

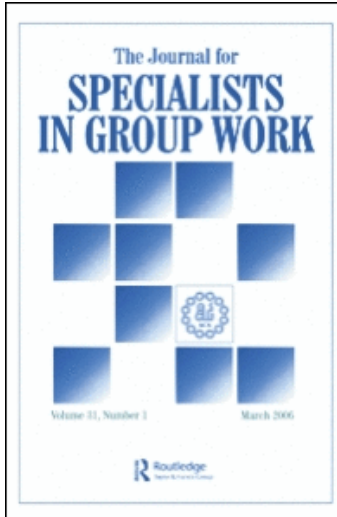
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# Letting Go of Grief: Bereavement Groups for Children in the School Setting

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*The loss of a family member is a traumatic experience for any child, affecting every aspect of life. In this article, we describe many of the needs of the child experiencing a loss, focusing on parental bereavement. A rationale for using support groups with grieving children is presented. Furthermore, we provide a review of best practices from the literature and recommendations to help counselors implement grief groups. Although many of the techniques and methods described are geared toward school counselors, grief groups for children can be used in a variety of settings, including hospices and community mental health centers.*

It is hard to imagine a more devastating event in the life of a child than the death of one or both parents. Unfortunately, it happens to about 4% of American youth before their 15th birthday (Fristad, Jedel, Weller, & Weller, 1993). Research indicates that mourning is always a complicated process for children for a number of reasons, which are outlined below. Particularly in cases where it is a parent who has died, grief can be more devastating. Grief groups that are led by counselors in schools can be an effective way to assist students who have undergone such a traumatic event.

Children's functioning in school is one of the many areas affected by such a traumatic loss. Thus, school counselors and other personnel are often in a position to assist students in mourning the loss of a loved one and beginning the process of healing. This article will provide a brief description of the needs of grieving children and detail a number of interventions found to be helpful in helping children deal with loss in a support group setting. The authors make use of available literature, the

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results of an informal survey of practitioners, and their own clinical experience.

### GRIEF RESPONSES IN CHILDREN

A comprehensive review of the literature by Hare, Sugawara, and Pratt (1986) found that a primary factor complicating the grief of children was their level of cognitive and emotional development. Although a detailed description of child development is beyond the scope of this article, some of the ramifications of the child's developmental level are worth mentioning. The research indicates that for younger children (ages 3 to 5), it is difficult to grasp the finality and universality of death. These children often responded with regressive behaviors, such as bed wetting and thumb sucking. Hare et al. note that older children (ages 6 to 11) can understand the concept of death yet lack the skills to adequately express their feelings.

Regardless of age, many children experience guilt, thinking that they might have caused the death among other reasons (Christ et al., 1993). In the face of incomprehensible life events, many children engage in magical thinking, sometimes creating a fantasy to explain circumstances that defy explanation. This magical thinking also leads many children to fantasize extensively about reunification with the deceased (Vastola, Nierenberg, & Graham, 1994). In a small but highly detailed case study, Goldberg (1998) reported that children responded to the death of a loved one with behavioral problems, social withdrawal, and increased daydreaming. The children in his study also experienced disorganized thoughts, a preoccupation with death, concerns about the well-being of other loved ones, fears of abandonment, loss of appetite, and increased somatic complaints. Christ et al. (1993) found that bereaved children often experienced a disruption in functioning at school, accompanied by anxiety that they would never return to their previous level of functioning. Increased sibling conflict was another commonly cited problem (Christ et al., 1993; Wilson, 1994).

### NEEDS OF THE GRIEVING CHILD

It is clear that, despite common misconceptions, children do grieve and require support and validation to mourn and move on (Wilson, 1994). In the case of parental death, it is often beneficial for the child to receive some of this support outside of the family unit because family members are often too preoccupied with their own grief to provide it

(Healy-Romanello, 1993). Unfortunately, research shows that children are unlikely to receive such support from friends or school personnel. Children who experience the death of a parent are often stigmatized by their peers who are reacting to their own discomfort with or lack of knowledge about death (Lohnes & Kalter, 1994). Due to changes in family responsibilities and time constraints, children may also have less contact with their peers following a loss (Christ et al., 1993). Often, adults who are in a position to help a child grieve are not equipped to do so (Healy-Romanello, 1993). Vastola et al. (1994) found that mental health professionals often failed to identify parental death as a contributing factor in childhood psychopathology.

Reid and Dixon (1999) found that most teachers would require assistance from professionals when working with a child who had experienced a death. They also found that some educators would not be willing to address issues of death and dying in the classroom. Indeed, in the clinical experience of the senior author, when referrals for a grief group are sought from teachers, there are very few responses. However, when such groups are offered directly to surviving parents, they are almost always open to the idea.

It must be noted that counselors may also be uncomfortable discussing such a painful issue with a child and his or her parents. Clearly, it is important to confront one's own unresolved issues around death and dying before endeavoring to support others. School counselors have a responsibility to take this painful step so that they are prepared to assist other school personnel and students in facing issues of death and dying.

The needs of the grieving child are myriad and complex. The child needs to understand and accept the death of the parent (Schoeman & Kreitzman, 1997). Explanations should be given in concrete language the child can understand (Lohnes & Kalter, 1994). Children who are grieving need to have their feelings validated and normalized (Tonkins, 1991). Education about the grief process and coping skills to work through it are also essential (Aspinall, 1996). It is important to help children preserve the memory of the deceased and incorporate this memory into their own identity (Lohnes & Kalter, 1994), while still understanding that death is final (Aspinall, 1996). Finally, children must be helped to move on with life (Lohnes & Kalter, 1994). Although at first all these tasks may appear overwhelming, it is important to remember that children are incredibly resilient and, given a caring and supportive environment, are able to heal and move on. Bereavement groups are one way to provide such an environment.

### RELEVANT RESEARCH FINDINGS

The findings on the efficacy of child bereavement groups are mixed. In a small study, Huss and Ritchie (1999) conducted a 6-week bereavement group. They found no statistically significant differences in the outcomes between the experimental and control groups. However, the children who participated in the groups reported that they felt that their experiences had been normalized through interacting with other children who had experienced similar losses. Goldberg (1998) also found that children no longer felt alone after participating in a group. The teachers and families of several of his subjects also reported an improvement in the child's level of functioning after the group intervention.

In a study that spanned ethnic, cultural, and socioeconomic groups, Tonkins (1991) found that the children who had participated in a grief group reported a significant decrease in negative feelings and grief symptoms, such as social withdrawal, depression, and anger.

Generally, the researchers found that, even in cases where there were no empirical results to support the efficacy of the group intervention, the children and parents involved indicated significant benefit from the groups. Such groups appear to provide children with a more realistic understanding of death and peer support at a time when many of their peers are withdrawing. Furthermore, groups have been found to encourage increased discussion between the children and their families, which can foster healing for all those affected by the loss.

### A MODEL FOR GRIEF GROUPS

Many school counselors have found grief groups to be a productive and meaningful part of their curriculum. An informal survey of subscribers to Counselortalk, an electronic listserv network of school counselors in Indiana, indicated that all respondents who facilitated such groups found them to be a gratifying experience. One respondent noted that these groups are especially effective because the students are motivated to attend. Another respondent, who had been working in schools for 24 years, stated that she felt the issue had been given inadequate attention throughout her tenure. Keitel, Kopala, and Robin (1998) recommended using such groups in conjunction with a regular death education program to prevent or address minor problems.

## Planning

Before discussing grief groups in particular, it is important to note that when planning small groups of all kinds, there are some common logistical concerns to consider. Once the decision is made to conduct a group, there is a good deal of planning and preparation to be done (Stockton & Toth, 2000). Without thoughtful planning, the counselor is apt to run into logistical and other difficulties that may interfere with the progress of the group. Approval and support of the building administration and faculty must be obtained, particularly when it will be necessary to remove students for groups during instructional time. During the time he was a school counselor, the second author found it helpful to meet with the superintendent or members of the central staff to discuss proposed groups. Being acquainted with the purpose and design of the groups meant that administrators could respond appropriately if questions concerning the program were raised.

It is also important to consider the developmental level of the students involved. For example, younger children require smaller groups and more activity in the context of the group than do older children (Gazda, Ginter, & Horne, 2001). In groups dealing specifically with grief and loss, the respondents to the Counselortalk survey recommended limiting groups to four to eight members, noting that having at least four members is desirable because some absences are inevitable.

Length of the group is another important consideration. In the Counselortalk survey, length ranged from 6 weeks to 1 year. One respondent reported that she found year-long groups to be more effective than short-term groups. However, this may not always be feasible, given the time constraints on school counselors. Rosemarie Smead Morganett (1994) recommends that groups should run for at least 8 weeks and longer if it is feasible. Counselors also have to consider the time of day and length of sessions for the group. It is helpful to consult with teachers when making these determinations. Although it is important to ensure adequate working time for the group, counselors must be mindful of competing needs for instructional time. The first author has found it useful to conduct groups during recess time. However, it is helpful to time the group so that it is completed by early spring, when young children feel a tremendous pull to be outside. In junior or senior high school, study halls are often available. When the above options are not available, it is helpful to alternate the time of day when meetings are held so that students do not consistently miss the same instructional period. Furthermore, we recommend that groups meet no more than one time

per week. Experience has indicated that groups function effectively in this time frame and it minimizes the disruption in the school week.

When working in a school setting, it can sometimes be difficult to find an adequate space that affords privacy and is accessible to the students. However, the importance of having such a location cannot be overemphasized. Indeed, many researchers stressed the importance of providing a safe and inviting environment in which to discuss such a difficult issue (Goldberg, 1998; Healy-Romanello, 1993; Lohnes & Kalter, 1994; Tonkins & Lambert, 1996). The room should be in a low-traffic area, with little or no risk of intrusion by other staff and students. To the extent possible, the environment should be made warm and inviting. For example, beanbag chairs, natural lighting, and water fountains can all add to a sense of safety and comfort for children.

### Selecting Members

The second step in conducting any group is to seek referrals from parents and school personnel (Keitel et al., 1998). In *Skills for Living*, Morganett (1994) has included several form letters that can be adapted and used in any school setting for informing teachers and parents about groups. According to the Counselortalk survey, parents and school personnel appreciated that grief groups were available because they saw a definite need for grief work but did not have the time or training to address this need. Proposing a grief group to a parent can be an uncomfortable prospect, especially when approaching parents with whom one has no previous relationship. However, it is important to keep in mind that, in most cases, the parent is painfully aware of the child's distress and will more than likely welcome the offer of help. When contacting parents about grief groups, it is helpful to do so in person rather than by phone because this allows the counselor to read the parents' body language and gauge the individual's comfort level. The issue should be addressed gently but directly. Include the name of the deceased. List the possible risks and benefits of the groups. Be prepared for an emotional reaction because parents are more than likely in need of support for themselves. Last, follow up frequently over the course of the group, letting the parents know what was discussed and the progress that is being made.

Before the initial meeting of the group, it is important to conduct a screening interview with each child and his or her parent if possible (Tait & Depta, 1993). During the interview, the counselor can inform participants about the rules and basic structure of the group and deter-



mine the child's readiness and appropriateness for group counseling. Once again, Morganett (1994) provides a wonderful model for screening interviews, called the Tap In Student Selection Checklist. Keitel et al. (1998) cautioned that group counseling may not be appropriate for children who are experiencing pathological grief or who have significant interpersonal problems. Webb (1993) asserted that a determination of pathological grief in children should be based on the degree to which the grief process is interfering with the child's daily functioning and ability to accomplish developmental tasks.

In screening for grief groups, counselors should also consider the timeliness of the intervention. Children who have experienced a loss within the previous two to four months should probably not be included because they are still in the early stages of the loss and not ready to deal with it on a cognitive level. Worden and Silverman (1996) found that the children in their study were still dealing with the ramifications of the parent's death up to 2 years after the loss. Therefore, although early intervention is important in these cases, counselors should feel comfortable in including children who have experienced a less recent loss because they are likely still in the process of mourning. Finally, the child's willingness to participate in a grief group needs to be thoroughly assessed. Such an intervention will be ineffective and even detrimental if the child is not ready to explore such painful issues.

### **Elements of Bereavement Groups**

In addition to addressing logistical concerns and selecting appropriate members, counselors must carefully consider the goals and activities to be included in the group. The primary goal of grief groups is, of course, to alleviate the suffering of the bereaved through mutual support (Keitel et al., 1998) and to facilitate healing so that children can function more effectively in the classroom and at home.

A pervasive theme that emerged in the Counselortalk survey was the value of flexibility in conducting grief groups. Although many different curricula were recommended, all agreed that the program should be tailored to meet the needs of the individuals in each case. The focus of the current article is on the death of a parent; however, a number of the counselors surveyed conducted general support groups for different kinds of loss, including divorce and abandonment. The general principles and procedures discussed here can also be applied to such groups.

The authors have found that when working with children, using deliberate structuring goes a long way in providing a safe and supportive environment. Indeed, as a general rule, the younger the population, the more structure is required. One way to do this is to begin each ses-



sion by reviewing the purpose of the group and the suggested norms of the group (such as confidentiality and the importance of active participation).

Counselors need to recognize that children have low tolerance for painful affect and will need frequent relief from the difficult work of the group. In the first author's experience, when the children had been dealing with heavy issues for too long, they became quite silly. Once again, flexibility is needed to gauge the emotional tone of the group and respond accordingly. Vargas-Irwin (1999) suggested using fun activities unrelated to death and dying to give the children frequent breaks from dealing directly with their loss. With younger children, providing puppets and dolls can be a powerful means of expressing feelings as well as a playful interlude when emotions are high. She also advises that, with any age group, it is important to gauge the members' readiness for activities and discussions that relate directly to the death. One way to assist students in dealing with painful issues is to modify well-known games to address themes of grief and loss. This permits children to discuss threatening topics in the fun and safe context of a game. For example, attach colored stickers to the blocks in the game Jenga. As group members remove one of the blocks, they must answer a question from a list associated with that particular color. The different colors can be used to denote the level of self-disclosure required to answer the questions.

It is also important to infuse the group with a sense of hope. One way to do this is to remind them that they will likely begin to feel better as they move through the process of mourning. Simply by being in the group, some of them will experience hope as they see students who are further along in the process and can attest to the fact that life does go on. Other authors have found creative ways to provide hope. For example, Goldberg (1998) accomplished this by talking about the future and ending each session with a wish circle, where the children silently held hands and made wishes.

Finally, it is also recommended that counselors develop a thematic framework to guide the week-to-week workings of the group. The following is a model for conducting a grief group, with separate themes and goals for each session. It should be noted that this is merely a model and should be modified to meet the needs of individual members when necessary.

### **Session 1: Feelings**

Identifying and exploring one's feelings is a primary concern that arises every week. Elementary students in particular do not have a vocabulary for their emotions readily available, and this must be

addressed before the more difficult work of the group can proceed. Thus, this is the theme of the first session and is then reinforced throughout the life of the group. This can be done by presenting a poster showing faces that express various feelings and asking students to identify what they felt at various points (e.g., when they were told of their parent's death or on their first birthday following the loss). Art and play therapy are also powerful means for helping children express painful feelings. At the end of the session, the experience should be processed. Following are some useful questions to include: What is one new feeling word you learned today? Which feeling best describes how you have felt in the past week? With whom will you share your feelings this week?

### **Session 2: Death Education**

This topic should include everything from answering children's questions about death to explaining details of the funeral or memorial service (Huss & Ritchie, 1999). This provides the students with necessary information to relieve their anxiety and also gives them further vocabulary to be used in subsequent sessions. One way to accomplish this is by providing pencils and paper and a box. Children write down their questions about death and place them in the box. These are then answered for the whole group. This can be a powerful experience as children discover that others share their concerns or confusion. Once again, the session should close with some processing time, including the following questions: What is one thing you learned today? Were you surprised or confused by anything that was said? What can you share with your parent or guardian about our meeting today?

### **Session 3: Memories**

Many practitioners have found it helpful to encourage children to talk about memories of the deceased and even bring mementos of the deceased to group. One way to do this is to have students bring a photo of the deceased. Construction paper, scissors, glue, and old magazines are provided. The children are encouraged to create a montage of all the things that remind them of the deceased, with the photo as the centerpiece. They are then encouraged to share their pictures with the group. Some questions to be asked are as follows: How did you decide what to include in your montage? What is your favorite memory of the deceased? What are some other ways you can share your memories of the deceased this week?

### **Session 4: Changes**

The death of a family member always brings many changes for the child. These can include their living arrangements and economic status among other things. It is important that children be allowed to process these changes. This can be done by asking children to draw a picture of their family before and after the death of the parent and then to discuss all the things that are different and all that have remained the same. Once again, attention must be paid not only to the events that have taken place but also to the children's feelings about these changes. Lohnes and Kalter (1994) recommended the use of indirect methods such as puppets when discussing painful issues such as parental remarriage. Several questions can be used to process this session: What has been the hardest change for you since your (mother, father, etc.) died? What has stayed the same? What can you do to deal with all the changes?

### **Sessions 5 and 6: Grief Education**

The next session should include a brief, age-appropriate explanation of the stages of grief. These can be graphically represented on a chalkboard or flipchart. Then, children can be encouraged to identify where they see themselves in this process (Morganett, 1994). Following this, group members can discuss specific coping skills, such as talking to a friend or journaling. Many children find art and play to be powerful means of healing. Following are some questions to use in processing: Which stage of grief are you in right now? What might it take to get to the next stage? Think about a time when you felt sad or angry and were able to deal with these feelings. What helped you feel better?

### **Session 7: Letting Go**

Now is the time to help group members find a way to say good-bye to the deceased and begin the process of letting go. Adams (1994) designed symbolic ways to say good-bye to the deceased, such as letting helium balloons go in a field. Because midwestern winters do not lend themselves to such outdoor activities, the senior author uses a visualization technique so that children can experience this process in their minds. They are encouraged to use this fantasy whenever they feel the need to say good-bye to the deceased. In the second author's experience, letting go is a long-term process and requires repetition. However, this procedure gives children the tools to continue this process after the group has ended. After such a powerful experience, it will be important to process

with some questions: What was it like for you to do this? What were some of the feelings you had? What is another way we could have done this?

### **Session 8: Saying Good-bye**

It is important to realize that the end of the group is another significant loss for the child, which needs to be validated (Tonkins & Lambert, 1996). The final session of the group must include a frank discussion of this loss, including an opportunity for children to express their feelings about it. However, this should also be a celebration of what has been accomplished in the group. Counselors should also provide links to the future by reminding children of the supportive adults in their lives and the coping skills they have acquired. The session should end with an opportunity for children to express their appreciation for the leader and each other. Drawing pictures, writing notes, or offering each child an opportunity to make a short statement to the others are ways this can be accomplished.

## **CONCLUSION**

Students who are grieving often experience significant difficulties in school, adding to the distress associated with their loss. The authors' clinical experience, as well as available research, indicates that groups may be an effective means of helping children and adolescents deal with their grief. Although there is a considerable amount of written material concerning grief groups with children, the research base is very limited. This important area is fully deserving of more research attention. In particular, what is needed is more research on the long-term efficacy of grief groups.

In this article, we have attempted to present a useful framework for conducting such groups. We have discussed a wide variety of tools and techniques that can help facilitate effective group work. Whatever the specific techniques used, it seems that children benefit by sharing their grief with their peers. The groups also provide a safe place for children to ask frightening questions about death and dying. Finally, grief groups allow the children to begin the process of letting go of the grief and moving on with their lives. It behooves us to take advantage of this important medium to alleviate the suffering of the bereaved and to empower them to heal and get back to the business of living and learning.

## APPENDIX

### Bibliotherapy and Other Resources

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- Alexander, S. (1985). *Nadia the willful*. New York: Pantheon Books.
- Beckmann, R. (1999). *Children who grieve: A manual for conducting support groups*. Holmes Beach, FL: Learning Publications.
- Boulden, J., & Boulden, J. (1992). *Saying goodbye*. Weaverville, CA: Boulden.
- Brown, L. K., & Brown, M. T. (1996). *When dinosaurs die: A guide to understanding death*. Boston: Little, Brown.
- Buscaglia, L. (1982). *The fall of Freddie the leaf: A story of life for all ages*. New York: C. B. Slack.
- Goldman, L. (1999). *Life and loss: A guide to helping grieving children*. Philadelphia: Brunner-Routledge.
- Grollman, E. (1990). *Talking about death: A dialogue between parent and child*. Boston: Beacon.
- Hanson, W. (1997). *The next place*. Minneapolis, MN: Waldman House.
- Heegaard, M. (1991). *When something terrible happens: Children can learn to cope with grief*. Minneapolis, MN: Woodland Press.
- Krementz, J. (1991). *How it feels when a parent dies*. New York: Knopf.
- Mellonie, B., & Ingpen, R. (1983). *Lifetimes: The beautiful way to explain death to children*. New York: Bantam.
- Morganett, R. S. (1994). *Skills for living: Group counseling activities for elementary students*. Champaign, IL: Research Press.
- Morganett, R. S. (1994). *Skills for living: Group counseling activities for young adolescents*. Champaign, IL: Research Press.
- Pellegrino, M. W. (1999). *I don't have an Uncle Phil anymore*. Washington, DC: Magination Press.
- Peterson, J. (1995). *Talk with teens about feelings, family, relationships, and the future: 50 guided discussions for school and counseling groups*. Minneapolis, MN: Free Spirit.
- Romain, T. (1999). *What on earth do you do when someone dies?* Minneapolis, MN: Free Spirit.
- Sanford, D. (1986). *It must hurt a lot*. Portland, OR: Multnomah Press.
- Seager, K. M., & Spencer, S. C. (1996). Meeting the bereavement needs of kids in patient/families—Not just playing around. *The Hospice Journal*, 11(4), 41-66.

## REFERENCES

- Adams, K. N. (1994). Bereavement counseling groups with elementary school students (Doctoral dissertation, University of Florida, 1994). *Dissertation Abstracts International Section A: Humanities and Social Sciences*, 56(11-A), 4277.
- Aspinall, S. Y. (1996). Educating children to cope with death: A preventive model. *Psychology in the Schools*, 33, 341-349.
- Christ, G. H., Siegel, K., Freund, B., Langosch, D., Hendersen, S., Sperber, D., & Weinstein, L. (1993). Impact of parental terminal cancer on latency-age children. *American Journal of Orthopsychiatry*, 63, 417-425.

- Fristad, M. A., Jedel, R., Weller, R. A., & Weller, E. B. (1993). Psychosocial functioning in children after the death of a parent. *American Journal of Psychiatry*, *150*, 511-513.
- Gazda, G., Ginter, E., & Horne, A. (2001). *Group counseling and group psychotherapy: Theory and application*. Needham Heights, MA: Allyn & Bacon.
- Goldberg, F. R. (1998). Left and left out: Teaching children to grieve through a rehabilitation curriculum. *Professional School Counseling*, *2*, 123-127.
- Hare, J., Sugawara, A., & Pratt, C. (1986). The child in grief: Implications for teaching. *Early Child Development and Care*, *25*, 43-56.
- Healy-Romanello, M. A. (1993). The invisible griever: Support groups for bereaved children. *Special Services in the Schools*, *8*, 67-89.
- Huss, S. N., & Ritchie, M. (1999). Effectiveness of a group for parentally bereaved children. *The Journal for Specialists in Group Work*, *24*, 186-196.
- Keitel, M. A., Kopala, M., & Robin, L. (1998). Loss and grief groups. In K. C. Stoiber & T. R. Kratochwill (Eds.), *Handbook of group intervention for children and families* (pp. 159-171). Boston: Allyn & Bacon.
- Lohnes, K. L., & Kalter, N. (1994). Preventive intervention groups for parentally bereaved children. *American Journal of Orthopsychiatry*, *64*, 594-604.
- Morganett, R. S. (1994). *Skills for living: Group counseling activities for elementary students*. Champaign, IL: Research Press.
- Reid, J. K., & Dixon, W. A. (1999). Teacher attitudes on coping with grief in the public school classroom. *Psychology in the Schools*, *36*, 219-229.
- Schoeman, L. H., & Kreitzman, R. (1997). Death of a parent: Group intervention with bereaved children and their caregivers. *Psychoanalysis and Psychotherapy*, *14*, 221-245.
- Stockton, R., & Toth, P. (2000). Small group counseling in school settings. In J. Wittmer (Ed.), *Managing your school counseling program: K-12 developmental strategies* (2nd ed., pp. 111-122). Minneapolis, MN: Educational Media Corporation.
- Tait, D. C., & Depta, J. (1993). Play therapy for bereaved children. In N. B. Webb (Ed.), *Helping bereaved children: A handbook for practitioners* (pp. 169-185). New York: Guilford.
- Tonkins, S.A.M. (1991). A treatment outcome study of bereavement groups for children (Doctoral dissertation, Brigham Young University, 1991). *Dissertation Abstracts International*, *52*(8-B), 4484.
- Tonkins, S.A.M., & Lambert, M. J. (1996). A treatment outcome study of bereavement groups for children. *Child and Adolescent Social Work Journal*, *13*, 3-21.
- Vargas-Irwin, M. (1999). Evaluation of a bereavement group for children (Doctoral dissertation, Rutgers The State University of New Jersey, 1999). *Dissertation Abstracts International (Section B: The Sciences and Engineering)*, *60*(2-B), 0846.
- Vastola, J., Nierenberg, A., & Graham, E. H. (1994). The lost and found group: Group work with bereaved children. In A. Gitterman & L. Shulman (Eds.), *Mutual aid groups, vulnerable populations, and the life cycle* (pp. 81-96). New York: Columbia University Press.
- Webb, N. B. (1993). Assessment of the bereaved child. In N. B. Webb (Ed.), *Helping bereaved children: A handbook for practitioners* (pp. 19-42). New York: Guilford.
- Wilson, D. L. (1994). An outcome study of a time-limited group intervention program for bereaved children (Doctoral dissertation, Washington State University, 1994). *Dissertation Abstracts International (Section A: Humanities and Social Sciences)*, *55*(12-A), 3793.
- Worden, J. W., & Silverman, P. R. (1996). Parental death and the adjustment of school-age children. *Omega*, *33*, 91-102.