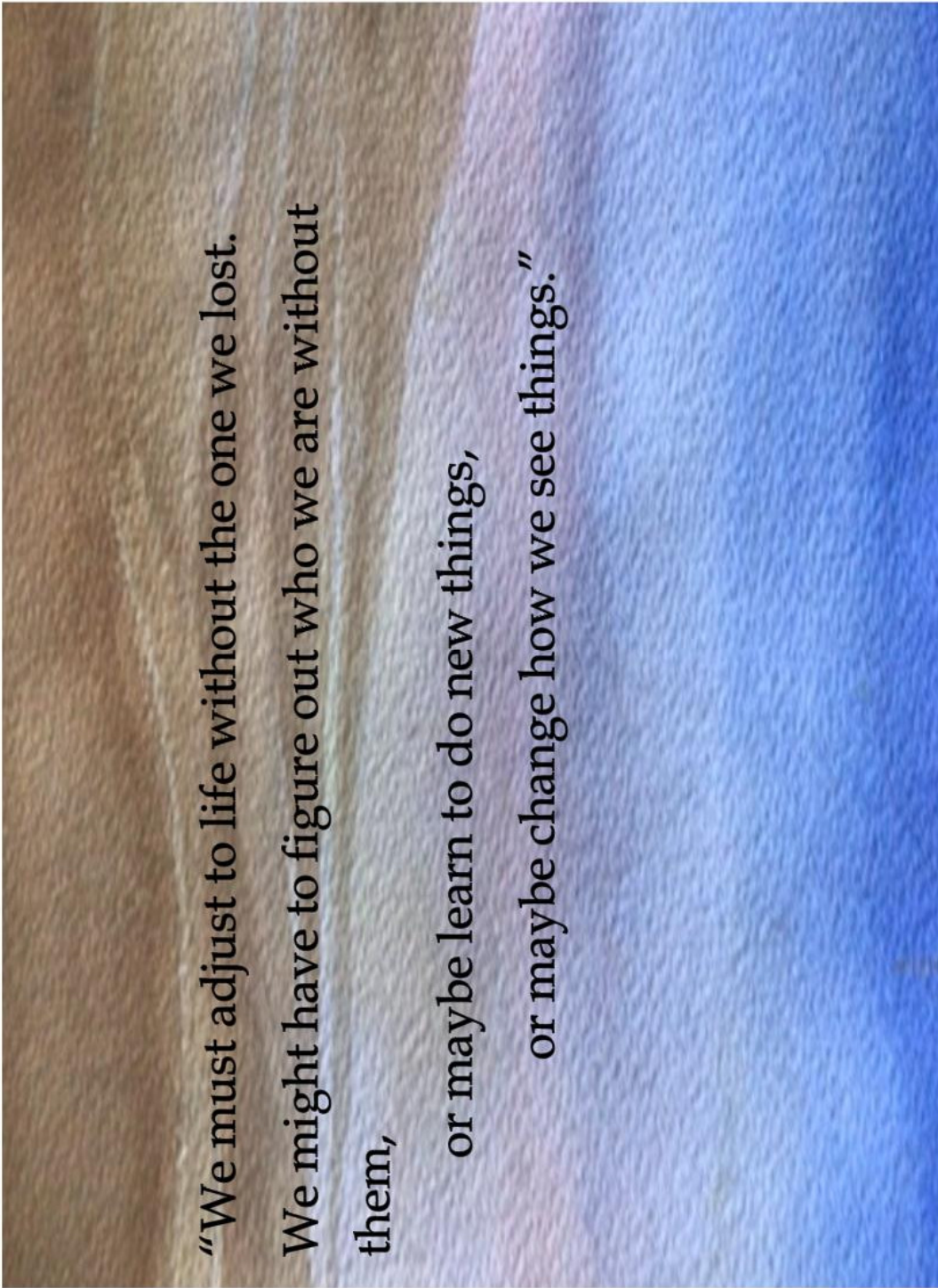
"Some people take great comfort in prayer and meditation. Others take solace in the beauty of nature, like sparkles on water, or the rustle of leaves in the wind."



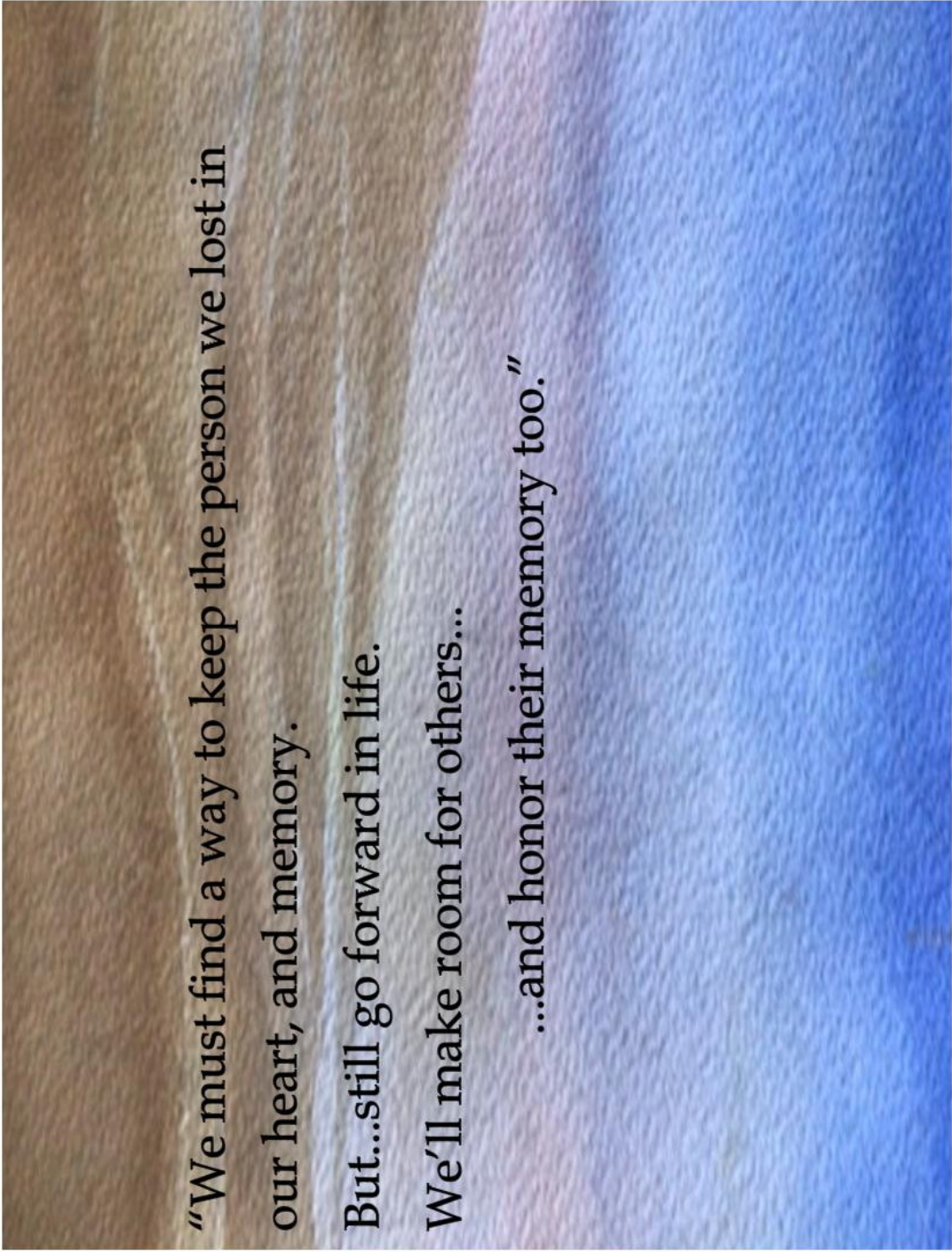
“Eventually we will have to change a little bit to get better. There are some tasks we must complete.

We must really accept that the death is real...”

"We must feel the pain;
Look at it,
name it,
and make sense of it."



“We must adjust to life without the one we lost.
We might have to figure out who we are without
them,
or maybe learn to do new things,
or maybe change how we see things.”



"We must find a way to keep the person we lost in
our heart, and memory.
But...still go forward in life.
We'll make room for others...
...and honor their memory too."

This will be quite a journey, but remember, we are taking the journey together.

Without change, there would be no dragonflies





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Appendix

Ways to incorporate this book:

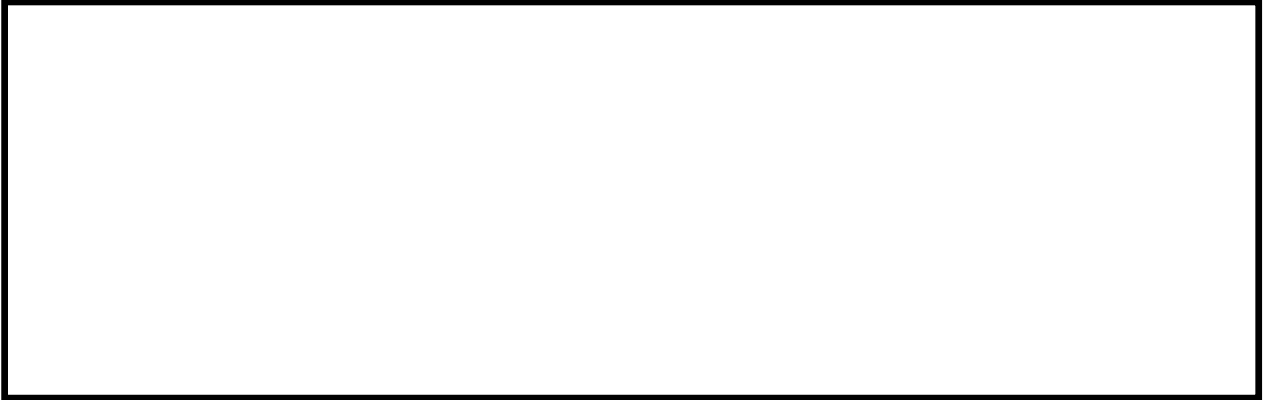
- Ask the child to tell you about the character that they relate to the most. Look for connections with present support systems.
- Use the story to discuss the triggers of the character and compare the child's triggers in a safe way.
- Simply co-regulate with the child, make eye contact, use their name, and smile as you read the story, check in for responses and level of comfort.
- Discuss with the child which modalities that are shown in the book would be a good fit for them and explore possibilities.
- Inquire politely about their world view and system of meaning making.
- Spend time doing a picture walk, scanning through the images without reading the text, and give the opportunity to talk about what looked interesting to them and why.
- Practice grounding if pages are difficult, use that to bring in psychoeducation around self-regulation and staying safe emotionally.
- Monoprint a butterfly, or a dragonfly by folding a paper in half, painting wings on one side, then close and print the other side off the painted side.
- Do a response to the visual art by discussing the elements and principles of design, and a discussion of what the viewers notice and construct the story behind the images.
- Order chrysalis sets from a scientific supply firm and hatch painted lady butterflies, make connection to the seeming end of a phase and the beginning of a new one.

- Extend the story by past the last page and think about the different things that might come in the story of Daniel's life.
- Do a drawing of Daniel 20 years in the future, 50 years in the future, 80 years in the future.
- Write or tell the story from the dog's point of view.
- Write or tell the story from the dragonfly, salmon, butterfly, or tree's point of view.
- Role play a "re-membering" conversation between Daniel and Grandpa highlighting the best things about the lost family member in the story, and if the child is comfortable, talk about the wonderful things about the person they lost. For example, what they called them, how they would like to be remembered, what they were proud of, what made them so special to you.
- Use a black line master below to separate beginning middle and ending of the story or metamorphic process.
- Use the feeling boxes to sort feelings attached to specific pages or draw parts of images that match certain feelings.
- Listen to Fernando Ortega's Dragonfly or Charlotte Diamond's metamorphosis songs on YouTube, respond to music with drawings.

Beginning Middle End

Write or Draw what you noticed in the beginning, middle and end of the story:

Beginning:



Middle:



End:

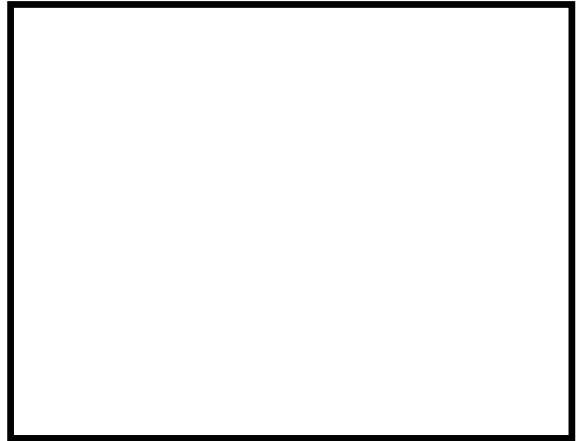


The Big 6 Feelings

Draw or write what you felt about things in the story if there was something meaningful to you.

Angry, Sad, Afraid,

Joyful, Powerful, Peaceful



Book List and Guidelines for Sharing

A short list of titles and their approximate age range and application follows below. These titles need to be carefully reviewed before use to ensure they are a good fit for the class, and the needs and composition of the group. Discussions before and after the reading of these books are good to link to personal and community experience and talk about adaptive coping. Some basic books that are immensely helpful as outlined in Heath and Cole (2011):

Books

Brown, L.K. (1998). *When dinosaurs die: A guide to understanding death*. Little Brown Books.

Using a cast of dinosaurs, this book covers many details about death, dying, and grieving. This book opens conversation about death but is not as strong in covering emotional aspects of grief.

Picture book for ages 4-8

ISBN-10:9780316119559

Viorst, J. (1987). *The tenth good thing about Barney*. Simon & Schuster.

Told from a young boy's perspective, this book about Barney-the pet cat, his death and funeral service. As part of the memorial service, the young boy tries to list ten good things about Barney. But has a hard time coming up with the last (10th) good thing.

Picture book for ages 5-9

ISBN-10:9780689712036

Penn, A. (2009). *Chester Raccoon and the acorn full of memories*. Tanglewood.

A mother raccoon and her young son talk about a friend's death and making a memory of the deceased friend.

Picture book for ages 4-8

ISBN-10: 9781933718293

Shwiebert, P., & DeKlyen, C. (2005). *Tear soup: A recipe for healing after loss*. Grief Watch.

Deep into her grief, Grandy, the main character, makes tear soup. Metaphor of making soup parallels the process of grief.

Picture book for ages 8 and older, also appropriate for adults.

ISBN-10: 9780961519766

Varley, S. (1992). *Badgers's parting gifts*. Mulberry Books.

An older friend (Badger) dies. Animal characters express sadness but also remember Badger's wisdom, kindness, and his 'gifts' he shared with others.

Picture book for ages 4-10

ISBN-10: 9780688115180

Buscaglia, L (1982). *The fall of Freddy the leaf.: A story of life for all ages*. Slack.

Seasons of nature compared to seasons of life. Freddie(a leaf) goes through all seasons and eventually falls to the ground with his friends, symbolizing death.

Picture book for ages 4 and older

ISBN-10:0943432898

Group Manual

Jaycox, L.H., Langley, A. K., & Dean, K.L. (2009). Support for students exposed to trauma.

The SSET program: Group leader training manual, lesson plans, and lesson materials and worksheets. RAND Corporation.

http://www.rand.org/content/dam/rand/bubs/technical_reports/2009/RAND_TR675.pdf

For children ages 10-14

Two-hundred-page program manual (ten one-hour lessons) adapted from CBITS (Cognitive-behavioral intervention for Trauma in Schools)—Troup leaders can be teachers, staff, or parent volunteers. Program has been effective with children from a variety of backgrounds, including low SES and ELL.

Websites

<https://www.allinahealth.org/health-conditions-and-treatments/grief-resources/suggested-books/books-for-grieving-children>

<https://kidsgrief.ca/>

dying and death [KidsGrief.ca](https://kidsgrief.ca/) is a free online resource that helps parents support their children when someone in their life is dying or has died. It equips parents with the words and confidence needed to help children grieve life's losses in healthy ways.

<https://www.siblingsurvivors.com/>

The Sibling Survivors of Suicide Loss site aims to provide a safe place for anyone who has lost a sister or brother to suicide. It's a place to share memories, discuss your feelings and

experiences, and to share photos. It's a place to connect with others who also miss their sister or brother.

<https://www.dougy.org/>

The Dougy Center provides support in a safe place where children, teens, young adults, and their families grieving a death can share their experiences.

<https://whatsyourgrief.com/childrens-books-about-death/>

https://www2.gov.bc.ca/assets/gov/birth-adoption-death-marriage-and-divorce/deaths/coroners-service/news/2018/bccsu_grief_handbook.pdf

Gone too soon, handbook on grief attached to substance abuse.

<https://www.bccsu.ca/wp-content/uploads/2019/07/Gone-Too-Soon-Canada-English.pdf>