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Development and Implementation of a Parent's Grief Support Group Concurrent with a Preexisting Children's Grief Support Group

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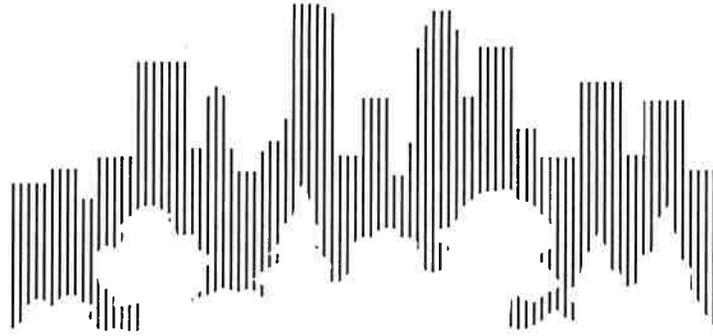Follow this and additional works at: https://idun.augsburg.edu/etd

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MASTERS IN SOCIAL WORK THESIS

Evelyn J. Swenson

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1998

Development and Implementation of a Parent's Grief Support Group
Concurrent with a Preexisting Children's Grief Support Group

M.S.W. Thesis

By

Evelyn J. Swenson

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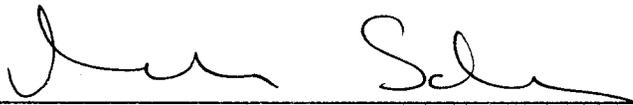
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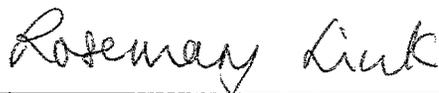
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ABSTRACT

Development and Implementation of a Parent's Grief Support Group

Concurrent with a Preexisting Children's Grief Support Group

Parent's Grief Support Group

Evelyn J. Swenson
May, 1998

Children who grieve need the support and understanding of their parent(s) in order to experience a grief reaction void of negative long-term effects. Parents experiencing grief are often exhausted from their own grief response having little energy to obtain support and information to provide a supportive atmosphere for their children. This study evaluates the efficacy of a parent grief support group in conjunction with a children grief group for ages 6-12 in response to the belief that the parent-child relationship undergoes extreme stress when a death is experienced in the family. A six-session psycho-educational parent grief support group was developed and implemented with five parent participants. The study evaluated three main group components, group processing, focus on children's grief, and educational materials. Field notes included observations of group atmosphere, interaction, participation, and overall group analysis. The findings support the efficacy of a parent grief support group in conjunction with a children grief support group with the inclusion of the three main components in the curriculum. The study identifies recommendations for modifications of future parent's grief group curriculum concurrent with children's grief group. Recommendations such as, developing creative screening processes, extending length and number of groups sessions, timing of parent–child activities within the group sessions, and co-facilitation of grief group were identified in the study.

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CHAPTER 1

<u>Introduction</u>

Although death is an expected part of living, it comes with distress and sadness for those who must let go of a relationship which they have grown to know and/or depend on. A death in the family is an overwhelming stressor on every aspect of that family's life. Equilibrium is disturbed, changing the structure forever. "Approximately 1.5 million children in the United States live in single-parent families because the other parent is dead" (Silverman & Worden, 1992 p.93). Children look to their parent(s) as role models for support in a time of crisis. The parent(s) overwhelmed and exhausted with their own grief, have little energy to meet the extra demands of their children. The increased stress and strained emotions resulting from a death in the family makes the parent-child relationship very vulnerable; therefore, it is essential that parents be supported in their own grief to enable them to meet the special support needs of their child. "Grief is a family issue; yet the grief process is viewed as an individual experience..." (Glazer & Clark, 1997 p.33).

Whether it is the death of a child/sibling or a spouse/parent, the relationship of the surviving parent(s) and child is changed forever (Glazer & Clark, 1997). When a sibling dies, the surviving children not only lose the sibling but also their parents by virtue of emotional abandonment (Soricelli & Utech, 1985). This same phenomenon is present when a parent dies, with the child losing both parents, one to death and one to emotional exhaustion. "Bereaved children have a strong need to know that their world will be

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maintained and that their needs will be taken care of by a supporting adult. Unfortunately, their usual family support may have crumbled as each member mourns the death" (BFO Home Page, 1995 p.1). Social workers often have a significant role in the support system of parents and/or children experiencing a death in their family. The following research is intended to have a positive influence on the role of social workers as they attempt to offer support alternatives for grieving parents during their grief work.

Implementation of a parent's grief support group in conjunction with a children's grief group attempts to reach out to the family as a single unit. Intervention is too often individualized neglecting the family as a unit of focus. Organizations offering children's grief groups often fail to meet the additional support needs of the parents as they pertain to parenting a grieving child. It is proposed that social workers implementing grief support groups for children will obtain enhanced results when implementing a complimentary grief support group for the parents.

Implementation of a grief support group for parents in conjunction with a grief group for children was initiated to answer the following (research) question, "Does the curriculum of the proposed grief support group for parents provide helpful information for the grieving parents?"

This study evaluates the efficacy of a parent grief support group in conjunction with a children grief group for ages 6-12 in response to the belief that the parent-child relationship undergoes extreme stress when a death is experienced in the family. A six-session psycho-educational parent grief support group was developed and implemented with five parent participants whose children, ages 6-12, attended a children's grief group.

Quantitative data was collected using pre-group/post-group questionnaires, evaluating three main group components, group processing, focus on children's grief, and educational materials. Qualitative data was collected from field notes including observations of group atmosphere, interaction, participation, and overall group analysis. The study identifies recommendations for modifications of future parent's grief group curriculum concurrent with children's grief group and implications for social work practice. The following chapter examines the research and literature that reviews grief as it relates to adults, children, parents, and families.

CHAPTER 2

<u>Review of Literature</u>

<u>History of Grief Study</u>

Grief is the normal and natural reaction to loss. Elizabeth Kubler-Ross, in her book entitled <u>On Death and Dying</u>, outlined the five stages experienced by a dying person. These stages include a) denial, b) anger, c) bargaining, d) depression, and e) acceptance. Although these same stages have been assigned to a person surviving the death of a loved one, the stages may not accurately identify the grief journey of the surviving partner. It is important to understand that in the process of grieving there are no absolutes, no definite stages, and no time zones. Rather than defining *stages* of grief, which potentially sets up unrealistic expectations for those who grieve, support needs to be offered to each grieving person according to *their beliefs*, past and present *experiences* and *abilities*. This allows people to find their own individual expression of the thoughts and feelings that may be preventing them from finding closure in their grief experience (The Grief Recovery Institute, 1996).

Many theorists and researchers have contributed to defining the stages of the grief process. Bowlby's (1960) research is based on the attachment, loss and separation model. He defines three *phases*: a) initial mourning involving separation anxiety, b) disorganization accompanied by pain and despair, and c) reorganization or connecting to new objects. Lindemann focuses on a *sequence* of grieving which include, a) somatic distress, b) preoccupation, c) guilt, d) hostility, and e) loss of normal patterns (cited in Parry, 1994). Worden (1991), identifies five *tasks* of mourning: a) acceptance of the reality of the loss, b) experiencing the pain, c) adjustment to the new environment, d) withdrawal of emotional energy from the past relationship, and e) reinvestment in other areas (Price, Dinas, Dunn, and Winterford, 1995). Whereas Bowlby identifies emotional

phases to be completed, Lindemann focuses an emotional sequence experienced. Worden, in turn, presents a combination of both the emotional tasks and the emotional changes. Although the review of grief theories identifies no single path in which people grieve, it appears important for people to face the reality of the death and obtain some sense of closure prior to redirecting their energy in a positive manner, and reestablishing emotional stability. "There are many variables that contribute to the form and length of grief, as well as the feelings of those who grieve" (Parry, 1994 p.99). It is important that grieving persons be supported in their experience of feelings as they move through their own unique grief process.

Adult Grief

Adults often grieve for themselves and their own sense of loss as well as grieving for the person who has died. Grollman (1974) states that "…grief is a strange mixture of joy and sorrow - joy to be yet alive and sorrow to have life diminished by the loss of one we love" (p.3). Although loving is an important part of life, it makes us vulnerable to the pain of separation resulting from the inevitable death of loved ones. "Grief is relieved by time, by understanding, and by the ongoing creative impulses of life itself" (Grollman, p. 10).

Although grief reactions experienced by adults are individualized as they attempt to find meaning in their grief experience, physical and/or emotional symptoms persisting for an extended period of time have been identified as abnormal grieving (Grollman, 1974). Adults require a varying amount of time and energy to deal with the reality of the loss, after which they begin to develop a sense of independence and begin moving onward. However Videka-Sherman (1987) suggest that, "The passage of time alone does not clearly map recovery for bereaved parents" (p.105). The gift of memories may also allow adults to move into a new phase of a life that has been changed forever.

"Knowing that grief is a process rather than an event tends to elicit greater levels of intrapsychic patience with grieving (Duck 1982)" (cited in Price et. al. 1995, p.160). Duck suggests that laying a relationship to rest include, affective, behavioral, and cognitive components, resulting in a complex process (Price et. al.). Professional help may be beneficial for adults who have become arrested in this complex process with little energy or motivation to make the transition from the past to the present.

<u>Childhood Grief</u>

"Children experience the same range of feelings that adults do. However, the feelings and thoughts they do not understand can cause fear and confusion" (Simatos, 1996 p.32). Respect, understanding and support from caring adults allows children a safe, secure atmosphere to experience their grief. A positive grief experience for children teaches them valuable skills for future painful experiences in their life (Simatos). It is vital that children are involved in the funeral rituals after a death in order to begin their grief work (Shortle, et. al., 1993). Isolation from the death and dying process causes confusion and fear in a situation that they have little understanding of or control over. As grieving is an unfamiliar process for children, they need direction and permission to grieve.

Children more often express their grief through behavior than through conversation. Parents often respond in negative ways to the behaviors exhibited by their children because they seldom have access to information about the effects of grief in children. It is important for parents to have knowledge of potential grief reactions in children in order to adequately support their own children. Siegel et al. (1990) indicates that the parent plays a significant role in a child's ability to constructively work through his/her grief after a death. The quality of parenting that is provided by the surviving

parent(s) is one of the most consistently identified factors influencing children's adaptation to a loss (Siegel et. al).

Although, there have been many books published for parents on age appropriate children's grief, the parents often lack the energy to obtain and read the books at such an exhausting time in their life. Support groups offer an opportunity for parents to increase their understanding of their children's needs as well as provide a safe environment in which to express their own grief (Rando, 1985).

<u>Developmental Stages and Grief</u>

"Long after an adult has accepted and adjusted to a tragedy, and has learned to live with the demands of everyday life again, a child will continue to experience aspects of grief as they grow, mature and find themselves facing new situations and levels of realization" (Simatos, 1996 p.36). Simatos suggests that developmental stages play a role in the grief process related to the child's level of understanding and ability to communicate questions about the death. Preschool children, for example, have different support needs in a time of loss than an adolescent.

A study completed by Parness (1975) focuses on the needs of preschool children in relation to a death. Preschool children are incapable of relating to death as permanent, and emotions are expressed through behavior. There is a need for closeness due to separation issues with preschool age children. Parents willing to explore the child's feelings and engage in play are best able to access grief issues in young children (Parness). Shortle, Young & Williams (1993) state, "Children readily perceive from their parents that something very serious has happened and then their fear becomes abandonment by their parents" (p. 738). The preceding statement illustrates the need for young children to have reassurance and attention at times of family crisis.

Elementary age children understand more about the finality of death and are affected more intensely. "Children believe they are the cause of what happens around them" (AACAP, 1997 p.2). The elementary age child may feel guilt and/or depression at the time of a death. It is important for parents to watch for warning signals in their children such as (a) disturbed sleep patterns, (b) loss of appetite, (c) fear of being alone, (d) regression, (e) withdrawal, and (e) drop in school performance (AACAP). Children often experience a sense of responsibility to care for their parents, which is unintentionally reinforced by other adults (Swardson, 1996). This can be compounded by their vague sense of responsibility for the death itself.

"Adolescence is perhaps one of the most difficult and confusing stages of life. It is a time of change and with every change, comes a grieving process" (Cunningham, 1996, p. 1). A death experience adds to the already confusing state of the adolescent. "Sibling bereavement during adolescence occurs within the context of the grieving family" (Hogan & Balk, 1990 p.103). The family transactions portray a message about self-worth and the degree to which support will be available to the grieving adolescent (Hogan & Balk). A common coping mechanism of an adolescent is to avoid thinking about the dead child in order to eliminate the overwhelmingly intrusive thoughts. Although, every teenager must grieve in their own time and way, the presence and genuine support of a caring adult will have an influence on that teenager for a lifetime (Cunningham, 1996).

The Piers-Harris Self-Concept Scale and Offer Self-Image Questionnaire given to adolescent children who have experienced the death of a sibling produced higher scores than norm groups (Hogan & Balk, 1990). This suggests that many children experience an increase in maturity, resiliency and psychological growth from the death of a sibling. Drawing from clinical experience Parness suggests that adult support and understanding

of children affected by a death has been frequently documented as the keys to successful grief work in children of all ages. "Several avenues are open for an adult to assist a child but none is more important than making oneself available to help them explore his feelings" (Parness, 1975 p.2).

A child is part of a larger system called the family system, which affects every aspect of life and death. It is important to consider the context in which the child is experiencing his/her grief. Many other stressors within the family system influence a child's grief work. The following literature supports that families are an intricate system wherein events occur simultaneously affecting family member's ability to cope.

<u>Dynamics of Family Grief</u>

Literature addresses the frequent lack of support within the family system when a death is experienced. Family members who would be the most likely to provide support in a crisis, are now stricken by their own emotional upheaval and often unable to provide support for each other. Grief affects every member of the family very differently. As discussed earlier in this chapter, children grieve according to their age and level of development. Men tend to express their grief differently than women, adding to the potential for an atmosphere of misunderstanding and chaos. These observations of gender differences in parental grief by Schwab (1996) corroborate that fathers and mothers experience and express their grief differently. "mothers expressed more intense grief, as measured by the GEI (Grief Experience Inventory), than did the fathers" (Schwab p.109). "The fathers appeared to deny the reality of loss and assumed a manager-like role, which included controlling emotional expressions and being preoccupied with supporting their wives" (Schwab p. 104). Men often take refuge in their work, preferring not to dwell on the death, whereas women express their grief more overtly, exhibiting symptoms of depression and/or anger. "Mothers reported higher levels

of distress than did fathers on indicators of mental health, marriage quality, and in the parental role" (Videka-Sherman, 1987 p.107).

In the book Swallowed by a Snake: The Gift of the Masculine Side of Healing, Tom Golden focuses on men's grief and healing. Men often do not express their emotion for fear of becoming vulnerable within their family system; therefore, feel safer expressing their grief and their feelings of loss in a physical or tangible way (Golden, 1997). Parents, in an attempt to protect their children from the pain and difficulties in grieving which they have experienced, withhold information about the grief event, thus hindering the child's grieving process. This protective instinct can be very harmful for a child and inhibits communication between the parent and child in the future (Rosen & Cohen, 1981).

Although it is important to present information in an age appropriate manner to enhance the grief process for children, the parent is least able to seek out the knowledge of what is appropriate at a time of intense grief (Rosen & Cohen). Parents with dependent children experience additional responsibility in the grieving process as compared to adults not involved with dependent children. It is evident in reviewing the literature that grieving, while caring for a child who is grieving, adds another dimension to parenting.

The Parent-Child Relationship during Grief

Death, without exception, changes lives forever. "One of the vulnerable subsystems of the family is the parent-child dyad" (Glazer & Clark, 1997 p.34). Although this review focuses on the death of a child, the same issues can be experienced for other relationships ended by death. Sanders (1980) found that the death of a child produces higher intensity of bereavement in the family than that of a spouse or parent (Rando, 1985). "A child's death produces intrapersonal and interpersonal changes for

each surviving family member as parents and siblings strive to cope and adapt to lives that are changed forever" (Hogan, & Balk, 1990 p.103). It has been documented that many parents struggle with helping their children cope during the first year of grief due to their own emotional needs. Children lose a sibling from death and their parents from emotional abandonment (Soricelle & Utech, 1985).

Parents not only have to endure their own grief, but they must explain the event to their children and help them make sense of the death (Schwarz, 1996). The death of a child is out of sequence and consequently creates a difficult grief pattern for both parents and siblings (Carney, 1996). Parents and siblings must grow up with a loss which renews itself at developmental events, and bench marks such as 'would have graduated' or 'would have gotten married' (Rando, 1985). Even though parents are grieving the loss of their parenting role to one child, they must continue to parent the surviving children (Rando). Applying general systems theory to loss and grieving helps us to understand the concepts and constructs under which we can help a family system cope with death.

Theoretical Framework

General systems theory offers a metaphor through which we can study and analyze families as they adapt to the loss of a family member. The definition of a system according to Hartman and Laird, (1983) "is that of a whole that is composed of interrelated and interdependent parts." (p. 62). A death in the family results in a major change in that system.

The ecological perspective also offers a framework for working with family systems during a death experience. "Ecological thinking focuses on the reciprocity of person-environment exchanges, in which each shapes and influences the other over time" (Germain & Gitterman, 1995 p.7). This perspective suggests that professionals concentrate on the consequences rather that the cause. The ecological perspective

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focuses on transaction between the person or family and the social environment. When a family experiences a death, their social environment is changed and they must begin to adapt to a new environment.

According to Germain & Gitterman, a death is considered an external stressor that produces a change in the environment, affecting everyone in the family in a different way. External stressors generate internal stress resulting in physiological or emotional consequences. Stress theory presented by Lazarus (1980) suggests that physiological and emotional stresses are the consequence of people's appraisal of a difficult life transition. "Stressful feelings aroused by the stressor are negative and usually immobilizing" (Lazarus cited in Gitterman & Gitterman, p. 11).

Grief support groups provide a positive environmental outlet where people begin to appraise the changes that occur as a result of a death. The ecological perspective hinges on the concept of adaptation. According to Germain and Gitterman, "Adaptations are active efforts to change oneself in order to meet the environment's expectation or its demands that are perceived as unalterable, or to take advantage of environmental opportunities" (p. 9).

At the time of a death in the family, the family environment is altered by the benevolence of family and friends. This environment changes again when the attention from family and friends taper off, and the process of reconstruction begins. The degree of environmental influence a family experiences in the healing process must be considered when addressing the grief reaction of the immediate family members (Hartman & Laird, 1983).

The parent's grief reaction ultimately affects the grieving child. Likewise the environment and atmosphere within which the family system functions, must be acknowledged in the complete picture of grief and loss. Siegel et al (1990) identifies that

a surviving parent's ability to parent his/her children has a major affect on the child's adjustment to the loss. "If children's needs at this critical time should go unmet, there is a risk that their mourning will be inhibited" (p.575). In some cases the extended family and/or friends take over the parenting role in order to offer continuity for the children.

The development and implementation of a parent grief group based on the systems theory can benefit the family system and promote effective coping for the parents and children. General Systems Theory and the Ecological Perspective are useful when working with parents and children who are grieving. The environment and atmosphere the family system is a part of, as well as the parent's grief reaction, have a significant positive and/or negative influence on the grieving child.

Group Theory as presented by Yalom (1975) from his work with groups is applicable to this study. Yalom suggests that there are "curative factors" which can clarify the complexity of the group therapy. The "curative factors" include; instillation of hope, universality, information, altruism, socializing techniques, interpersonal learning, and group cohesiveness. Installation of hope is crucial for people facing a change in their lives. Groups containing individuals along the "coping-collapse continuum" (p. 6) offer hope to one another by virtue of their resilience. Universality is present in a group experience when members disclose concerns similar to one another.

Yalom suggests that "didactic instruction has been employed in a variety of fashions in group therapy" (p.11). This technique can be used to transfer information, structure the group or explain a particular process. Altruism is evident in the group process as participants receive value of self through giving. Group members offer support, reassurance, suggestions, insight, and share similar concerns with one another. Socializing techniques refers to the skills learned by the members of the group. Skills such as helpfully responding to others, expressing empathy and conflict resolution can

serve participants well in the future. Groups offer an opportunity for the individual to develop a concept of him/herself as a result of the interaction with another. Cohesiveness exhibited by acceptance and approval of group members is a determining factor of the development of the individual (Yalom, 1975). The above "curative factors" offer a basis for development and implementation of a support group for grieving parents.

Corey & Corey (1982) provide a model from which group process can be understood and operationalized. Corey & Corey have defined five stages of the group process, all of which present unique challenges when working with groups of people. The stages include; a) pre-group issues involving screening, selection of members, ground rules, and planning for group leadership; b) initial stage presents challenges of group cohesion, norms, resistance, trust, and structure; c) transition stage involves anxiety, conflict, problem behaviors, dependency, and struggle for control; d) working stage presents challenges with self-disclosure, confrontation, and personal relationships within the group; e) final stage involves termination, separation, unfinished business, and changes. Corey & Corey's work offers insight and understanding to the group process experienced by the facilitators and participants of the parent's grief support group presented in this study.

Benefits of a Grief Support Group for Parents

Encouraging groups for both parents and children alike addresses the many diverse needs within a family system. Children benefit from the attention they receive in a support group as well as the opportunity to discuss their feelings in a safe environment thus facilitating conversation in the home. Parents, in their grief support group, are afforded the opportunity of sharing their grief experience with other parents going through similar experiences. Group sessions can offer parents the knowledge and strength to recognize their own needs as well as the needs of their child(ren) (Soricelli &

Utech, 1985). Although there are no prescribed paths of grieving, there are healthy and unhealthy ways of coping. Established coping styles affect the functioning of a family system during a time of distress and change.

Support groups, when made available to both children and parents, allow for a safe environment to express personal grief and learn about the needs of others as they grieve. "Intervention and support may include providing the parent with techniques to aid the family in healing, helping the family to address the loss, and coping with the resultant changes in their outlook and family life (Barth 1989)" (cited in Glazer & Clark, 1997 p. 34).

Gass-Sternas (1995) suggests that intervention efforts should focus on strengthening adaptive coping strategies, childcare issues, role changes, and providing support for children. The impact of a death on a family system makes it essential that the parent, to some degree, maintain a stable environment for the family (Glazer & Clark, 1997). The purpose of implementing a grief support group for grieving parents with children ages 6-12 years is to support the parents in their effort to maintain stability and gain an understanding of their child's grief work.

Grief affects all people at varying stages in their lives. In order to cope with the intense emotional burden of grief, direction and support are necessary to work through the grief journey. Children and adults within a family system grieve differently and require individual support based on their ability to process the changes that occur. Parent-child relationships may become strained due to the emotional and physical exhaustion that accompanies death in the family. In the family, identified as a system in which the whole is a sum of its parts, each family member is affected by the other's ability to cope with change. Support groups have proven beneficial to those who grieve

and can offer support and education to parents whose children are also grieving. A grief experience can be a growth experience if we seek the tools to promote a positive outlook.

In summary, the literature suggests that the death of a family member causes stress within the family system. Grief affects each individual person in a unique way creating stress in the family relationships. The coping patterns of the parents during a grief experience positively or negatively influences the child's ability to process and grow from the death experience. The literature offers an extensive study of grief as it relates to each member within the family and the interdependence of each individual's grief response. However, there is little mention of the impact of concurrent work with family members. The ecological perspective, general systems theory and group theory provides a basis for the development and implementation of the grief support group for parents. The following chapter defines the methodology of the research and a description of the program curriculum.

CHAPTER 3

<u>Methodology</u>

This exploratory program evaluation consists of the implementation of a grief support group for parents utilizing formative evaluation strategies with questionnaires and observer field notes. Data collected from group participants will be utilized to improve subsequent group curriculums. This chapter outlines the a) sample, b) instrumentation, c) data collection procedures, d) data analysis, e) research strengths and limitations, and f) implications for practice.

<u>Sample</u>

The unit of analysis in this study is a group. The study population consists of seven parents with children between the ages of 6-12 years, who have experienced a death in the family. Five of the participants had experienced the death of a spouse and two were a couple who had experienced the death of a child. The parents vary in age (range = 18-55 years), socio-economic status and class. Parents were recruited when they called Mercy Hospital to inquire about available grief groups.

Signed consent forms (see Appendix F) were required of all participants in order to participate in the group experience and the research. Although parents were given the option to participate in the group without participating in the research, everyone chose to participate in both.

The Grief Support Group for Parents was integrated in the Mercy Hospital Grief Support Program, located in Coon Rapids, Minnesota. The six week grief group was offered on Monday evenings from 7-8:30 PM for six consecutive weeks. This group was

offered concurrent with the children's grief group for ages 6-12. Mercy Hospital currently offers three grief groups for children including, preschool, ages 6-12, and teens, as well as adult groups which focus on type of death experienced (i.e. child death, spouse death, etc.)

Instrumentation

Two types of data were collected during this study. The first, quantitative, involved the group participants completion of a questionnaire evaluating the helpfulness of the group content. The second, qualitative, involved field notes that were developed from group observations completed by the group facilitators.

The questionnaire was derived from the curriculum. The participants were asked to rate the helpfulness of various aspects of each group. The questions were later grouped into three themes: 1) group processing, 2) focus on children's grief, and 3) educational materials. Two questionnaires were filled out during session 2 through 6, a pre-group questionnaire and a post-group questionnaire. Questions were constructed using lay language, to assist participants understanding. The variable, helpfulness of group content, was measured on a Likert scale involving a five-point scale, one being very harmful and five being very helpful. Participants were required to rank the helpfulness of the group content in relation to their own perception and needs.

The quantitative data portrayed subjective analysis of the group content helpfulness based on the needs and perceptions of the participants. The evaluation questions were based on the objectives of each group session. A comment section was

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offered for specific feedback on any portion of the group experience. For purposes of data analysis, I assumed the response items to be at an ordinal level of measurement.

Field notes were recorded from direct group observations made by the researcher/facilitator and the co-facilitator. The observations of the group were obtrusive in nature, due to the participant's awareness of the observers. The trustworthiness of the observation data was increased because of multiple observers. A pre-determined group recording form (see Appendix D) was completed after each group session. I derived patterns and themes from this data using content analysis.

Procedures

The data collection process involved three different types of data collection. Quantitative data was gathered from the evaluation forms completed by participants. Qualitative data was obtained from the field notes created from the group observations, and the compilation of comments offered by the participants on the evaluation forms.

Evaluation form A (see Appendix B) was given to parents at the beginning of each group in order to obtain data on the helpfulness of the previous group content, focusing on the helpfulness of information during the past week. Evaluation form B (see Appendix C) was given at the end of each group session to obtain data on the helpfulness of the immediate group content presented. An invitation to comment on any of the questions was offered to clarify responses in addition to the scale response. The Researcher and the Co-Facilitator documented group observations on a Group Recording Form (see Appendix D) immediately following each group session. The data received

from the group observations, field notes, and evaluations was used to revise and improve the curriculum.

The evaluation forms required no demographically identifying information from participants, thus maintaining anonymity of parents. Observations of group sessions focused on capturing the group atmosphere, group interaction, group participation, and facilitators' analysis of the helpfulness of the group while avoiding any identification of individuals. The evaluation forms were developed based on the outline and objectives of each group session (See Appendix E). The researcher/facilitator and co-facilitator administered the instrument. The participants were given ten minutes at the beginning and end of each group to complete the 3-6 question evaluation forms.

Data were obtained from consenting adults participating in the parent's grief support group at Mercy Hospital. The questionnaires and field notes were intended to capture the helpfulness of group content to participants. Two group sessions involved joint activities with the parent's children ages 6-12, who were participating in a children's grief group not included in this research. The data reflected the children's participation through mention of their involvement as a component of the parent's group format.

Data Analysis

Descriptive data analysis was used to organize the data obtained from the evaluation forms. A figure was used to demonstrate the overall helpfulness of the curriculum. The measurements, range and mean were calculated to present the raw data of the following three aspects of the group content. The three areas of evaluation were summarized by group process, focus on children's grief and educational materials. This

evaluation directly related to the group session objectives indicating the helpfulness of the group process, focus on children's grief and educational materials offered to the parents. The voluntary comments written on the evaluation forms were utilized to clarify the quantitative data obtained. The field notes were condensed into common aspects of small group dynamics including, 1) group atmosphere, 2) group participation, 3) group interactions and 4) facilitators' analysis of the helpfulness of the group. These themes will be recorded in the results of the study.

The participants of the group were informed of the following potential risks involved in the research; a) past issues surface due to the emotional expression of recent loss. b) Persons with depression or mental illness may experience worsening of condition. c) Participating in a group with a person of whom you are not fond. Participants were informed in the consent procedure that measures had been taken to support the participant should they experience distress during the weeks of group (see Appendix F).

Program Description

Program Objectives

The grief literature supports the causal link between healthy parent's healthy grieving and healthy grieving by the child. In response to the evidence that successful adjustment of the surviving parent(s) is a key to the healthy grieving of the child, a parent's group was developed to run concurrently with a previously established child's grief group. The purpose of the parent's grief support group was to provide education and support for parents of children who have experienced a death in their family, and define the benefits of developing concurrent support groups.

The author of this report developed the curriculum. Materials were gathered, evaluated and adapted from several different sources. The handouts were obtained from an existing Parent Grief Program, Hospice of Grossmont Hospital, La Mesa, CA. Permission was obtained from Kay Askew-Cogwell, LCSW Social Service Coordinator to utilize their curriculum and handouts in developing this program. Other information and materials were secured by the author from resources obtained in the past 9 years while working (as a Social Worker) in the field of Hospice with parents and children during their grief experiences.

The purpose of the parents grief support group is to provide support for the expression of the parent's personal grief, increase the parent's knowledge of the grief as it is experienced by a child, and improve the parent-child communication during a grief experience. (See Figure 3.1)

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┌─────────────────────────────────────────────────────────────────────────┐
│            OBJECTIVES FOR THE GRIEF SUPPORT GROUP FOR PARENTS              │
│                                                                           │
│  1.  Provide a safe environment for parents to express their feelings     │
│  over the death of their loved one.                                       │
│                                                                           │
│  2.  Provide a place for parents to share their grief experience with     │
│  others who have had similar experiences.                                 │
│                                                                           │
│  3.  Encourage healthy ways of expressing grief.                          │
│                                                                           │
│  4.  Provide factual information about grief, as it applies to adults as   │
│  well as children and families.                                           │
│                                                                           │
│  5.  Enable parents to talk about the future and some needed/helpful      │
│  changes.                                                                  │
│                                                                           │
│  6.  Assist parents in understanding and coping with changes in children  │
│  and family since the death of their loved one.                           │
│                                                                           │
│  7.  Encourage parents to share and communicate with other family         │
│  members, what the loss has meant to them.                                │
└─────────────────────────────────────────────────────────────────────────┘
```

Figure 3.1

Program Setting

Mercy Hospital is located in a northern suburb of Minneapolis/St. Paul,

Minnesota. The hospital is a member of the Allina Medical Group serving the

Metropolitan area. Mercy Hospital offers a variety of grief groups to the community at

no cost to the participants. They have been offering children's grief groups for 20 years

and have attempted to provide a concurrent parent grief group component with limited

success.

Program Staffing

This researcher facilitated the program with a co-facilitator assigned from the

existing grief group program. The co-facilitator was a volunteer who has been

facilitating grief groups for three years. She has facilitated the children's grief group numerous times contributing to an enhanced knowledge of children's grief which was beneficial for the parents. Her personal experience with death as a young parent enhanced her understanding of parent's experiences and issues shared in the group.

Program Development

The following pages will describe the development and format of the parents grief support group offered at Mercy Hospital in Coon Rapids, Minnesota. As the parents' group was developed to coincide with the themes of the children's group, a brief description of the children's grief group for ages 6-12 will be included.

The children's group followed the progress of the child's work through the grief journey. In order to encourage the children to begin to understand and accept the reality of the death, each group began with the children identifying the person who had died and the details of the death. They participated in an activity requiring them to pick out and describe a symbol that best described their feelings inside and outside of their body. The symbols options included the sun, a cloud, a volcano, thunder, and rain or lightning. Artwork was included in each session to assist the children with expression of their feelings and impression of their experience on to paper in order to see them and discuss them with other children. A story about death was read and talked about with the children each session to facilitate questions that the children would not otherwise have asked. The homework assignments were used to initiate activities drawing from each child's experience. Joint activities provided by the concurrent parent's support group

allowed the parents to witness their child's level of understanding of the death and the

child's ability to work through their own grief. (See Figure 3.2)

Children's Grief Support Group Curriculum

Week 1 Change	Week 2 Death	Week 3 Ritual	Week 4 Feelings	Week 5 Memories	Week 6 Support
*Introduction *Story Telling- Who Died *Story- "Lifetime, The Beautiful Way to Explain Death To Children" *Artwork - (p.12) *Snack **Homework- Bring a Baby Picture	*Check in *Video-"Death of A Friend" *Artwork - (p.5 &17) *Discussion of death *Snack **Homework- Bring obituary, Etc.	*Check in *Story- "Tell me Papa" *Read and share Obituaries, Etc. *Artwork – Funeral(p.7) *Snack **Homework- Bring magazine pictures of Mad, Happy, Sad, Worried, & Afraid	*Check in *Mural- homework *discussion- feelings *Artwork- feelings(p.9,16) *Snack **Homework- bring memorabilia from person who died	*Check in *Story-"I'll never play with Jason again" *Show and Tell *Joint activity with parents *Snack **Homework- Bring photo for memory book	*Check in *Artwork (p-21-22) *Discussion- Who Loves and Cares for me. *Memory books with parents. *Stars and Affirmation *Food and socializing with parents

Figure 3.2

The parents support group was developed to include themes and information that

was parallel with the children's group in order to provide common knowledge for the

parents and children to discuss during the ride home or throughout the following week.

The children's curriculum was shared with the parents to give them an understanding of

their children's awareness and work in the group. Videos were shared with both groups

to provide common topics for parent-child discussions during the week. Each week the

parents were shown the workbook pages that the children would be completing and the

purpose of the artwork.

During week five and six the parent's group and the children's group were brought together to facilitate joint grief work as a family unit. Activities were developed to enhance the communication between the parents and their children regarding the experience of the death of their loved one, a topic that they may not have been able to discuss together before coming to the group. Figure 3.3 is an overview of the curriculum that was developed for the grief support group for parents. Changes made during the group sessions in response to the specific needs of the group will be discussed in Chapter five.

Grief Support Group for Parents Outline and Objectives

Group 1 Changes	Group 2 Death	Group 3 Rituals	Group 4 Feelings	Group 5 Memories	Group 6 Support
*Intro of group process, rules *Intro of facilitators and parents *Video-"Duge House" **Homework- List strengths drawn from in the past	*Check in *Video-"What do I tell my Children" *Grief response in children *Parent responsibilities *Differences in child and adult grief *Permission to grieve *Share strengths **Homework- bring pictures of loved one	*Check in *Share Pictures *Rituals *Parental tasks that are most difficult *Signs of abnormal grief in children *["Death of a Friend"]	*Check in *Define feelings *Discussion - how we express feelings *Relationships with children	*Check in *Discuss memories *Discuss joint activity with children *Join Children to make collage of memories *[Discuss impact activity with children]	*Check in *Discussion of joint activity *[Closing activity] *Share appreciation for one another *Identify support *Joint activity with children

(Brackets, ([]), enclose the items that were planned but not carried out in the group.)
Figure 3.3

The following narrative is a brief synopsis of each group session as planned for the participants who attend the six-week group:

Group One: For purposes of this thesis the first twenty minutes was focused on completing the Consent Forms necessary to participate in the group and the research component of the group. An explanation of the consent process and an invitation to ask any questions regarding the group and/or research was provided. The group members were asked to sign two copies of each consent form, one of which was retained by the participants. The researcher signed all of the copies and retained one copy of each form for her records.

The first session began with introductions of the facilitators: including name, interest in the group, and understanding of grief. Before the parents were invited to introduce themselves, group rules were explained and agreed upon by the participants. The rules include: a) respecting each other regarding their grief experience, time to share, and personal space; b) confidentiality of any information shared in the group; and c) the plan for completion of the evaluation forms before and after the group session.

The parents then were invited to introduce themselves including their name, any personal information they wish to share, and their story of the loved one who had died. This activity was lengthy involving a large portion of the first group session. The *Duge House a 20/20 television program* was shown to the parents to help them identify the importance of their children's involvement in the children's group. This video was also shown to the children. A discussion regarding the value of children and parents each attending support groups was facilitated after the viewing. The facilitators planned to ask

the parents to identify any issues with parenting that have been difficult since the death in order to obtain ideas for future groups but this was not completed related to time limitations. The parents were given handouts including information about adult grief and children's grief at the beginning of the first group session which would be referred to throughout the six sessions and could be used for future reference.

Group Two: The parents were invited to share any thoughts or issues that had arisen during the previous week resulting from the parent's group and/or the children's group. The parents were encouraged to share their own grief issues. The video: *"What do I Tell My Children"* (45 minutes) was followed by a discussion about children's grief as it related to the families represented in the group. Normal and abnormal grief experienced by children was briefly discussed with reference to the handouts. The homework assignment regarding strengths that the parents drew from in order to cope with past losses and stressful situations was shared.

Group Three: As a check in activity, the pictures which the parents brought to share were passed around and discussion was facilitated about each loved one who had died. Family rituals were shared and discussed among the group participants. The changes in the family rituals resulting from the death lead to a discussion about other changes that the families were experiencing since the death. Facilitators continually related discussions back to the effect of the family's grief experience on the parent-child relationship and ways in which to maintain a healthy, open relationship with their children. A discussion regarding children's grief was facilitated including signs and symptoms of childhood grief requiring intervention.

Group Four: Parents discussed in detail, their feelings, the expression of their feelings, and how these expressions affected their child(ren). The messages that children receive from and send to their parents were discussed to create awareness and understanding in the parents as they grieve with their children. The time originally set aside to view the video, *"Working Through Your Grief"*, was utilized instead for discussions between parents about their individual experiences.

Group Five: The joint activity involving both the parents and the children was explained to the parents after they checked in. The parents and children were asked to make a collage of pictures and /or drawings representing memories of the loved one who had died. They were given a large piece of tag board, a pair of scissors each, and double stick tape. Magazines, crayons, markers and other drawing materials were available for everyone to use. The group was given 30 minutes to complete their collage. After completion, the children were asked to share their collage with the group by introducing the loved one who had died and talking about the memories represented by the pictures. The parents were asked to talk about one or two memories that were most vivid to them. As the joint activity was completed in the last 45 minutes of the group session, no time was available to reconvene in separate groups to discuss this activity.

Group Six: The facilitators encouraged the parents to share any situations resulting from the joint activity of the previous week's group session. The participants were invited to share a word of appreciation with any other group member regarding help they received or participation they gained strength from. The participants were asked to discuss briefly the support system that would be available to them in the future.

The parent's group joined the children's group to participate in a closing activity involving affirmations for the children.

In summary, the focus of the parents grief support group was to support the parents with their own grief issues while offering information and support as they help their children grieve. The six week group offered an opportunity for the parents to support one another with their own grief issues, discuss issues involving their children, and learn about childhood grief. This psycho-educational group format allowed the parents an opportunity to share their grief and obtain information about their child's grief, enabling them to provide a supportive environment for their child's grief experience.

CHAPTER 4

Introduction

This chapter presents the results from the program implementation of the grief support group for parents. The psycho-educational grief group program was provided to parents, whose children ages 6-12 were attending a children's grief group. The goal of the program was to provide a safe environment for the parents to express feelings and work on their own grief issues, while learning about their child's grief reaction.

In a small formal six-session group, parents were encouraged to share their grief experience while obtaining support from one another and the facilitators. Throughout the group sessions educational materials were shared with the parents, regarding their child's reactions to the death experience. This material informed the parents of the children's response to grief and how to respond to their children's grief reactions.

The purpose of this study is to evaluate the curriculum of the parent's grief group for future revision and improvement. Two types of evaluation, group participant questionnaires, and group facilitator observations, were utilized to obtain data.

Research Question

The research question, "Does the curriculum of the proposed grief support group for parents provide helpful information for the grieving parents?" is addressed in the results included in this chapter.

Participants

The grief group was targeted at parents whose children were attending the children's grief group. The parents were required to participate in the parent grief support group. There was a total of 7 parents who signed up, 2 of which dropped out

after the first session due to their death experience being different from the others in the group. The remaining participants were parents who had experienced the death of a spouse. These 5 parents participated in 100% of the group sessions.

Data

The information examined in this research involved two types of data; quantitative data measuring the parents perception of the helpfulness of three aspects of the programs, and field notes or qualitative data documenting group observations made by the facilitators. The quantitative data was gathered from pre and post session evaluation questionnaires. (See Appendix B & C) I developed evaluation questions related to three main components in the group format: group processing, focus of children's grief, and educational materials. Data for group five was limited due to participation in the parent-child activity. Field notes from the sessions were compiled into four categories including, a) group atmosphere, b) group member's interactions, c) group member's participation, and d) facilitator's overall analysis of each group.

Objectives and Results

Group Processing

Processing a grief experience is an important part of working through the grief journey; therefore, the group evaluations included numerous questions regarding the helpfulness of group processing for the participants involved in the group. Group process questions included, "How helpful was sharing your grief experience with other parents?" "How helpful was the discussion about parental responsibilities in understanding the impact of your own parental role?" and "How helpful was it to share mementos of your loved one, in understanding the impact of the loss?" The evaluation results identify the

overall helpfulness of group processing as somewhat helpful (mean = 3.56, range = 3.2-
3.9). The mean helpfulness of the group processing during the first group session was the
highest score of any group session (mean = 3.9). The mean scores of groups four and
five were slightly lower (mean = 3.2, and mean = 3.5). The first two group sessions
allowed for more group-processing time. A change in focus onto the children and
educational materials resulted in the decrease of helpfulness of group processing during
groups four and five (See Figure 4.1).
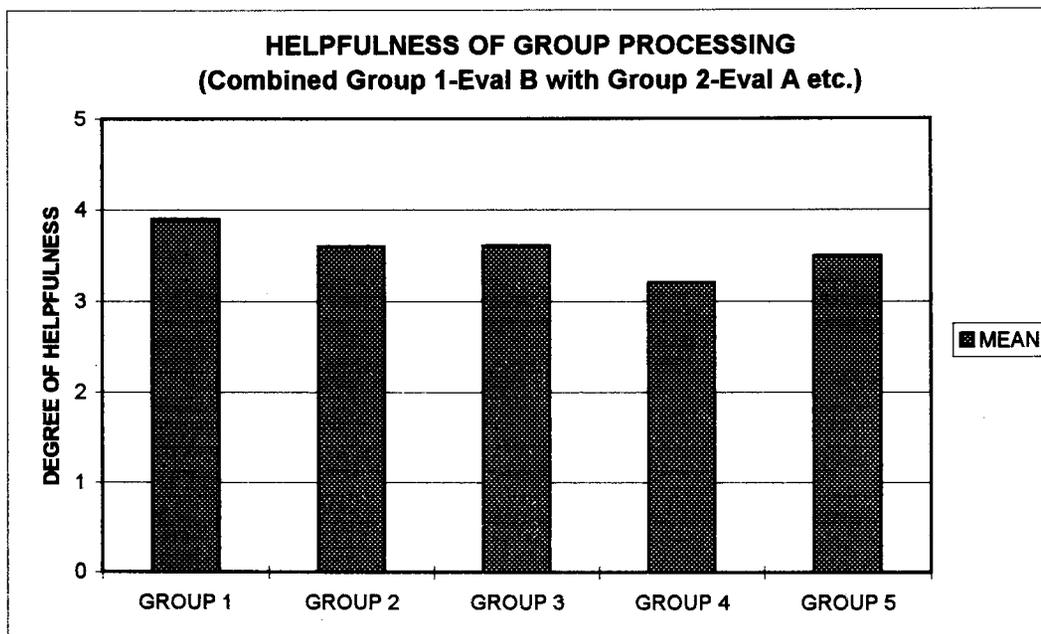
Figure 4.1

Focus on Children's Grief

The group evaluation tool consisted of questions regarding the helpfulness of
focusing on children's grief throughout the six group sessions. Question content focusing
on children's grief included, activity with the children, signs and symptoms of children's
grief, and discussion of childhood grief reactions. Group session one did not allow time
for focusing on children's grief; therefore, it was omitted from the data. The overall

helpfulness of focusing on children's grief was evaluated as somewhat helpful (mean = 3.43, and range = 3.0 - 3.75). Group session two yielded the highest score (mean = 3.75), indicating that both the focus on children's grief and group processing were helpful.

Educational Materials

One of the objectives of the psycho-educational grief group was to include an educational component in the group format. Throughout the six group sessions educational materials were shared with the group participants. The materials shared provided the parents with information about adult and child grief, increasing their understanding of the impact of grief on a family. Educational materials included videos, handouts, activities, and discussion of specific topics related to general adult and childhood grief.

The overall helpfulness of the educational materials was evaluated as somewhat helpful (mean = 3.52, and range = 3.35 - 3.80). The educational materials presented during group three were evaluated as the least helpful of any group session. There was not enough time to complete the presentation of educational materials in this group.

Summary

Figure 4.2 presents the overall helpfulness of the three components of the group curriculum as evaluated by the participants. These results were derived from Evaluation B given to the participants during the sixth session. The research question was answered in the evaluation results. The participants evaluated the curriculum of the grief support group for parents as helpful.

The mean values for Figure 4.2 include, group experience (mean = 3.8), group processing (mean = 4.0), focus on children's grief (mean = 3.62), educational materials

(mean = 3.25), and overall experience (mean = 3.66). The findings are supportive for integrating the three components (group processing, focus on children's grief, and educational materials) into the development of a grief support group for parents.

OVERALL HELPFULNESS OF GROUP EXPERIENCE (GROUP 6 - EVALUATION B)

Legend:
- GROUP EXPERIENCE
- GROUP PROCESSING
- FOCUS ON CHILDREN'S GRIEF
- EDUCATIONAL MATERIALS
- OVERALL EXPERIENCE

Y-axis: DEGREE OF HELPFULNESS (0 to 5)
X-axis: MEAN
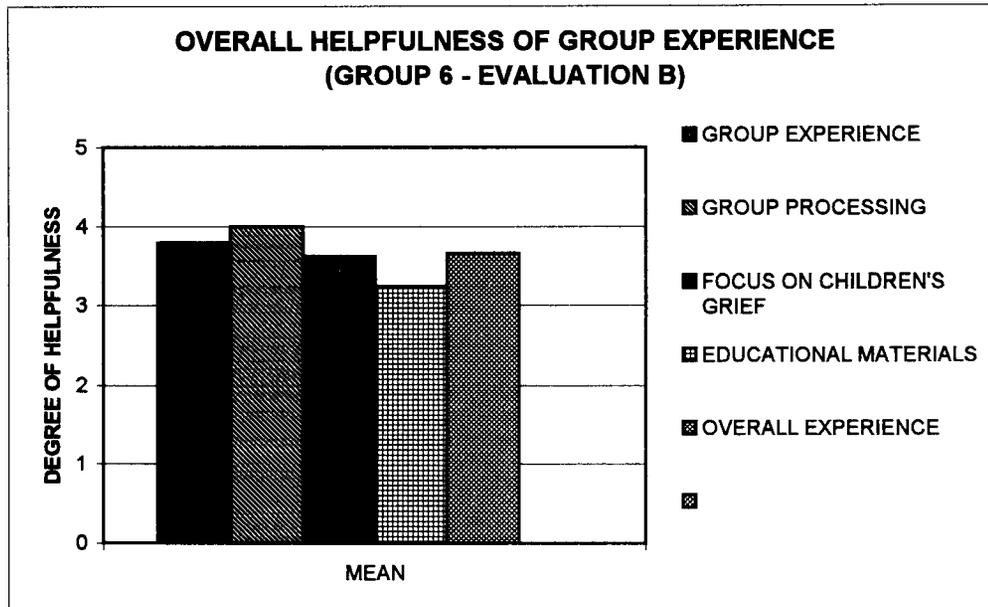
Figure 4.2

Results of Facilitator Observations

The facilitator's observations compliment the findings in the evaluations completed by the group participants. The four indicators used to record group observations were; group atmosphere, group member's interactions, group member's participation, and facilitator's overall analysis of each group. The field notes consist of brief summary language describing the group. The following results indicate two themes recorded in each of the four areas of the group experience.

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Group Atmosphere

The themes identified from the group recording forms included, *stressful atmosphere,* with anxiety and tension as commonly used descriptors; and *supportive atmosphere,* with bonding and sharing as commonly used terms. These identified themes are commonly found in support groups.

Group Member Interaction

The themes included in the group interaction were *supportive interaction,* described as talkativeness, sharing openly, story telling, and encouraging one another; and *non-supportive interaction* when hostility toward one another was verbally expressed. The majority of the time group members were able to express their feelings with one another openly while being supportive. Maintaining supportive interaction in the group was complicated by the varied individual needs among participants. In the group sessions supportive interaction was predominant.

Group Member Participation

The themes identified for the participation of group members included, *active participation,* described as, all group members participating, and enthusiastic in joint group activities; and *passive participation,* with intense feelings keeping members from participating being the identifying descriptor. A majority of the group members participated in every group session. Group members remained quiet at various points in the group sessions due to intense emotional experiences.

Facilitator's Group Analysis

The data extracted from the group analysis included: a) structure will help flow of group; b) participants need to know about the happenings of the children's group; c)

participants need to share personal grief along with child's grief; d) facilitators must be sure any one member does not override the group interactions; e) joint activities need to be at beginning of group to decrease tension, and allow for time to process after joint activity; f) diversity of group participants could be minimized with a more defined screening process; and g) parents need to check-in every group session by stating facts about the death to develop reality of the death experience. Overall the group was considered to be productive. At various points throughout the six group sessions, participants experienced difficulty in working through their individual feelings. This type of response is common when working through a particularly difficult experience.

Summary

In summary, the results of the group observations completed by the facilitators provided helpful information for future improvements of the parent grief group curriculum. The facilitator's field notes provided an overview of the group dynamics. The facilitators evaluated the components in the curriculum as helpful for the participants. The discussion chapter further addresses the results of this study and identifies applications for future curriculum revisions.

Limitations to the Study

A significant limitation to this study is the difficulty in presenting data without breaching confidentiality of the participants due to the size of the group. While the results show that the curriculum was helpful to the participants of the grief group offered, there are several factors that must be considered in order to obtain an accurate assessment of the data. The data collection process was impacted by the ability of the participants to thoroughly complete the questionnaire while experiencing an intense grief reaction. As

the evaluation questionnaire was developed prior to the group, it was difficult to capture

the impromptu changes in content as the group evolved. The limited number of

participants and their diverse individual needs reduced the significance of the numerical

values. In the event that a participant chose not to respond to a question or questionnaire

the numerical values were significantly effected. Although valuable assumptions and

recommendations resulted from this study, the limited sample size makes it difficult to

directly apply group evaluation information to subsequent groups.

CHAPTER 5

<u>Discussion</u>

This chapter discusses facilitator observations, recommendations for curriculum modifications, implications for practice, and limitation of the study. The facilitator observations discussed include, group development, participant screening, group facilitation, group process, and concurrent group effectiveness.

<u>Group Development</u>

An essential part of support groups is allowing time for group members to share experiences, and develop bonds with each other before they are able to focus on external issues. Although grief groups normally continue for longer than six weeks, the parent grief support group was set up as a six-week session to accommodate the length of the concurrent children's group. As the parent's grief support group and the children's grief support groups were initiated at the same time, children's grief group content needed to be addressed during each parent group session to meet goals of the group. The parents were resistant in initial sessions to focus on issues outside of their own grief experience as evidenced by the parent's reluctance to talk about their children's grief during the first two sessions. Starting the parents group three - four weeks prior to initiating the children's group could have increased benefit for the group participants in their parenting roles with adequate time allowed to share their experiences. This would allow for the participants to focus on their own grief and develop group support prior to diverting attention to their role as a surviving parent.

The development of concurrent groups should include exploring the potential impact of joint activity timing, complimentary versus identical group format, and sequence of events during group sessions, on each of the parent's and children's group. In a psycho-educational support group format, timing joint activities, sharing children's grief group content information and presenting educational materials at the beginning of the each group decreases the interruptive nature of integrating this into the group. The group was planned for one and one half-hours; however, planning for two-hour sessions would have provided adequate time to include the entire group content.

A significant section of time in the initial group was devoted to information about the group and signing of consents. Although a letter of consent was sent out prior to the group sessions to decrease length of time needed to focus on paperwork, the process may have been further expedited by including the consent forms in the letter.

Participant Screening

The original group included participants who had lost a spouse and those who had lost a child. It was difficult for participants to relate to others in the group who had experienced a different type of loss. Only the participants experiencing the death of a spouse remained in the group. This suggests that a screening process devised to identify potential participants with similar grief experiences would be beneficial to the group process.

Group Facilitation

Co-facilitation positively impacts the successful management of grief support groups. When one facilitator was unable to attend group, it was difficult to facilitate the

individual grief experiences, the overall group process, and the personality conflicts within the group. During one of the groups, where only one facilitator was present, it was necessary for the facilitator to leave the group unattended for a short period time to obtain equipment shared with a concurrent group. Conflicts that resulted from the non-facilitated conversation/comments, as evidenced by reporting of verbal devaluing of particular individuals' grief experience, could have been prevented or at least managed by the co-facilitator. Co-facilitation made it possible to provide support during intense individual emotional experiences while facilitating the overall group interactions.

In facilitating a grief group, the facilitators need to be prepared to experience the grief process personally. It was very beneficial to meet with co-facilitator and facilitator of children's group for debriefing and validation of feelings, concerns, frustrations, and feeling of inadequacy usually present when dealing with the intense emotional experiences of the group participants. One of the facilitators had facilitated a children's grief group prior to facilitating the parent's grief support group, enhancing her ability to respond to parent questions as well as to present the children's group content. It was valuable to the group process for one facilitator to have experienced a death in her family.

Group Process

Several of the participants had to leave other support groups in order to participate in the parent grief support group. They had developed rapport and bonding in the previous group and were resentful of having to leave that supportive atmosphere to enter a new group. The transfer to the parent's grief group was required if their children were enrolled in the children's grief group. This transfer from one group to another needs to

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be acknowledged during the initial group session in attempt to diffuse the feelings of resentment and loss.

A parent's grief group, as compared to a general grief group, provides an atmosphere for mutual understanding of parenting challenges during a grief experience and specific focus on the parent/child dynamics in the grieving process. This atmosphere encourages participants to share what has worked and what hasn't in their parent/child interaction.

The activity of sharing pictures of the person who had died was observed to be beneficial in encouraging the sharing of grief experiences. This activity was also observed to increase interest in, and support of, co-participants' grief experiences. The parents grief support group was a closed group with no new participants joining after initial group session. These factors contributed to the cohesiveness of the group and subsequently increased the willingness of participants to share their own grief experience.

Concurrent Groups Effectiveness

The parents and children's grief groups did not participate in joint activities until the fifth group to allow children an opportunity to share their grief in a supportive, safe environment with other children prior to joining their parents. Joint activities were held in the children's group area to increase the children's comfort level in sharing grief experiences. This allowed the parents to witness and share in their child's grief in a facilitated atmosphere. The full impact of the joint activities could be better determined with a follow up questionnaire.

Setting up a parent's grief group concurrent with the children's grief group provided an opportunity for the parents to obtain more specific information about the children's grief group content than would otherwise be available. The parent's increased awareness of the children's grief work activities provided a foundation for the joint group activity included in group session five.

One of the primary goals for the concurrent group format was to increase parent-child interaction. The parents shared that they were able to talk with their children on the way home after each group. Several parents identified this as one of the first meaningful interaction with their child regarding the grief experience.

Evaluation Results

The results of the group evaluations completed by the group participants have provided valuable knowledge regarding future curriculum development for parent grief support groups. The findings suggest that including the three main components, group processing, focus on children's grief and use of educational materials, are helpful in offering parents the encouragement and information to proceed through their individual grief journey and confront the change in their parenting role during a grief experience. Although the three main components were evaluated as 'somewhat helpful,' the following recommendations could positively impact the degree of helpfulness. The helpfulness of group processing was negatively impacted when focus on the children's group was added as seen in Figure 4.1. Planning parent grief support group sessions prior to initiating the children's grief support group would have allowed more time for group processing, potentially increasing the helpfulness of the group processing

component. Changing the group session format to allow for focus on children's grief and educational materials at the beginning of the group could increase the perceived helpfulness of these components.

The impact of the field notes on curriculum modifications and improvements are discussed in this chapter, including, group development, participant screening, group process, group facilitation, and concurrent group effectiveness. As the parents participating in this group had all lost a spouse from death, the results can not be extrapolated to groups where death of a child is the grief issue.

Recommendation

Recommendations for modifications in the group curriculum for application to future parent's grief support groups include, a) extend the grief group to ten sessions, starting three-four weeks prior to initiating the children's group, b) increase the length of group session to two hours, c) plan to share children's grief group content information, educational materials, and joint activities at the beginning of the group session, d) include the consent forms with the letter of consent sent prior to initiation of group, e) Assign two facilitators to each group, with at least one facilitator who has experienced the loss of a family member, f) plan for one facilitator to have participated in a children's grief group as a facilitator or observer prior to facilitating the parent's group, g) identify potential participants with similar grief experiences in the screening process.

Conclusion

A program such as that offered to the participants in this study supports a common theme evident in parents who grieve. Alan Wolfelt (1983) best describes this theme,

> "Parents' sense of loss, hurt, anger, and a multitude of other emotions often increase the effect of the death experience upon the child. And yet, the way in which parents respond to death, individually, in relation to each other, and with the child - has the potential of making a real difference in the outcome" (p. 22).

Wolfelt (1983) mentions three challenges that parents must face during a death experience. First parents must give themselves permission to grieve, second parents must share themselves with their child(ren), and third parents must help the child cope with their own individual experience.

The three components in the curriculum of the parent's grief support group presented in this research address the challenges identified by Wolfelt (1983). Each of the components was found to be somewhat helpful, suggesting that the parents benefited from their inclusion of this material.

Further study of parent/child concurrent groups would continue to address the void in the literature regarding the impact of grief groups on the parent-child relationships during a grief experience. A follow-up study addressing the research question, "Does implementation of a grief support group for parents of children ages 6-12 years, in conjunction with a grief group for children, benefit the parent-child relationship during a grief experience?" could support the value of concurrent parent and child grief groups. A pre-test/post-test design utilizing a behavioral checklist would be beneficial in evaluating the impact of concurrent groups.

Implications for Practice

Social workers have been involved in the development and implementation of groups for decades. "Practice suggests that people who seek social work services are trying to manage a stressful issue, even though they do not necessarily present their request for services in those terms" (Germain and Gitterman, 1995 p.9). Grief support group implementation has and will continue to present a viable alternative to individual therapy for those who have suffered from a loss due to death. Systems theory provides a foundation for responding to the unique needs of parent's in a grief experience. The implementation of a parent's grief support group in conjunction with a children's grief group contributes to the healthy functioning of the family system by offering concurrent support to the individuals within the system.

The participants of the grief group experienced many of the behaviors, and issues throughout the six-week group sessions identified by Corey & Corey (1982). The group members exhibited behaviors such as conflict, resentment, hostility, struggle for control, anxiety, cohesion, confrontation, separation and termination. As a facilitator involved with an emotionally charged group it was difficult to recognize, acknowledge, and confront all these issues. The knowledge of these common group dynamics provided a basis for resolving sensitive issues within the group. The "curative factors" identified by Yalom (1975) including, hope, universality, information, altruism, socialization, and interpersonal learning were evident in the parent's grief group. These factors contributed to the participant's development of a stronger sense of who they are amidst the changes being experience by their family unit.

This research identifies a curriculum for offering support to grieving parents who face the emotional and physical demands of a grief experience as well as the ongoing demands of parenting a grieving child. Professionals need to be sensitivity to the type of grief experienced in order to refer grieving parents to an appropriate group. The curriculum for a psycho-educational grief group for parents often includes an educational component and a processing component within a single group session. The transition from a processing group to a psycho-educational group was difficult for those that were used to being able to process during the entire group session. Participants not having had a prior group experience were more flexible in transitioning from processing to focusing on educational materials. This research identifies that the educational components should precede the group-processing component so as to decrease the interruptive nature of the transition. Initiating the parent's grief support group prior to the children's grief support group, increasing the length of the sessions, and planning for increased group processing time in the beginning and end of the group curriculum, could also enhanced the value of the group-processing component.

Fulfilling the dual role as facilitator and researcher presented role conflict when collecting predefined research data during group sessions. Facilitating a grief group tended to be an intense emotional experience for the facilitators. Group members' experiences can affect the facilitator's unresolved grief and loss issues. There also could be a risk of over-identification with an intense emotional experience such as the potential impact of the death of a family member. Having two facilitators was beneficial in offering the opportunity for feedback, helpful sharing and debriefing necessary to manage

intense feelings. Consultation with a social work supervisor would be helpful in working through issues related to grief in a group setting. Two facilitators were also helpful in providing participants with adequate support throughout the group sessions.

It is essential that social workers understand and acknowledge the stages of group process in order to provide group participants with a safe, secure atmosphere where they are able to share traumatic life experiences. Facilitation of a grief group involves group process issues as defined by Corey & Corey (1982). Further insight into Corey & Corey's group model and Yalom's (1975) work offers professionals insight and understanding to better serve participants in a group setting.

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Appendix A

Conceptual Definitions of Key Words

Death: The total and permanent cessation of vital functions; currently, in humans, the determining factor is the absence of measurable brain waves.

Family: Two or more people who consider themselves family and who assume obligations, functions and responsibilities generally essential to healthy family life.

Grief: Intense and acute sorrow resulting from loss.

Grief Reaction: Experiencing deep sadness as the result of an important loss. This emotional response is normal and in healthy people will gradually subside in a limited time.

Grief Work: A series of emotional stages or phases following an important loss, which gradually permit adjustment and recovery.

Loss: The state of being deprived of something that was once possessed, as a result of death, divorce, disaster, or crime. (For purposes of this thesis death will be considered.)

Group: A collection of people, brought together by mutual interests, who are capable of consistent and uniform action.

Support Group: A structured ongoing series of meetings between people who share a common problem and who give advice, encouragement, information and emotional sustenance.

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Appendix B

Evaluation of Grief Support Group for Parents
Evaluation Form A - Group Session II

Please reflect on the past week during the completion of this evaluation form.

How helpful was sharing your grief experience with other parents?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was identifying concerns that will be worked on during the next five weeks?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was hearing from other group members of their grief experiences in normalizing your own experience?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was seeing the same video as your children in providing a means of discussion of your grief experience?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form A - Group Session III

Please reflect on the past week during the completion of this evaluation form.

How helpful was the information on communicating about death with children in increasing your own communication with your child?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the information about normal and abnormal grief in recognizing your own grief reactions?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the assignment, involving identifying strengths from your past experiences, in giving you strength for your future?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form A - Group Session IV

Please reflect on the past week during the completion of this evaluation form.

How helpful was the discussion on the responsibilities in identifying your own role in the family ?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was it to share mementos of your loved one in understanding the impact of the loss?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the information on signs and symptoms of childhood grief reactions in identifying your own child(ren)'s needs?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form A - Group Session V

Please reflect on the past week during the completion of this evaluation form.

How Helpful was the discussion about feelings in understanding your present feelings?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion about feelings in understanding your child's feelings?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion of changes in your life in finding meaning to your present situation?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion on relationships in identifying your current relationships?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion of unfinished business in developing a future outlook on your life?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form A - Group Session VI

Please reflect on the past week during the completion of this evaluation form.

How helpful was the activity with the children in expressing your grief to the children?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the activity with the children in understanding your own child(ren)'s feelings?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How Helpful was the discussion about feelings in understanding your own feelings?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Appendix C

Evaluation of Grief Support Group for Parents
Evaluation Form B - Group Session 1

How helpful was the explanation of group rules in developing your understanding of the group expectations?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was it to share personal information about your experience that brings you to this group?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was it to listen to others experiences in identifying with other group members?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was identifying the concerns as a group to be addressed in the next five weeks?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was it to share your experience with death with one other group member?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments

Evaluation of Grief Support Group for Parents
Evaluation Form B Group Session II

How helpful was the information from the Video "What do I tell my Children"

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was sharing your strengths from past experiences in gaining strength for your current experience?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the information on normal and abnormal grief in understanding your own grief reaction?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion on childhood grief in understanding your child(ren)'s grief reaction?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the exploration of barriers that affect your personal grief response?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was your participation in today's group meeting?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation From B Group Session III

How helpful was the discussion about parental responsibilities in understanding the impact of your own parental role?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was sharing your mementos with the group in your own acknowledgment of the loss you have experienced?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the review of the signs and symptoms of children's grief in understanding your own child(ren)'s grief?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was your participation in today's group meeting in working through your grief?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form B Group Session IV

How helpful was the discussion of feelings in understanding your own feeling ?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was your participation in today's group in understanding your grief?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form B - Group Session V

How helpful was sharing your grief with your children in a group setting?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the use of pictures in discussing your grief with the children?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was discussing the joint activity with your children in beginning to understand your children's grief?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion about recent changes in your life in understanding what you have experienced?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion of recent changes in your life in forming a direction for your future?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was the discussion of your past and present relationships in understanding the relationships you are currently involved with?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Comments:

Evaluation of Grief Support Group for Parents
Evaluation Form B - Groups Session VI

How helpful was being a part of a structured group in working through your grief as a parent?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was it to share your grief experience with parents who have children the same age as your own?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful was obtaining information about children's grief?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

How helpful were the past six week group sessions in supporting you as a parent during a grief experience?

5	4	3	2	1
Very Helpful	Somewhat Helpful	Neutral	Somewhat Harmful	Very Harmful

Would you recommend this six week group to others you know who have experienced a death in their family?

Yes   No

Comments:

Appendix D

Group Recording Form

IRB# 97-08-03

Group Name: _____   **Beginning Date:**_____

Worker's Name: _____   **Termination Date:** _____

Session Number: _____   **Date of Session:** _____

Members present:

Members absent:

Purpose of group:

Objectives for this meeting:

Activities to meet these Objectives:

Group atmosphere:

Group members interaction:

Groups member participation:

Facilitator's analysis of group session:

Plan for future meetings:

Appendix E

Grief Support Group for Parents
Six Group Sessions
Outline and Objectives

Group I: Changes

Introduction of group process, ground rules.
Introduction of Group Members and Facilitators
Video about children's grief groups, discussion
What issues are most difficult, how can the group process help with these issues?

Objectives

1. To increase understanding of group process and ground rules.
2. To become knowledgeable of group members through introductions and sharing personal information.
3. To develop trust within facilitators and group members.
4. To explore tasks and issues that will be addressed through group participation.
5. To participate in sharing with group members.

Homework: List other losses in your life and strengths you found in dealing with these losses.

Group II: Death

Film: "What do I tell my children" and "Death of a Friend"
Questions shared about the grief response in children and Parents responsibilities.
Differences in child and adult grief.
Permission to grieve - what is a normal grief reaction?
Barriers in grieving
Share homework - Talks about strengths.

Homework: Bring pictures, memorial, obituary, or bulletin, of loved one, to share next week.

Objectives

1. To increase understanding of parental role during a grief experience.
2. To participate in exploring child grief
3. To increase understanding of normal and abnormal grief.
4. To learn how to communicate with children about death. "What do I tell my children"
5. To learn from our strengths.

66

Group III: Rituals

Share the homework assignments with others in small groups. Rituals
What parental tasks are most difficult since the death?
Signs when bereavement in children needs outside intervention.

Objectives

1. To participate in sharing family rituals.
2. To participate in developing group collage to share with children.
3. To learn the signs and symptoms in children's grief that need professional attention.

Group IV: Feelings

Define feelings
Relationships with our children and other people in our lives.

Objectives

1. To begin to recognize and understand our feelings since the death.
2. To develop an understanding of the changing relationships within the family.
3. To begin to understand our children's feelings

Group V: Memories

Join with the children's group to create a Collage of Memories.
Discuss the joint activity with the children.

Objectives

1. To participate in activity with children.
2. To develop a deeper understanding of children's grief through development of memory collage.
3. To begin the healing process through sharing memories.

Group VI: Support

Closing activity
What have we learned from one another?
Identification of our support
Closing with each other.
Ceremony with Children's Group.

Objectives

1. To participate in closing activity
2. To review with group members what has been gained from group .
3. To participate in ceremony with children's group.

Appendix F

CONSENT FOR PARTICIPATION
IN
SUPPORT GROUP FOR GRIEVING PARENTS

This Support Group for Grieving Parents has been developed and Co-Facilitated by:
Evelyn Swenson, BSW as part of my Master's Thesis at Augsburg College.
IRB# 97-08-03

Background Information:

Support groups for grieving parents are being offered to help parents manage their own grief while supporting their children when a death is experienced in the family. The purpose of this research project is to evaluate a newly developed support group curriculum for grieving parents. A six-week Grief Support Group for Parents is being offered in conjunction with the Children's Grief Support Group at Mercy Hospital. This support group is for parents to share their grief experience with others in similar circumstances. You will learn from, and support one another, as you grow in your own experience, bringing home to your families the support and attention required during a changing time in your lives.

Procedures:

If you agree to participate in this group, you will be asked to do the following things:

1. Attend all six of the group sessions as indicated on the outline.
2. Group meetings will be Monday evenings 7-9 pm, January 12 - February 17,1998.
3. Participate in the activities planned for each group meeting.
4. Cooperate with facilitators and group members during group sessions.
5. Maintain confidentiality of group discussions and personal information of group members.
6. Parents and children will meet together twice during six group sessions to share information regarding their grief work.

Risks and Benefits of Participating in Support Group:

There are few risks involved in your participation; they include, but are not limited to,

1. Past issues surfacing due to the emotional expression of recent loss.
2. Persons with depression or mental illness may experience worsening of condition.
3. Participating in a group with a person whom you are not fond of.

In the event that this program results in a psychological hardship, treatment will be provided, including evaluation and referral for follow-up psychological counseling as needed. Evaluation will be provided by Gail Noller, M.A., the director of the Grief Support Program at Mercy Hospital. However, payment for any such treatment and referral must be provided by your third party payer, if any(such as health insurance, Medicare, etc.).

Direct benefits include:

1. Increased knowledge of grief issues.
2. Increased knowledge of children's grief issues and ways to help children during a grief experience.
3. Increased support for self as parent and individual within a family system.
4. Improved coping skills during grief reaction.
5. Increased effective communication between parent and child(ren).

Voluntary nature of the Study:

Your decision whether or not to participate in the group will not affect your current or future relations with Augsburg College or Mercy Hospital. If you participate, you are free to withdraw at any time without affecting those relationships.

Researcher's Contact with Children:

Your children involved in the children's grief group for ages 6-12 will be invited to join the Parent's group at week four to share their grief work projects with their parents and again at week six to celebrate your hard work together. I, as a researcher, will not be interviewing or visiting with your children for purposes of this thesis project; however, mention will be made of the time spent together as it pertains to the benefit of grief work for parents and children alike, and of the group outline.

Contacts and Questions:

The persons implementing the program are Evelyn Swenson, BSW and Gail Noller, M. A., Licensed Psychologist. You may ask any questions you have now. If you have any questions later, you may contact them at 612-653-6288 or 612-780-7053.
Thesis Advisor: Michael Schock, Ph.D. Augsburg College, 612-330-1725

You will be given a copy of the form to keep for your records.

Statement of Consent:

I have read the above information. I have asked questions and have received answers. I consent to participate in all group expectations as stated above.

Signature_____ **Date**_____
Participant

Signature of Researcher _____ **Date** _____

CONSENT FOR RESEARCH PARTICIPATION
IN
SUPPORT GROUP FOR GRIEVING PARENTS

This Support Group for Grieving Parents has been developed and Co-Facilitated by: Evelyn Swenson, BSW as part of my Master's Thesis at Augsburg College.

IRB# 97-08-03

Purpose of Research:

This Grief Support Group for Grieving Parents is a newly developed program offered to you by Mercy Hospital. The group is offered in conjunction with the Children's Grief Group to increase your understanding of grief as it relates to you and your children. The research component of the group is intended to evaluate the helpfulness of the group sessions. The questions you will be asked to complete will offer information for planning of future curriculum revisions.

Procedures:

If you agree to participate in the research portion of this group, you will be asked to do the following things:

1. Complete an evaluation questionnaire at the beginning of each group, reflecting on the helpfulness of the last group session during the previous week.
2. Complete an evaluation questionnaire at the end of each group, reflecting on the helpfulness of the present group session.
3. The questionnaires will be completed within the 2 hour session.

Risks involved in Participating in the Research Portion of the Support Group:

The Research portion of the Support Group involves completion of two sets of evaluation forms relating to the helpfulness of the group content. Evaluation A will ask you about the helpfulness of the information shared in the group, during the last week. Evaluation B will ask you about the helpfulness of the current group experience. The Group Leaders will be recording general information regarding group participation, atmosphere, and interaction.

1. Completion of the evaluation questionnaires may increase your awareness of the loss you have experienced.

Direct benefits of participation in the Support Group and Research:

1. Completion of the evaluation questionnaires may reinforce group learning.
2. You may experience an increased awareness of the group interactions.
3. The information shared in group may be retained for a longer period of time.

Confidentiality:

Any records of intake information or group participation will be kept private. In the event that a report be published, identifying information will not be included. Records and information will be kept in a locked file; Facilitators, Grief Support Director, and Michael Schock, Ph.D., Thesis Advisor will have access to information. Raw data will be retained, but all identifying information will be removed by June 30,1998.

Voluntary nature of the Study:

Your decision whether or not to participate in the research component, involving evaluation of the group content, will not affect your current or future relations with Augsburg College or Mercy Hospital. If you choose to participate in the evaluation portion of the group, you are free to withdraw at any time, or refuse to complete any part of the evaluation questionnaire without affecting your involvement in the group.

Contacts and Questions:

The persons implementing the program are Evelyn Swenson, BSW and Gail Noller, M. A., Licensed Psychologist. You may ask any questions you have now. If you have any questions later, you may contact them at 612-653-6288 or 612-780-7053.
Thesis Advisor: Michael Schock, Ph.D. Augsburg College, 612-330-1725

You will be given a copy of the form to keep for your records.

Statement of Consent:

I have read the above information. I have asked questions and have received answers. I consent to participate in the research portion of the Grief Support Group for Parents.

Signature_____ **Date**_____
Participant

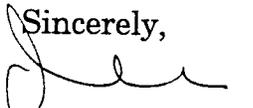**Signature of Researcher** _____ **Date** _____

Appendix G

Evelyn Swenson
4557 Birch Bend Lane
Vadnais Heights, MN 55127

November 25, 1997

Dear Evelyn Swenson,

As a representative of Augsburg College Institutional Review Board (IRB), we have considered your revised proposal for research, "Adult grief group". You have fully complied with the requirements of Augsburg's IRB. Therefore, you have full clearance from Augsburg College to proceed with your research. Your IRB number is 97-08-03. Please use this number in your cover letter. Also place this number on your survey.

Good luck on your research project.

Sincerely,

Michael Schock