

Chapter 74

Play-Based Bereavement Centers for Children and Families

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ABSTRACT

This chapter outlines the structure and therapeutic foundation for a play-based bereavement center geared toward children and families experiencing grief. Organizational structure and duties are discussed along with information regarding developing a playful facility including art/expressive writing, music, drama, symbolic play, and emotional regulation and release therapeutic opportunities. The author focuses on the supervision and training of community volunteers and counselors-in-training to increase positive outcomes and drive sustainability.

INTRODUCTION

In recent years, services for bereaved children have increased; however, most communities still lack appropriate resources for this specific population. Bereavement-based play therapy clinics can be a viable and sustainable option for most communities to fill this need. Bereavement-based play therapy clinics differ from non-bereavement counseling clinics in the depth of grief services provided by specialty staff in an environment which supports connection, wonder, and the supportive, playful exploration of grief and the soul's journey.

While the precise number of children impacted by bereavement is unknown, “an estimated 1 out of 15 children in the U.S. will experience the death of a parent or sibling before they reach the age of 18” (Judi's House/JAG Institute, 2018). It is also difficult to identify reliable statistics regarding the number of children who experience the loss of any significant loved one before adulthood; even the term “significant” is nebulous and subject to debate as family structures vary considerably. The pain and impacts

DOI: 10.4018/978-1-7998-3432-8.ch074

associated with childhood grief, on the other hand, are evident. Short-term impacts on bereaved children may include increased behavioral and academic issues (Holland, 2001; Worden, 1996), reduced self-esteem, symptoms of depression and anxiety, psychosomatic complaints, and physical illness (Worden, 1996), while long-term impacts may include attachment issues (Field & Filanosky, 2010), substance use and related disorders (Holland, 2001), along with anxiety, depression, and other psychiatric and behavioral disorders (Worden, 1996) which may continue into adulthood. According to Dowdney (2000), the majority of children return to baseline functioning within one year, with only an approximated 20% of children requiring mental health intervention. Fortunately, even brief bereavement support after the loss of a parent is shown to reduce the likelihood of severe long-term issues (Bergman, Axberg, & Hanson, 2017). Bereavement support may occur in many formats to include individual, family, and group therapy.

Grief support groups are the most widely cited form of bereavement support (Bergman et al., 2017) and have been shown to reduce isolation and provide a vital support network (Leick & Davidsen-Nielsen, 1991; Hopmeyer & Werk, 1994; Siddaway, Wood, Schulz, & Trickey, 2015), reduce educational issues and behavioral concerns in youth (Tonkins & Lambert, 1996), improve sense of self, and increase resiliency. The group setting provides a space for children to learn about grief and connect with other bereaved children, thereby normalizing their experiences (Siddaway et al., 2015). From a social learning perspective, observational experiences encourage growth through vicarious learning and processing. For many children, this experience returns the child to a sense of normalcy in peer groups, creating a sense of belonging, a vital aspect of child development. Moreover, peer support groups may serve as additional support for caregivers who are unable to provide children with the support needed due to the weight of their own grief (Dopp & Cain, 2012). Therefore, grief support groups may also provide a sacred and supportive space for children to share emotions and thoughts which may make family members and other non-grievors uncomfortable (Worden, 1996).

This chapter explores various options for the structure and therapeutic foundation of bereavement-based play therapy clinics geared toward children experiencing grief with an emphasis on group play therapy.

Play Therapy and Bereavement

Children experience and process bereavement differently from their adult counterparts (Cohen, Mannarino, & Knudsen, 2004; Webb, 2003); therefore, clinicians must carefully consider a child's developmental level before applying interventions. Based on their developmental level, children may be unable to cognitively understand the process and permanency of death (Crenshaw, 1995) or verbally express their emotions (Landreth, 2012). Moreover, current literature suggests children with trauma histories, such as traumatic bereavement, may have inhibited language capacity and ability to verbally process traumatic events (Porges, 2011; Van der Kolk, 2015). For these reasons, children are more likely to process grief through symbolic representation and metaphor (Crenshaw, 1995; Webb, 2003), which naturally occurs during the process of play therapy.

Play therapy is developmentally matched to meet the complex emotional needs of grieving children (Crenshaw, 1995; Webb, 2003). Because play is considered the universal language of children (Landreth, 2012), it is a natural medium for problem-solving and self-soothing. Play therapy provides children the opportunity to process and play out their feelings and experiences, including grief, using their natural language (Axline, 1969; Kottman & Meany-Walen, 2015; Landreth, 2012). Through metaphors and stories, children project and explore life, death, abandonment, and grief without directly talking about

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