

COMMUNITY BASED GRIEF SUPPORT FOR BEREAVED CHILDREN



# WOMBAT'S WISH

RESEARCH PROJECT  
2024



[wombatswish.org.au](http://wombatswish.org.au)





# WOMBAT'S WISH



## Research Summary



- Almost 600 hours were dedicated to this research (295 paid, 300 volunteer) over 11 months
- Over 40 resources were utilised as part of our literary review
- 6 working group meetings were held as a part of our mixed method, collaborative approach
- The majority of evidence base references now within the last 7 years (an average of 20+ year reference evidence date uplift)
- We had community collaboration with key partners (eg. Lionheart)
- We've delivered to the revised plan, with total research hours met, and more volunteer hours used (and slightly different resource mix)
- We have clear service outcomes and pathways forward in terms of prioritised and identified change

## Key findings



- Most of the weekend program work, is still valid with a refreshed strong evidence base and current grief theory
- Parent support is vital to our program moving forward, and more correlated with how children cope than we previously understood
- There is an organic alignment between relevant grief models and our strategy, creating a significant opportunity moving forward
- Our own internal data is as vital to helping resource investment and decisioning as the external research is
- Differentiation in future programs may be key to our evolution (i.e modules for different causes of death, circumstances etc)
- We may be observing more men starting to access services (hypothesis)
- There is no gold standard evaluation method for camp programs
- We have a post covid camp cancellation challenge, requiring more focus

## Recommendations & Reflections



- 7 changes made to weekend camp program, including time and resource changes, to better support participants ability to absorb the program
- 11 recommendations have been made on informed future work programs (some have already been committed and prioritised)
- Overall, greater support mechanisms are needed for parents and employees in particular (training, resources)
- There's an opportunity for more digital resources in the modern context (some already implemented in camp changes, more being assessed)
- There's a significant crossover between counselling program development and this research, strengthening our knowledge base
- More focus is needed moving forward to remain up to date with contemporary methods, to be field leaders and achieve our vision
- Significant research collaboration was, and is needed in the future

## Next steps

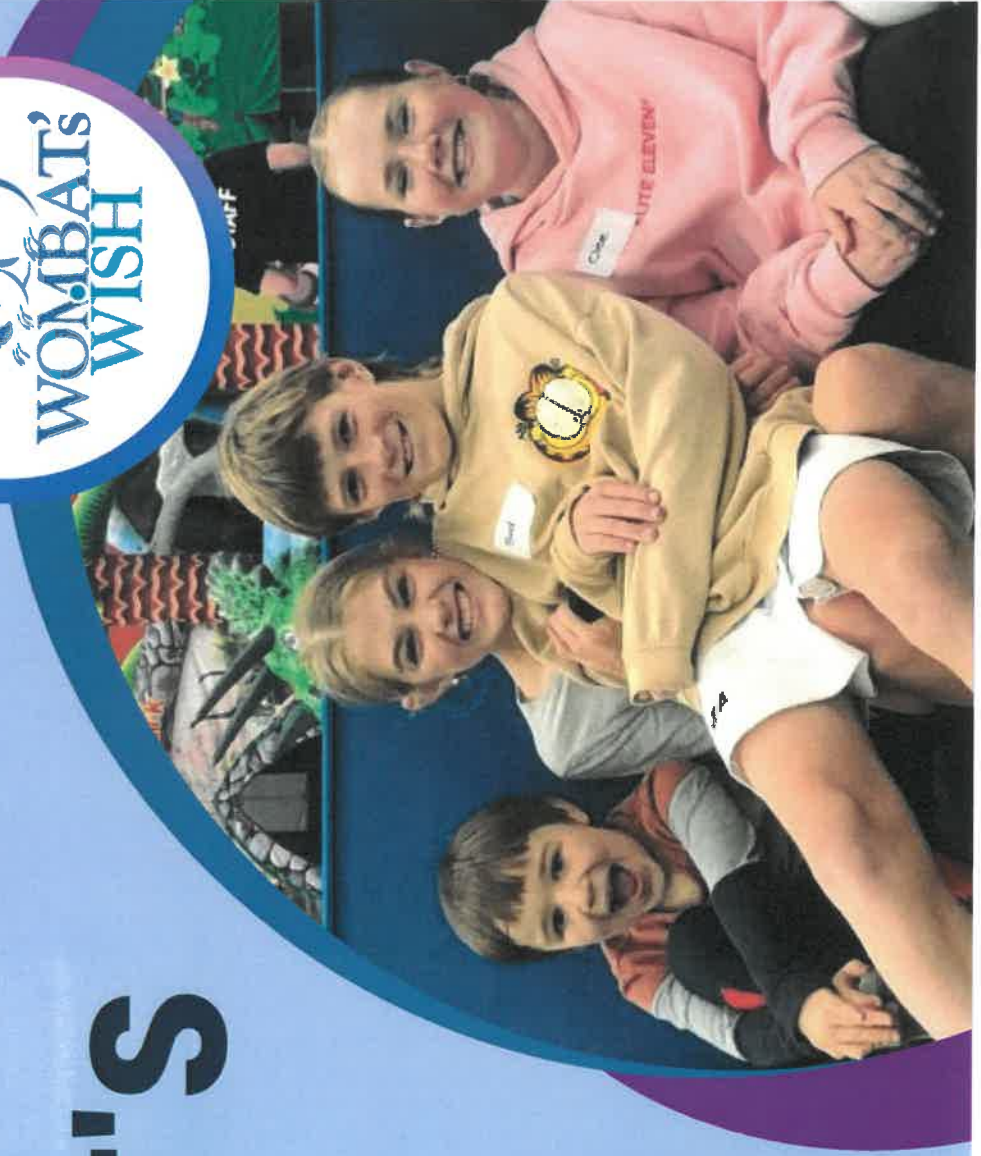


- Post implementation review to leverage key project lessons
- Start testing a new quantitative measure for children and young people participating in our programs (Lionheart partnership)
- Distribution of key findings with stakeholders (April) with potential conference participation (May & November)
- Increase parent support options, informed by new evidence base
- Assessing and prioritising investment in specialist programs / more targeted support (cause of death, cohort differentiation)
- Finalising our abstract, updating our website and materials to reflect the currency of our evidence base
- Ongoing work to understand participation barriers and outcomes
- Continuation of data led program development and expansion
- Pause to celebrate, reenergise, and look forward!



# WOMBAT'S WISH

STRATEGY 2030



# Overview



1

**Our Vision and Mission**

2

**Strategy Plan for 2030**

3

**Internal Culture and Values**



# Vision And Mission



## Vision

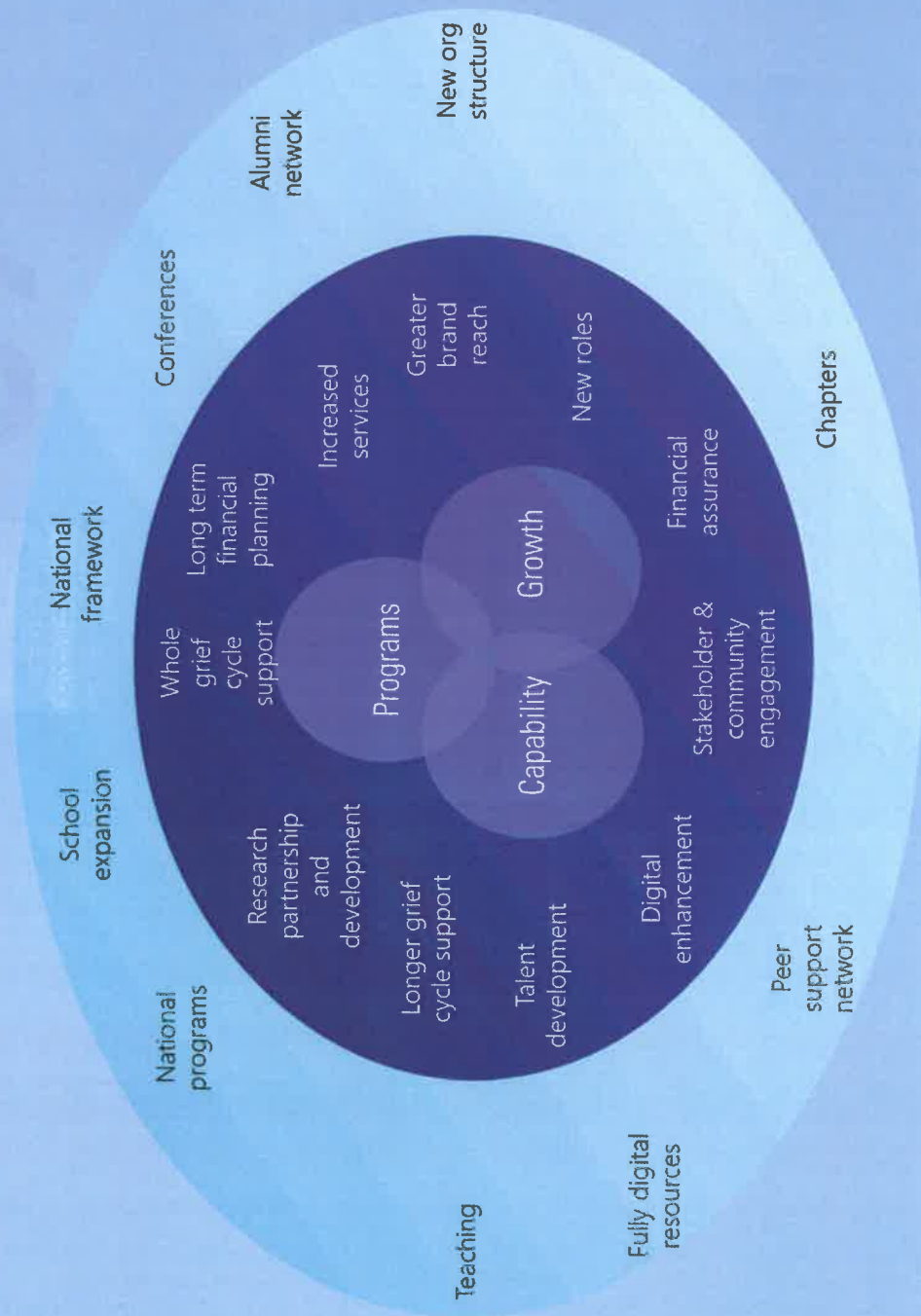
To show leadership and encourage collaboration in the field of child bereavement support, influencing thriving communities for generations

## Mission

To support parentally bereaved children, young people and their families through the lifecycle of grief.



# Strategy Plan 2030





# Internal Culture & Values



## Collaboration

- We respect each other and our community
- We listen and engage generously
- We look for common ground with open minds

## Accountability

- Our standards are high, we evolve quickly
- We use research and best-practice
- We're accountable and work through complexity

## Curiosity

- We're conversational and ask great questions
- We love feedback and challenge
- We seek and develop potential

## Diversity

- We're empathetic and supportive
- We grow and engage by building trust
- We value and embrace difference



## **Wombat's Wish: Research Project**

Summary & Scope

Identification of future work

26/03/2024

Part 1

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## Summary and Objectives of the Research Project

### Scope of the project:

Part 1. A narrative review of the current state of the research regarding child bereavement and evidence-based treatment approaches, particularly relating to grief-focused, trauma-informed practices.

Part 2. Evaluation of the Flagship Program – the Weekend Grief Program for Families (WGPF); formerly known as the Weekend Camp.

Part 3. Review of specific outcome measures and internal data. Analysis of data from WGPF from 2021:2024.

### The research team members:

Jill Crookes, BSc (Hons), Graduate Certificate in Health Studies (Loss and Grief), Counselling Psychologist, Member AAPI, Director of Clinical Services Wombat's Wish, Founder of Wombat's Wish.

Karla Logie, PhD (Respiratory Physiology), BaMed Sci (Hons), BaSci (Human Biology & Biomedical Science). Researcher Officer Wombat's Wish.

Frances McAloon, BsW, MGen. Accredited Mental Health Social Worker - Wombat's Wish and Bellarine Psychology, Team Leader at Wombat's Wish Weekend Grief Program for Families.

Steve McLachlan, BA, Dip Ed, Grad. Dip. App. Ch. Psych., M.Ed., Registered Educational and Counselling Psychologist, MAPS. Team Leader at Wombat's Wish Weekend Grief Program for Families since 2007.

Nicki Dunne, General Manager Operations, Program and Partnerships Wombat's Wish, Diploma of Youth Work and Community Welfare Studies, qualified trainer and assessor, over 35 years working in the community sector in management and governance supporting over 3000 young people.

Suzy Coad, Community Engagement Officer, BPsy; Grad Dip Psy

*NB Dr Briony Roberts contributed 42 hours of research to the camp program and literary review early in the project but was not a contributor to the research team or final works. We acknowledge her contribution.*

### **Narrative review**

**Of the current state of the research regarding child bereavement and evidence-based treatment approaches, particularly relating to grief-focused, trauma-informed practices.**

This evaluation will involve a general discussion of Wombat's Wish and an evidence-based summary covering a range of topics:

- WOMBAT'S WISH mission, aims and goals
- Theoretical underpinnings
- Models of care
- Program evaluation
- Service gaps
- The future – research, program development, community outreach etc

This review's purpose is to ensure that the principles and practices of Wombat's Wish programs are based on current scientific studies of child, youth, adult, and family bereavement.

### **About Wombat's Wish**

WOMBAT'S WISH is a grassroots charity based in Drysdale (located in the Barwon South-West region of Victoria). WOMBAT'S WISH supports children and their families following the death of a parent or primary carer.

WOMBAT'S WISH aims to provide comprehensive, whole-family and whole-community services.

WOMBAT'S WISH currently offers a range of programs:

- Weekend grief program for families (WGPF) – reviewed in detail in Part 2.
- Counselling support
- Family days
- Youth weekend grief program
- Online lounges (beginning in April 2024)

The primary aims of WOMBAT'S WISH program interventions are:

- To provide emotional support
- Reduce feelings of isolation
- To help children and caregivers understand the process of grief
- To normalise the participants experiences after the loss
- To provide a safe environment where the participants can express emotions and thoughts
- To facilitate the grieving process
- To provide the opportunity to connect with other bereaved families
- To strengthen caregivers' knowledge and skills in how to support their grieving children
- Improve family communication and the child-caregiver relationship
- Strengthen parenting
- Increase stability and predictability for children
- Reduce the occurrence of negative events for the children

(Griffiths, Mazzucchelli, et al., 2022)

(Bergman, Axberg and Hanson, 2017)

(Mental Health Foundation Scotland, 2020)

### Theoretical Underpinning

"Loss and grief is one of the best examples of a concept or condition that refuses to be boxed into a single theory."

Judith Murray, Honorary Associate Professor, School of Psychology, University of Queensland.

"I think Carl Jung said, learn your theories well, but lay them aside when you touch the reality of the living soul, and our theories are, as Erik Erickson said, jabs at the unknown."

Donna Schuurman, Executive Director of Dougy Centre 1991-2015. Currently, I am the senior director of advocacy and education at Dougy Centre, USA.

There is no 'one size fits all' definitive theory of grief. We have an amazing picture of a deeply complex human experience for which each theory offers a part of the picture. (Murray, 2023)

Despite these complexities, it is still essential to be informed by current thinking, theoretical concepts and empirical research.

Theories and Models of grief that have informed grief practice:

- Psychoanalytic
- Phase Theory of grief
- Attachment Theory
- Kubler-Ross Five Stages of Grief
- Task-based Model
- Dual-processing Model of Coping with Bereavement
- Continuing Bonds
- Social learning/Social Constructionist
- Cognitive stress
- Cognitive Behavioural
- Personal Construct Theory
- Systems/family Systems
- Existential
- Gestalt
- Narrative
- Interpersonal
- Developmental
- Multidimensional Grief Theory
- Neuroscience – Grieving as a form of learning  
(Kaplow, Layne, Pynoos & Saltzman, 2023)  
(Clarke, 2021)  
(Murray, 2023)  
(Griese, Burns and Farro, 2018)

At WOMBAT'S WISH, we have examined our WGPF children's curriculum primarily through the lens of Multidimensional Grief Theory and Multidimensional Grief Therapy.

Professor Lauren Breen (Curtin University stated, "I don't know much about Multidimensional Grief Theory or Multidimensional Grief Therapy. I know Julie Kaplow's work a bit and think she's great. I like that they seem to have developed this from the ground up regarding its relevance to young people rather than applying something developed on a much older group."

(Personal communication to Jill Crookes.



The influences on program development, curriculum, formulation, conceptualisation, and implementation vary.

At WOMBAT'S WISH, we remain committed to continuing to be abreast of all relevant and vital research and discussion regarding loss, grief, bereavement, death and dying.

The Multidimensional Grief Theory (MGT) was chosen as it is:

- Strengths-based
- Developmentally tailored
- It has an integrative focus on trauma and bereavement
- It is an assessment-driven format
- Flexibly tailored
- Multi-tiered intervention
- Individual or group-based format
- Grounded in cutting-edge theoretical and empirical developments (Kaplow, Layne, Pynoos and Saltzman, 2023)

### Model of Care

The care model most closely aligned with WOMBAT'S WISH Mission, Vision, and Strategic Plan 2030, is the Comprehensive Grief Care Model developed at Judi's House and JAG Institute in Colorado. This non-profit bereavement centre has spent over two decades "folding scholarly research and evidence-based clinical practice into a peer support framework."

(Griese, Burns, Farro, Silvern and Talmi, 2017)



## Program Evaluation

Program evaluation is the systematic collection of information about programs' activities, characteristics, and outcomes to assess them, improve their effectiveness, and/or inform decisions about future programming. (McClatchley & Wimmer, 2018)

Evaluating a service is vital to:

- Making the case to suppliers and funders
- Ensuring resources are not wasted
- Demonstrating that interventions are effective; that is, need to show a positive outcome and create active change in participants
- Demonstrating that activities meet the organisation's mission, vision and strategy or model of care
- Demonstrating to referral sources that the program is going to help or make a difference for participants
- Providing an opportunity to reflect on and improve clinical practice
- Giving families the information they need to make informed decisions about whether to access the service

Understanding exactly what WOMBAT'S WISH is trying to do is a crucial first step in demonstrating the difference we are making. The Child Bereavement Network (CBN) Framework shows the outcomes the child bereavement services across the UK are trying to bring about.

WOMBAT'S WISH uses this framework to guide its interventions and practices.

WOMBAT'S WISH currently uses a satisfaction survey (from Winston's Wish 2004). Questions are asked of participants to find out how well the program ran, how well the participants liked the program, etc. Details are in the Appendix.

This needs updating, and other more rigorous methods of evaluation should be explored.

Lionheart Camp For Kids (LCK) in WA is piloting questionnaires developed with Professor Lauren Breen from Curtin University. LCK program is very similar to WGPF, so it might be that their questionnaires apply to WOMBAT'S WISH programs. Further discussion with LCK is scheduled.

Personal communication from Laura Butshiire, LCK Program Development Coordinator and Volunteer Coordinator, March 2024.

The most common camp evaluators are the camp organisers or staff (this is currently the case at WOMBAT'S WISH). This approach has advantages and disadvantages.

Advantages:

- Staff know the program
- Staff know what happens at camp

Disadvantages:

- Staff may interpret data more positively than is warranted
- Participants may give responses they think staff want to hear; that is, response bias

The obvious answer is to use external evaluators who are impartial to the outcome. Finances often preclude small, grassroots, not-for-profits from being able to hire outside resources.

Another option is to engage/collaborate with tertiary institutions to conduct research and evaluations.

WOMBAT'S WISH has approached many tertiary institutions in Victoria over many years, but none have 'come on board'. As mentioned above, collaborating with LCK and Curtin is our intended approach to creating some field

leadership. This is an ongoing project that the organisation has committed to post-closure of the current research program.

Another option is engaging Drummond Street Services Centre for Family Research and Education.  
[www.cfre.org.au](http://www.cfre.org.au)

### Practical Implications, Service Gaps, Future Directions

*The Moyer Bereavement Camp Standards of Practice (2018) and The Childhood Bereavement Network Guidelines for Good Practice are two frameworks that WW uses to guide its organisational operations, policies, and practices.*

Next steps/recommendations from this framework, which inform our future work, include:

- **Ongoing program evaluation** (as discussed above) so that we remain relevant, up-to-date, and underpinned by current evidence. This will ensure we monitor and mitigate the risk of falling behind and don't require 'catch-up' programs in the future. The organisation has committed to prioritising funding avenues to remain current and up-to-date from a data and research perspective.
- Post-camp follow-up of families to assess ongoing bereavement needs – to be implemented in 2024, from existing prioritised investment
- Providing conjoint child/caregiver session options **post camp** (as provided in the Family Bereavement Program. "The most researched intervention which has shown benefits for children and caregivers in the short-term and long-term." Griffiths et al. 2022) – to be implemented in 2024
- **Ongoing training of staff and volunteers** regarding current theories, research practices, etc. - to be developed in a future program, including theoretical underpinning and an annual core compliance certificate. This is a gap we have today when looking at the models.

Additional areas of future work include:

- Ongoing data analysis of participants' demographics. (Data for 2021, 2022 and 2023 in Part 3) - seeking grants to fund this for four years.
- Prioritise and schedule future review/evaluation of:
  - online lounges (post-April-June implementation)
  - youth weekend grief program \*\* (lowest priority as a new program)
  - schools' outreach
  - community outreach
  - counselling support - commencing Q2 as part of P500
  - family days – to be implemented in 2024
- Collaboration with tertiary institutions and Drummond Street to track fidelity and effectiveness, maintain standards, keep updated, provide knowledge, etc.
- We are developing a new post-program evaluation in partnership with Lionheart, which aligns strongly with our mission to be leaders in the field. Note that this is for children; the parent form has already been updated as part of this program.
- Providing for diverse populations; eg. refugee families
- Development of specialist programs; eg. suicide bereaved
- Provision of specialist programs; eg., homicide bereaved (Alisic et al 2023).

A final prioritised area that needs to be further analysed is the **clinical assessment** of WGPf participants before their commitment and attendance at the program.





## Wombat's Wish Research Part 1

WOMBAT'S WISH currently follows Winston's Wish's format: two practitioners visit the family in their own home and speak to/interview the caregivers and children individually.

This semi-structured interview aims to establish:

- The impact of this particular death
- For this particular family
- At this particular time
- In this particular community

Details in Family Assessment by Julie Stokes (2005), Founder of Winston's Wish.

This protocol is now 20 years old and thus due for review – part of a new approach is being tested as part of P500. More work is required to assess how the approaches to these sessions may or may not impact program readiness or cancellation (including postponement).

As mentioned, more recently developed programs, including Multidimensional Grief Therapy, Pathfinders (JAG Institute), and the Childhood Bereavement Network, also use a number of published resources/standardised measures /validated instruments to help them apply the principles of evidence-based assessments to their programs.

Unfortunately, the selection of which measures, checklists, questionnaires, tools or instruments are most rigorous is not identified by current research.

Bergman et al. (2017) identified 16 outcome measures commonly used in their systematic review of support programs for parentally bereaved children and their caregivers.

Zhang et al. (2023) conducted a systematic review of 24 grief instruments for measuring grief in children and adolescents.

They concluded that “the child bereavement field still has large gaps in its understanding of the best ways to support children and families.”  
and there is “a need to direct research towards more stringent validation of existing instruments and the design of new instruments in line with developments in the understanding of grief in this population”.

### **Summary:**

**Wombat's Wish, in this research project, has attempted to identify the most relevant evidence-based theory, concepts, research, policy and practices applicable to the organisation and its programs.**

**Although scientific discoveries around childhood grief and bereavement continue to advance, many important areas of future investigation remain.**

**Wombat's Wish remains committed to continuing this ongoing work.**

**Acknowledgment: Wombat's Wish gratefully acknowledges the Geelong Community Foundation's support of Part 1 of the Research Project.**



**Geelong  
Community  
Foundation**

Giving. Forever.

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## Appendix

### Strategic Plan

### Childhood Bereavement Network Service Outcomes Framework

### Evaluation Forms



## **Wombat's Wish: Research Project**

### **Part 2**

Residential Weekend Grief Program Evaluation

26/03/2024

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*Wombat's Wish acknowledges the children and families who courageously share their experiences at Wombat's Wish Weekend Grief Program for Families.*

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#### Scope of the project:

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Part 2. Evaluation of the Flagship Program – the Weekend Grief Program for Families (WGPF); formerly known as the Weekend Camp.

Part 3. Review of specific outcome measures. Analysis of data from WGPF from 2021 – 2024.

#### The research team members:

Jill Crookes, BSc (Hons), Graduate Certificate in Health Studies (Loss and Grief), Counselling Psychologist, Member AAPI., Director of Clinical Services Wombat's Wish, Founder of Wombat's Wish.

Frances McAloon, BsW, MGero. Accredited Mental Health Social Worker - Wombat's Wish and Bellarine Psychology, Team Leader at Wombat's Wish Weekend Grief Program for Families..

Steve McLachlan, BA, Dip Ed, Grad. Dip. App. Ch. Psych., M.Ed. , Registered Educational and Counselling Psychologist, MAPS. Team Leader at Wombat's Wish Weekend Grief Program for Families since 2007.

Karla Logie, PhD (Respiratory Physiology), BaMed Sci (Hons), BaSci (Human Biology & Biomedical Science). Senior Researcher Officer Wombat's Wish.

Nicki Dunne, General Manager Operations, Program and Partnerships Wombat's Wish, Diploma of Youth Work and Community Welfare Studies, qualified trainer and assessor, over 35 years working in the community sector in management and governance supporting over 3000 young people.

Suzy Coad, Community Engagement Officer, BPsy; Grad Dip Psy.

### Part 2

#### Evaluation of the Weekend Grief Program for Families (WGPF)

##### About WGPF:

##### The WGPF intervention is:

- Short-term
- Accessible
- Grief-focussed
- Trauma-informed
- Evidence-based
- Non-pathologizing, wellness focussed
- Strengths-based
- Theory-driven
- Research-informed
- Grounded in practice-based evidence

The research team evaluated the flagship residential weekend program in 2023/2024 to review the curriculum and ensure that all activities were informed by current and seminal research and theory.

We investigated whether the activities provided at the weekend programs are well aligned with and underpinned by the important treatment components seen as necessary to support adults and children in processing their loss and grief.

This review used the model of Multidimensional Grief Theory and Therapy to understand the continuum of interventions needed and analysed all activities according to their framework of nine treatment components required to support grieving children. These components are:

1. Grief psychoeducation
2. Building emotion identification and regulation skills
3. Cognitive coping and restructuring
4. Grief and trauma processing
5. Memorialising and continuing bonds
6. Meaning making
7. Parental grief facilitation
8. Future planning
9. Engagement of social support

(Kaplow, Layne, Pynoos & Saltzman, 2023).

In reviewing the current WGPF, it is clear that the activities meet these components; however, several changes have been made to update and improve the curriculum - in line with the research findings.

(Service gaps and future work are discussed in the narrative review, Scope1).

The model of Multidimensional Grief Theory and Therapy and the nine treatment components to support grieving children, plus other seminal theory and research in bereavement, was used to review the weekend activities in detail:



### ACTIVITY: MEMORY TABLE AND LIGHTING THE CANDLE

Caregivers and children light a candle in the group and provide a photo of the person they are here to remember. They can revisit this table of candles and photos for reflection throughout the weekend.

#### Components

- 3. Cognitive coping and restructuring
- 5. Memorialising and continuing bonds
- 7. Parental grief facilitation
- 8. Future planning

Lighting the candle is a symbolic ritual that can be done at home as well and a starting point to introduce participants early in the weekend program to the idea of talking, remembering, and reflecting on their loss.

#### Theoretical Underpinning/ Conceptual Background

The concept of continuing bonds elucidates how people grieve; rather than “moving on” or “letting go,” healthy grieving can support ways to remember and remain connected to the deceased person's memories and life. (Klass, Silverman and Nickman, 1996).

More recently, Stokes (2021) has stated that “memorialising activities are designed to assist young people in reframing their relationship with their lost ones” and “that thinking about the person who died is a first step to help with healing”.

Having caregivers share an activity with the Children's Program allows caregivers to facilitate these activities later and can promote adaptive grieving in both children and caregivers. (Kaplow et al, 2023).

After breakfast, everyone gathers in a circle, and a team leader discusses the idea of comfort zones. Three circles representing:

### ACTIVITY: COMFORT ZONES

Our inner comfort zone

Our “stretch” middle zone

Our outer “out of comfort” zone

People move around different zones according to comfort. General ideas are used to begin (e.g. comfort with snakes, the dark), moving to comfort with talking in public and then about the person who has died.

#### Components

- 2. Building emotion identification and regulation skills
- 7. Parental grief facilitation
- 8. Future planning

#### Theoretical Underpinning/ Conceptual Background

The comfort zone exercise introduces the notion that we grow by stretching ourselves with support and safety to learn about ourselves. (Page, 2020).

It also helps children and caregivers to identify, label and ultimately regulate their emotions.

Building emotion identification and regulation skills is an essential skill for helping children navigate the complex emotions that are likely to rise through the course of the grieving process. (Kentor & Kaplow, 2020).

The children are divided into groups, generally according to age (5-8, 9-11 and 12 -17).

*Parents/ caregivers go to a separate site for their program.*

### ACTIVITY: STORY BOOK

Early in the children's first day, a volunteer or team leader reads a children's book about loss and grief.

The Goodbye Book by Todd Parr.

This is a gentle but purposeful introduction to discussing grief and emotional expression.

#### **Components**

1. Grief psychoeducation
2. Building emotion identification and regulation skills

#### **Theoretical Underpinning/ Conceptual Background**

The primary goal of psychoeducation is to normalise the child's response to the loss and trauma they have experienced and provide accurate cognitions of the painful and confusing feelings that the child may be experiencing.

Sharing stories is highly beneficial for a child because the processes involved in telling and listening engage both the left and right hemispheres of the brain, integrating linguistic processing with emotional, sensorimotor and visual information. (Ferry, 2018).

### ACTIVITY: ROCKY ROCKS

The children (and caregivers in a separate group) choose three small rocks—one smooth, one rough, and one shiny—to represent the deceased person's ordinary, hard, and special moments and briefly comment on memories.

#### **Components**

1. Grief psychoeducation
2. Building emotion identification and regulation skills
3. Cognitive coping and restructuring
6. Meaning making
7. Parental grief facilitation

#### **Theoretical Underpinning/ Conceptual Background**

Knowing that we can hold and recall ordinary, hard and special memories is part of learning that grief can be all of these normal emotions. "One way of balancing different types of memories is to select three different stories and imagine those are your memory stories".

Stokes (2021) describes this exercise as "flexing your memory muscle in a positive way."

To make sense of our loss, it is necessary to integrate many varied emotions and perhaps difficult, painful memories and place all in some understandable context over time. Meaning-making is central to effectively work through grief. (Kentor & Kaplow, 2020).

Children will place their rocks/gemstones in their memory boxes.

### ACTIVITY: MEMORY BOXES

Throughout the weekend, children will place many artifacts created and used (Rocky Rocks, Memory jars, First Aid box, drawings, etc.) in a lovely wooden box with a wombat on top. They take this box home. This is a physical representation and reminder of the grief work done, a keepsake, and a valuable tool to use in the future for reminiscence, self-care, or support. Children at many camps have spoken of how important this personal and individual token is for them in their grief journey. Children and caregivers report that the families have revisited this over the years.

Having a concrete object, such as a memory box, helps caregivers and children to have conversations and memories about the death that will grow and change as the child's developmental and cognitive capacity to comprehend death changes with age.

#### **Theoretical Underpinning/ Conceptual Background**

"Building a memory store that can comfort and reassure you" is important to finding strength, staying hopeful, and coping with grief.

"Managing your memories carefully will become a more and more important part of moving forward." (Stokes, 2021).

### ACTIVITY: BALLOON ANALOGY

This 15-minute intervention is a way of describing the build-up of feelings to children.

This is an introduction to the concept of how when stressors in your life build up, if you keep them in, this can lead to dramatic effects.

The two stories are read one after the other; in the first story, the balloon gets bigger and bigger. With each stress that happens, the storyteller's helper blows the balloon up more until, at the end, the balloon is nearly bursting. Let the balloon go and explain as it races through the air that this is like an explosive outburst.

In the second story, the balloon is blown up each time a stressor happens, but the air is released each time he uses a coping strategy until, in the end, a little bit of air is left in the balloon.

A discussion is facilitated around coping strategies – you can ask the children what they notice as being different in the two stories – what does Jack do differently in the second one? And what does that mean for his feelings? He still has a bad day and experiences some difficult feelings (hence, there is a little bit of air left in the balloon), but he uses some coping strategies to help himself feel better – talking to others, letting them know it's the anniversary of his dad's death etc.

#### **Components**

1. Grief psychoeducation
2. Building emotion identification and regulation skills

#### **Theoretical Underpinning/ Conceptual Background**

Some children may have had a difficult relationship with their deceased person, and it is valid to express all feelings. Stokes (2021) refers to this as having a "flexible feelings muscle":

*"This flexible feelings muscle helps you to respect your feelings, control them and, importantly, NOT lock them away."* Developments in neuroscience provide evidence for understanding more about the brain and body, right/left brain integration, nervous system co-grief rage, and ways to down-regulate our nervous systems. (Young, 2023)



### ACTIVITY: TELLING THE STORY

Growing requires neural re-wiring. (O'Connor, 2022).

This is a central activity for both children and caregivers in their separate groups, as they are encouraged to speak about the person who died.

They are given a few questions to guide discussion of their experience and what they knew before, during, and after the death. This helps form a coherent narrative, be supported, give voice to their unique experience, and be heard and held by others in a safe environment.

#### Components

1. Grief psychoeducation
2. Building emotion identification and regulation skills
6. Meaning making
7. Parental grief facilitation

#### Theoretical Underpinning/ Conceptual Background

Constructing and sharing the loss narrative in a safe and supportive setting carries multiple therapeutic benefits. Specifically, the loss narrative (1) increases tolerance for and brings greater coherence to memories and emotions that the client may have been avoiding; (2) reduces reactivity to painful memories; (3) provides insight into current loss and/or trauma reminders as well as associated unhelpful thoughts or behaviours; (4) enhances the client's ability to make sense and meaning of the death; and (5) when shared with caregivers, enhances understanding and communication between family members regarding the death. (Kaplow et al, 2023).

*"We never had anybody who said they didn't want to talk about it, even though there was a lot of shock and trauma. They wanted to talk about it and share what was going on, and something sacred and critical carried from that – the importance of people being able to tell their stories with someone who cares and listens."* Donna Schuurman, from Dougy Centre, discussing working with Cambodian and Vietnamese refugee camps – in (Traher and Breen, 2024).

#### Proposed changes to this activity of the Weekend Grief Program for Families

The children have a shorter and more contained version of this and cope well with the chance to tell their story as they know it and to listen to their peers, so their participation in this activity remains unchanged.

In the parent group, facilitators found that this part of the day could become overwhelming for some when some parents had not had the chance to speak their story before, and thus, it was uncontained and raw. The provision of more pre-weekend assessments and the opportunity for 1:1 counselling before camp may prepare parents more beforehand.

A counsellor's appointment will now allow this to occur if assessed as needed. It is vital to distinguish that we are not doing complex trauma processing here, and pre-assessments enable workers to identify risks, strengths, and readiness for the group and refer people for further work if needed.

Additionally, for the activity, we propose to provide a small, laminated card that reminds parents of the main questions being addressed and asks them to keep in mind the main things they want us to know within a set time.

This provides structure, time limits, and emotional containment while still enabling the very powerful therapeutic purpose of being heard and witnessed by peers who can relate to their experience. This can be a very moving and cathartic activity, and facilitators provide support, debriefing, and regulation throughout.

### ACTIVITY: MEMORY JARS

Children fill a jar with coloured salt, representing layers of memory of the deceased person. This activity involves rubbing plain salt with chosen pastel colours to colour the salt, labelling each colour with a memory of their parent/carer. They will discuss their colour choices and memories with the rest of the group.

#### Components

5. Memorialising and continuing bonds
6. Meaning-making
7. Parental grief facilitation
8. Future planning

#### Theoretical Underpinning/ Conceptual Background

The activity helps consolidate memory and bonds and makes the loss visual. Grief involves bereaved people moving from a physical and emotional closeness to the person who died to a position of being more separate and engaging in an ongoing but changed relationship with them. Strobe and Schutt in (Traher and Breen, 2024). Throughout these highly complex relational states, the use of a transitional object has been demonstrated to be supportive. (Wakenshaw, 2020).

#### Proposed changes to this activity of the Weekend Grief Program for Families

The memory jar activity is proposed to be deleted from the caregiver's program. Caregivers will be told of this activity and encouraged to ask the children to share their memory jars with their caregivers.

### ACTIVITY: EXPLORING DIFFICULT FEELINGS

This will promote their mutual expression and memory-making and enhance the role of the caregiver in shaping children's life experiences and facilitating their grief reactions. It also provides the caregivers time for personal reflection or to strengthen their connections with each other, which is important when we consider the caregiver's well-being through the program and their feedback. Indicative of the opportunity to allow children to "leap in and out" of the puddles of grief work, this activity sees the children and team leaders, as a group, write on a big paper the difficult, hard, angry, sad, confused array of emotions they may have.

The children take the paper outside, yell, and throw mud at it. This exercise is a robust physical and cathartic expression of emotion, supported by the team leaders who encourage them to express hard feelings and let them go safely.

#### Components

1. Grief psychoeducation
2. Building emotion identification and regulation skills

#### Theoretical Underpinning/ Conceptual Background

Some children may have had a difficult relationship with their deceased person, and it is valid to express all feelings. Stokes (2021) refers to this as having a "flexible feelings muscle": *"This flexible feelings muscle helps you to respect your feelings, control them and, importantly, NOT lock them away."*

#### Proposed changes to this activity of the Weekend Grief Program for Families

The flipping your lid concept will be explained to the children by a team leader using handouts resourced. The children will then draw on people cutouts where they may feel emotions. For example, draw a butterfly in the stomach region to reflect butterflies in your tummy.

This forms the first part of us trialling digitised and 'take home' resources to modernise our program. Outcomes and impact will be monitored and used for iterative changes (where relevant) for other storytelling / activities. A

digital resources library will be built and phased in as part of a refined toolkit for caregivers. The current toolkit has been updated as part of this program to ensure only core and currently relevant information exists for 2024. This toolkit and our data sets will now be assessed annually to identify gaps.

### ACTIVITY: QUESTIONS FOR THE DOCTOR

Throughout the weekend, children are given the opportunity to write questions on small slips of paper, which are placed in boxes for the doctor. They often ask very pertinent and poignant questions about the death of their deceased family member, the illness, the funeral, rituals, suicide, bodily functions, etc. A general practitioner (GP) or pediatrician visits and addresses the children in the mixed-age group with the team leaders and volunteers present.

#### Components

1. Grief psychoeducation
3. Cognitive coping and restructuring
4. Grief and trauma processing

#### Theoretical Underpinning/ Conceptual Background

Children's needs after bereavement were evident in the questions they asked about how to cope with and manage difficult emotional experiences, demonstrating their need for emotional support, including co-regulation, validation and reassurance. (Joy, Staniland, Mazzucchelli, Skinner, Cuddeford & Breen, 2023).

### ACTIVITY: FIRST AID BOXES

Children make a small cardboard box and put in written suggestions for help-seeking, problem-solving, and looking after their mental and physical health. These ideas are tools to use in times of stress.

#### Components

1. Grief psychoeducation
8. Future planning

#### Theoretical Underpinning/ Conceptual Background

This mental health first aid kit reminds children of what they need to look after themselves when they may feel overwhelmed or on difficult days. (Winston's Wish—web page; resources.)

### ACTIVITY: PHYSICAL PLAY

On both days, there are activities engaging the children in play and energetic outdoor activities supported by volunteers and team leaders. These activities provide the opportunity for energy release, extending capabilities, peer support and encouragement, fun, challenge, and achievement. (Weiskittle & Gramling, 2018).

#### Components

9. Engagement of social support

#### Theoretical Underpinning/ Conceptual Background

Play and recreation in an outdoor setting form the framework for all children's bereavement camps. Two camps offer relief from grief through play, opportunities for children to express their grief and process it through arts and crafts, music, play and group work. (Clute & Kobayashi, 2013).

### ACTIVITY: CANDLE LIGHT CEREMONY

On Saturday late afternoon or evening, caregivers and children in separate groups light a candle for the deceased person. They sit in a big circle with team leaders and volunteers listening to a song. Everyone speaks about their experience and memories in turn as they light their candle. This can be an emotional experience for all.

#### Components

- 2. Building emotion identification and regulation skills
- 5. Memorialising and continuing bonds
- 7. Parental grief facilitation
- 9. Engagement of social support

#### Theoretical Underpinning/ Conceptual Background

Grief rituals have many potential benefits, such as allowing one to accept the loss, process emotions, increase one's sense of control, and maintain a continuing bond with the deceased. (Young, 2023).

Moreover, "the social aspect of ritual and the sense of community during rituals has been argued to be one of the key cornerstones of rituals in our society. Conducting ritual action together, especially when the ritual is associated with pain and grief, is argued to create a sense of cohesion and solidarity. Having others to share one's grief with, as well as going through an emotional ritual together, is experienced as comforting." (Wojtkowiak, Lind & Smid, 2021)

Music played at the Candlelight ceremony is selected from Pause to Listen: Beats of Support. This is a Spotify playlist. 140 songs were generated via Instagram on 2023 Children's Grief Awareness Day.

### ACTIVITY: WOOL WEB

On the last day, there is the opportunity for children and team leaders in their separate groups to form a circle, and using skeins of wool, they throw it at another participant, expressing an appreciation of or gratitude for an aspect of that participant. This supports social cohesion, reduces isolation, facilitates self-awareness, provides opportunities to connect with others and allows everyone to be seen, heard and validated.

#### Components

- 8. Future planning
- 9. Engagement of social support

#### Theoretical Underpinning/ Conceptual Background

According to Voci, Veneziana and Fucchi (2021) gratitude enhances self-acceptance, environmental mastery, positive relations, purpose in life and personal growth.



### ACTIVITY: SUPPORTING CHILDREN THROUGH GRIEF

In this session, parents watch a video by Donna Schuurman of the Dougy Centre, discussing how parents may be aware of and support their children's grieving. Parents have often said they attend camp to help their children, and they ask for strategies and tools. Being able to have conversations about how to understand behavioural signals, recognise grief and loss and attune to their children helps normalize the lifelong processes and shifting needs of parents and children as they navigate this space. They also receive a take-home pack of resources and information.

#### **Components**

1. Grief psychoeducation
3. Cognitive coping and restructuring
7. Parental grief facilitation
8. Future planning
9. Engagement of social support

#### **Theoretical Underpinning/ Conceptual Background**

Bergman, Axberg, and Hanson (2017) state that "support for the children's caregivers strengthens their own health and their capacity to support their children. A supportive parent is a protective resource for parentally bereaved children." Kentor and Kaplow (2020) also state: "Given that caregivers can promote adaptive child grieving, comprehensive grief treatments should incorporate surviving parents and other caregivers."

Interventions include:

- working with parents and caregivers to discuss their mental health,
- working with parents and caregivers to discuss their parenting skills
- improving parent/caregiver-child communication
- joint activities for children and their caregivers
- individual family meetings

#### **Proposed changes to this activity of the Weekend Grief Program for Families**

Emotional regulation will be further explained by playing a video of The Hand Model of the Brain (Dr Dan Siegel) at the Caregivers' Weekend Program.

It will be emphasised that support at WGPF can only be generic and not focused on specific family issues (time constraints and privacy concerns). Information regarding free counselling and online lounges available from Wombat's Wish counselling team will be given, and a handout regarding details supplied. Thus, providing the opportunity for families to address specific issues more thoroughly.

Additionally, a question box will be placed prominently within the room, and caregivers will be informed at the start of the weekend that they may ask questions of the Clinical Team at any time. Questions will be answered within the group or by phone or email after the weekend.

### ACTIVITY: SELF CARE

An activity that blends into the above is a discussion in the parent group around tools for self-care and self-compassion. This recognises that when parents are supported, have resources, and can notice and address their needs, strengths, skills, and self-regulation, they will be able to parent better.

One example of a self-care activity is the mindfulness walk. When time allows, facilitators will take the parents/caregivers on a walk during which they stop and practice mindfulness techniques, such as breathing, counting five things they see, listening to the sounds of the bush, and experiencing through their senses. This is a grounding exercise they can practice when anchoring themselves in times of stress.

#### Components

1. Grief psychoeducation
2. Building emotion identification and regulation skills
3. Cognitive coping and restructuring
8. Future planning
9. Engagement of social support

#### Theoretical Underpinning/ Conceptual Background

As mentioned above, in supporting children through grief.

#### Proposed changes to this activity of the Weekend Grief Program for Families

A handout as follows will be read and discussed:

*"It is important for caregivers to have realistic expectations about grief facilitation, in that this is not meant to be one brilliant, sensitive, and perfect conversation. Instead, facilitating good grieving is an ongoing, lifelong process involving many different conversations and encounters. Caregivers should not assume that they only have one chance to "get it right." initial conversations with their child might just involve getting their mutual "toes wet" and feeling more comfortable talking about the deceased. Caregivers should be patient with themselves, and even if a conversation does not go as well as they had hoped, they do not need to panic or conclude that they have somehow harmed their child. It can be helpful for caregivers to be transparent with their child about how it is often difficult to talk about these issues, that they are trying and will keep trying, and that they may need to help each other become more comfortable. Finally, caregivers should remember that grief facilitation does not necessarily have to involve "planned conversations" but can also involve more spontaneous shared moments in which they laugh together about a funny memory or engage in an activity they had previously done with their loved one. Creating new, happy memories, while also remembering and cherishing their memories of the deceased, is an essential step in the grief facilitation process." (Kaplow et al. 2023, p.35)*

Additionally, the research team decided to 're-vamp' handouts given to update and minimise the amount of material. Previous material was deemed too much and outdated, and given that the counselling team is available to offer specific support, such detailed material is no longer needed.

### ACTIVITY: TAKE AWAY AND LEAVE BEHIND

A final activity for caregivers is to reflect on what they will take away from the weekend experience.

#### Components

- 6. Meaning-making
- 8. Future planning

#### Theoretical Underpinning/ Conceptual Background

Many grief interventions include meaning-making opportunities, designed to help participants identify lessons learned from the grief experience. (Kentor & Kaplow, 2020).

This activity also mirrors the dual processing model of coping and grief. (Strobe & Schutt, 1999).

### ACTIVITY: FRIENDSHIP TREE – LEAVES OF APPRECIATION

Throughout the weekend, anyone at WGPf can write something positive about another participant on a paper leaf (placed on a tree), be it staff, team leader, volunteer, child, or adult. This encourages gratitude and ensures acknowledgement of efforts, contributions and achievements

#### Components

- 7. Parental grief facilitation
- 9. Engagement of social support

#### Theoretical Underpinning/ Conceptual Background

(Voci et al, 2018).

### ACTIVITY: FRIENDSHIP TREE – CELEBRATION AND GOOD BYE CEREMONY

On Sunday, the WGPf team leader provides a certificate of completion and mementos of their weekend (a small furry toy wombat for children). The team leaders and volunteers speak about each child's efforts, endeavours and gains from the weekend.

#### Components

- 7. Parental grief facilitation
- 8. Future planning

#### Theoretical Underpinning/ Conceptual Background

Kaplow, Layne, Pynoos and Saltzman (2023) describe this as "having a good goodbye". The purpose is to: Instill confidence in participants and re-affirm that they have the skills to accomplish their goals and meet future challenges to process thoughts and feelings regarding finishing with the WGPf and leaving the team and other families to increase tolerance for separations.

### ACTIVITY: FRIENDSHIP TREE – RELEASE OF DOVES

This is the final all-family activity. Participants write a message, and doves are released from the oval in tribute to the person who has died.

#### **Components**

- 5. Memorialising and continuing bonds
- 7. Parental grief facilitation
- 8. Future planning

#### **Theoretical Underpinning/ Conceptual Background**

(Klass et al, 1996); (Kaplow et al, 2023)

**Acknowledgment: Wombat's Wish gratefully acknowledges the Geelong Community Foundation's support of the Research Project**



**Geelong  
Community  
Foundation**

Giving. Forever.



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## Residential Family Weekend programs: 14

2021	Burnside (Anglesea)	March	17 children
	Burnside (Anglesea)	November	14 children
	Burnside (Anglesea)	December	18 children
2022	Burnside (Anglesea)	March	14 children
	Corop	27 <sup>th</sup> May	14 children
	Corop	30 <sup>th</sup> September	14 children
	Burnside (Anglesea)	11 <sup>th</sup> November	14 children
2023	Burnside (Anglesea)	3 <sup>rd</sup> March	8 children
	Burnside (Anglesea)	17 <sup>th</sup> March	13 children
	Grantville	24 <sup>th</sup> June	16 children
	Burnside (Anglesea)	19 <sup>th</sup> August	11 children
	Burnside (Anglesea)	3 <sup>rd</sup> November	13 children
	Burnside (Anglesea)	10 <sup>th</sup> November	14 children
2024	Burnside (Anglesea)	22 <sup>nd</sup> March	12 children
	Corop	17 <sup>th</sup> May	11 children
	Grantville	21 <sup>st</sup> June	10 children
	Wyuna	16 <sup>th</sup> August	8 children
		<b>TOTAL</b>	<b>211 children</b>

Families attended: 120

Children attended: 211

Children's ages (range) at the family program: 4 - 16 years

Median age: 9 years

Mean age: 9.1 years

### Time since the death of parent/carer

Range: 2 months → 11 years + 6 months,

Median time since death: 2 years and 1 month

Mean time since death: 1 year, 10 months

95% Confidence intervals: 2 years, 4 months → 3 years, 4 months

### Child's age at death of parent/carer

Range: 1 month old → 15 years + 8 months,

Median age at death: 6 years and 7 months

Mean age at death: 7 years

## Family data:

### Relationship with children:

Deceased Parent	Father / Father Figure	94 families (78.3%)
	Mother	26 families (21.7%)
	Father	89
	Mother	26
	Step-Father	2
	Grandfather (father figure)	2
	Brother (father figure)	1

### Relationship with Deceased

Children (n = 211)	Father / father figure	166 children (78.7%)
	Mother /Mother figure	45 children (21.3%)
Boys (n = 106)	Father / Father Figure	86 boys (81.1%)
	Mother	20 boys (18.9%)
Girls (n = 105)	Father / Father Figure	80 girls (76.2%)
	Mother / Mother Figure	25 girls (23.8%)

### Cause of death:

Cause of death	<b>Cancer</b>	31 (25.0%)
	- Bowel / rectal cancer (8)	
	- Not specified (7)	
	- Skin / Melanoma (4)	
	- Oesophageal / GI (4)	
	- Brain (2)	
	- Leukaemia (2)	
	- Breast (1)	
	- Lung (1)	
	- Ovarian (1)	
	Suicide	26 (21.7%)
	Cardiac (arrest/attack / pulmonary embolism/myopathy)	23 (19.2%)
	Other (x1 per category): Aortic dissection / Asthma / Autoimmune disease / Choking / Epilepsy / Fall (ladder) / Lung transplant rejection / Pneumonia / Stomach Ulcer / Stroke / Sudden medical event / Surgery complications / Tuberculosis)	13 (10.8%)
	<b>Accident</b>	11 (9.2%)
	- Car / Motorbike / Truck / Bike (8)	
	- Workplace (3)	
	Drug-related (overdose / related)	4 (3.3%)
	<b>Murder</b>	3 (2.5%)
	Brain / Cerebral Aneurysm	2 (1.7%)
	Liver failure	2 (1.7%)
	Pancreatitis/alcohol-related	2 (1.7%)

## Gender of (primary) carer attending family program:

2021 (3x family programs)	Female carer: 16 (80%)	Male carer: 4 (20%)
2022 (4x family programs)	Female carer: 32 (97%)	Male carer: 1 (3%)
2023 (6x family programs)	Female carer: 37 (86%)	Male carer: 6 (14%)
2024 (4x family programs)	Female carer: 16 (67%)	Male carer: 8 (33%)

## Carer attending the program (Relationship of carer to child):

Carer attending program	Mother	89 (74.2%)
	Father / Step Father	19 (15.8%)
	Grandparent	8 (6.7%)
	Aunt / Uncle	3 (2.5%)
	Guardian (best friend of dec.)	1 (0.8%)

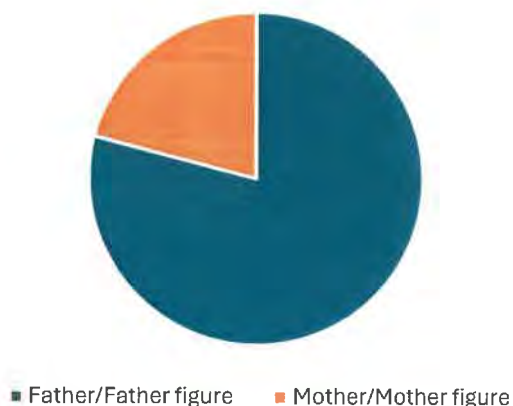
## Relationship of carer with deceased:

Relationship of carer to deceased	Partner	75 (62.5%)
	Ex partner / Separated	29 (24.3%)
	Adult child	6 (5%)
	Parent	5 (4.2%)
	Other (Friend / Carer / Inlaw)	3 (2.5%)
	Sibling	2 (1.7%)

## Had child or carer accessed bereavement help before camp? (recorded as Yes/No/Unclear):

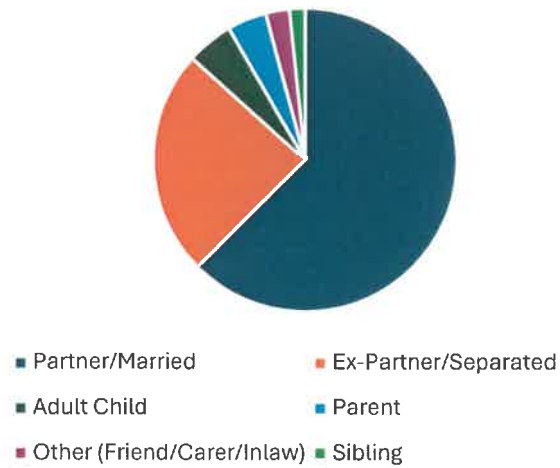
	Yes	No	Unclear
Child	120 (56.9%)	74 (35.1%)	17 (8%)
Carer	62 (51.7%)	31 (25.8%)	27 (22.5%)

Relationship: Deceased with child

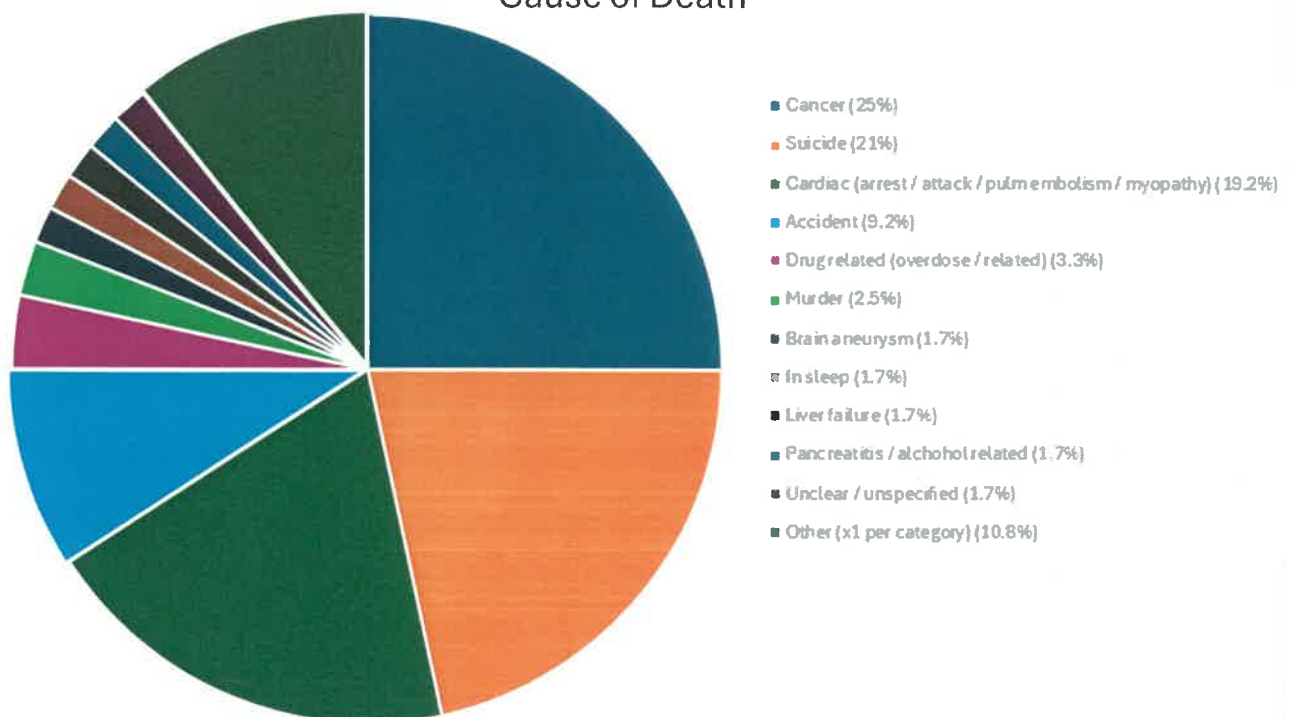




## Relationship: Carer with Deceased



## Cause of Death



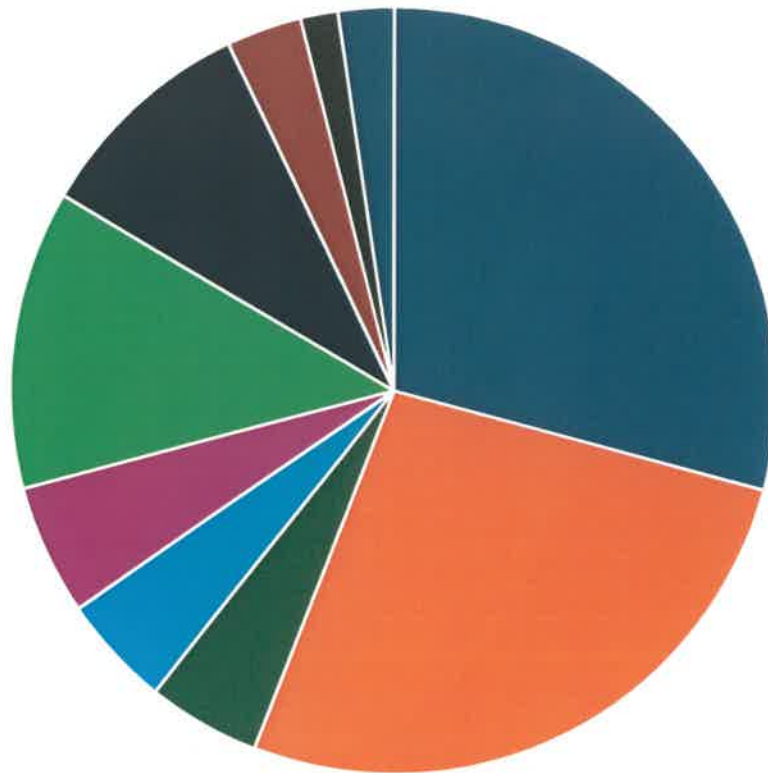
## Family Demographics by Suburb

Airport West	1	Alexandra	1	Alfredton	1	Altona	1	Altona Meadows	1
Ashwood	1	Bacchus Marsh	1	Ballarat	1	Bannockburn	1	Beaconsfield	1
Beaumaris	1	Bell Park	1	Belmont	2	Bendigo	1	Berwick	1
Breakwater	1	Broomfield	1	Burwood	2	Camberwell	2	Campbells	2
Canadian	2	Carrum Downs	2	Chelsea	2	Cheltenham	1	Chewton	1
Clifton Springs	3	Clyde North	1	Cobram	1	Colac	3	Corio	1
Cranbourne East	1	Curlewis	1	Dandenong	1	Deerite	1	Eaglehawk	1
East Geelong	1	Echuca	1	Epping	1	Fairy Dell	1	Forret	1
Frankston	1	Gembrook	1	Gladstone Park	2	Golden Square	1	Greensborough	1
Hadfield	1	Highton	1	Hoppers Crossing	2	Keilor East	1	Kialla	1
Kingsville	1	Lakes Entrance	1	Lara	3	Leopold	2	Lockington	1
Maffra	1	Marshall	1	Meadow Heights	1	Mill Park	1	Miners Rest	1
Mooroopna	1	Mordialloc	1	Murtoa	1	Napoleans	1	Newtown	2
Norlane	1	North Geelong	1	Ocean Grove	8	Officer	1	Pakenham	2
Portland	1	Portland West	1	Red Hill	1	Riddles Creek	1	Rosanna	1
San Remo	1	Sassafras	1	Shepparton	1	Somerville	1	St Albans Park	1
Strathdale	1	Strathfieldsaye	3	Sunbury	1	Teesdale	2	Timboon	1
Torquay	2	Warrnambool	1	Werribee	2	Whittington	1	Winchelsea	1
Wonthaggi	1	Wyndham Vale	1	Kyabram	3				

## Family Demographics by Region

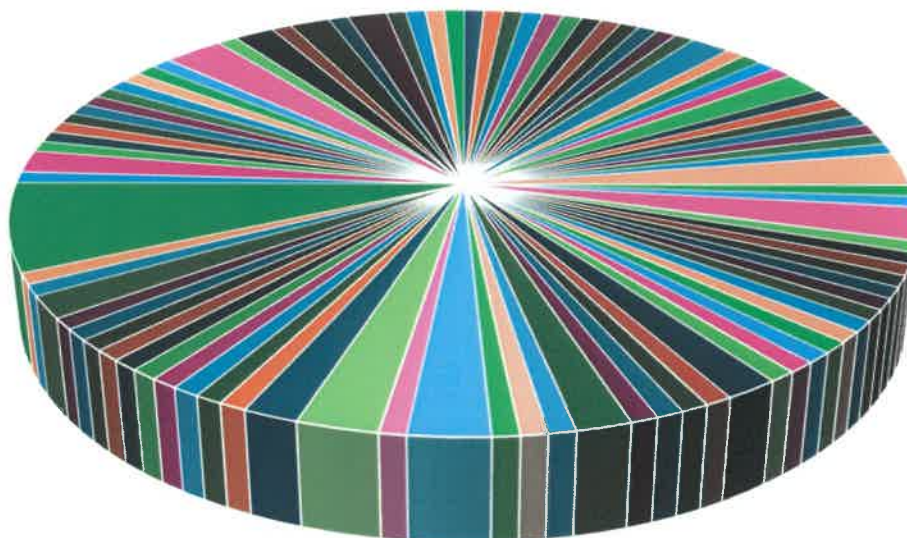
Melbourne	37	Geelong and Bellarine	34	Yarra Valley	6
Mornington Peninsula	6	Colac and Surrounds	7	Bendigo	16
Goulburn Valley	12	Ballarat	4	Bass Coast	2
Horsham and Surrounds	3				

Family Locations



- |                         |                         |                               |
|-------------------------|-------------------------|-------------------------------|
| ■ Melbourne             | ■ Geelong and Bellarine | ■ Yarra Valley and Dandenongs |
| ■ Mornington Peninsula  | ■ Colac and Surrounds   | ■ Bendigo                     |
| ■ Goulburn Valley       | ■ Ballarat              | ■ Bass Coast                  |
| ■ Horsham and Surrounds |                         |                               |

## Per Suburb



■ Airport West	■ Alexandra	■ Alfredton	■ Altona	■ Altona Meadows
■ Ashwood	■ Bacchus Marsh	■ Ballarat Central	■ Bannockburn	■ Beaconsfield
■ Beaumaris	■ Bell Park	■ Belmont	■ Bendigo	■ Berwick
■ Breakwater	■ Broomfield	■ Burwood	■ Camberwell	■ Campbells
■ Canadian	■ Carrum Downs	■ Chelsea	■ Cheltenham	■ Chewton
■ Clifton Springs	■ Clyde North	■ Cobram	■ Colac	■ Corio
■ Cranbourne East	■ Curlewis	■ Dandenong North	■ Deerite South	■ Eaglehawk
■ East Geelong	■ Echuca	■ Epping	■ Fairy Dell	■ Forrest
■ Frankston	■ Gembrook	■ Gladstone Park	■ Golden Square	■ Greensborough
■ Hadfield	■ Highton	■ Hoppers Crossing	■ Keilor East	■ Kialla
■ Kingsville	■ Kyabram	■ Lakes Entrance	■ Lara	■ Leopold
■ Lockington	■ Maffra	■ Marshall	■ Meadow Heights	■ Mill Park
■ Minors Rest	■ Mooroopna	■ Mordialloc	■ Murtoa	■ Napoleans
■ Newtown	■ Norlane	■ North Geelong	■ Ocean Grove	■ Officer
■ Pakenham	■ San Remo	■ Portland West	■ Red Hill	■ Riddles Creek
■ Rosanna	■ Strathdale	■ Sassassfras	■ Shepparton	■ Somerville
■ St Albans Park	■ Torquay	■ Strathfieldsaye	■ Sunbury	■ Teesdale
■ Timboon	■ Wonthaggi	■ Warrnambool	■ Werribee	■ Whittington
■ Winchelsea		■ Wyndham Vale		





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