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## **Creative Accompaniment: A Working Model for Grieving Children and Adolescents – Example of Good Praxis**

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Plamienok, n.o. as the first organization in Slovakia established and started mobile hospice for children in need of palliative care. This action could be considered as a milestone that made a considerable impact in the development of paediatric palliative care in our region. Our organization also offers education to health care professionals (doctors, nurses, students) working in the field of palliative care. Families after the loss of a child often need professional help to process this extremely demanding life situation. To give an answer to families' needs, Plamienok n.o. opened a Grief Centre in March 2011. Children, adolescents and parents being in their grieving process are accompanied by professionals. One of the very specific activities Plamienok n.o. offers to its clients are therapeutic summer camps for children who lost their close relative. The camp is important part of the recovering process and gives an opportunity for therapeutic growth by sharing experiences related to losses, using peer support in context of camp activities.

In our paper we focus on the model of Creative Accompaniment developed by Prof. Rubén Bild (Plamienok's Honorary President and clinical supervisor). Also we illustrate how monitors trained in Creative Accompaniment used this model during Plamienok's therapeutic summer camp as an example of good praxis.

In this paper we will introduce the book "Ayu and Grof in Land of Volcanoes" written by psychotherapist *Iván Gómez* (psychotherapist and director of Plamienok Grief Centre) to show how the story can be used as a therapeutic tool in a summer camp.

## *Loss of close one*

Loss of a close person queues between most stressful situations one could challenge. Loss of a child is one of the most devastating life experiences any parent could challenge, siblings are affected in no less extent. The memory of the child stays always present. Death of a child affects as well siblings. Grief after the death of child is a lifelong process. Sorrow is present after many years especially during situations as Christmas or birthday of lost child. Process of grieving is universal, but has its individual, personal tone. Grief consists of different dimensions beginning with despair, blame, anger, panic detachment, disorganization (Hogan & Schimdt, 2002). Many times parents question themselves if they have done enough for saving their child (Cacciatore, 2010). There are studies concluding that death of a child could cause negative consequences to parent's health and well being (Raitio et al., 2014).

Grief occurs initially before loss of loved one, at the threat of loss due to diagnosis and fully emerges after loss. As mentioned before grief is connected with mix of painful emotions. *Potter and Perry* (2005) remark actual purpose of the grief process- acceptance of the loss, to live out the sorrow, coping with loss at least regaining emotional sources. Researches dedicated to bereavement process identified various stages of grief. Despite several names all refers to similar reactions, similar emotions - denial, anger, depression, bargaining and acceptance. (Kübler-Ross, 1997; Potter & Perry, 2005). Another researches stated that bereavement consists of four periods: shock and sensitivity=numbing, yearning=missing= searching, disorganization, and reorganization (Wheeler, 1996; Ross-Alaomalki, 1990). The length of these periods is strongly individual, whole process lasts 12-16 months (Sirki, Saarinen Pihkala & Hovi, 2000; Wheeler, 1996). *Sirki* and his colleagues (2000) found parental differences, mothers in some cases grieve longer than fathers. But as it is said by *Kübler-Ross* (1997) definite time of bereavement period is strongly individual and cannot be stated. study of *Murphy and Johnson* (2003) showed that 12 months after death of a child 12% of parents had found meaning in the child's death, 60 months after it was 57%. One of the most important coping factor is social support (Cacciatore, 2010; Barrera et al., 2007). Parents who have found meaning in the death of their child manifested connections with people (Wheeler, 2001) In *Davies* and his colleagues study (1998) mothers showed difficulties to deal with all emotions connected to grief, help and support offered by professionals has shown to be significant factor in bereavement process and adaptation to the loss. *Murray* and his colleagues (2000) in experimental study offered intervention program to parents who have lost their babies. Assessment process was made at 4 to 6 weeks, 6 months, and 15 months after the loss. It was revealed that professional intervention has been effective in reducing distress and negative psychiatric outcomes. Positive effect was too in gaining and improving parental coping strategies and in improving marital quality.

## *Grief in children*

Another members strongly affected by child's death in the family are siblings. Children usually reacts to grief with feelings similar to ones of adults, difference of grief reactions is in their manifestation and duration, they cannot be seen from perspective of adult's bereavement (Osterweis, Solomon & Green, 1984; Webb, 2002). As it is stated by *Corr* (2010) any loss could be a starter of grief reaction in children. The first experience with loss of the loved one children could face is grandparent's death. This grief experience may provoke increase in death anxiety and despair in children and adolescents aged 11-18 (Ens & Bonds, 2005) Less children face the loss of parents or sibling. Such loss is connected with a risk for negative psychological outcomes. *Nguyen and Scott* (2013) mentioned outcomes like mental health problems (depression, anxiety, posttraumatic stress symptoms), anger, guilt, peer isolation, loneliness, suicidal ideation, lower self concept and self esteem. The mental health effects are mostly short-term, yearning and depression are most frequent responses before acceptance and in normally bereaved individuals peak of these moods tends to occur approximately 6 months after loss. As child or adolescent integrates his loss into his worldview, mental health problems decrease and comes period of restructuration and gaining stability again. Unfortunately there is a negative potential in some individuals for long lasting intrusive effects on the personality development and functioning of the child. Children and adolescents presenting depressive symptomology tends to have recurrent depressive symptoms later in young adulthood (Montague et al., 2008).

With specificity of childhood on mind researchers focused how children experiencing death of a loved one understand death at all. From developmental perspective, children around six may be able to understand irreversibility and permanence of death (Hunter & Smith, 2008). Younger children are believed to experience grief around three years of age, of course their reactions are rather indirect, expressed through thumb sucking, bed wetting, and clinging to the surviving parent if the loved one that is lost is parent (Bowlby, 1969; Christ, 2000).

Another area of interest was understanding how children learn about death and how can bereavement process be supported. Media such as comic strips, popular animated movies and children's literature can be very useful in helping children to understand death and to support bereavement process.

## *Plamienok n.o.*

Plamienok n.o. was established in 2003 as a partner organization of the civic association Plamienok. Professional team of the organization takes care of terminally ill children (from birth to attain 18 years of age) and their families in their own home environment (Plamienok, 2003).

The team involves experts from various supportive areas of medical care, especially doctors, nurses, psychologists and as well social workers, special educators and play therapists experienced in the treatment and care of these children (Jasenková & Mikesková, 2005). In 2015 Plamienok n.o. provided support to 38 children, 93 parents and adult relatives, 33 siblings of a child with an incurable disease.

Figure 1. number of clients of Plamienok n.o. in 2015

<b>Number of children in care</b>	38
<b>Number of adults in care</b>	93
<b>Number of siblings in care</b>	33

(Source: *Plamienok – výročná správa 2015*)

Plamienok n.o. focuses its assistance on three main areas:

- Children's home hospice care,
- Counselling activities,
- Vocational education activities.

*Children's home hospice care* is designated to children with incurable disease. Palliative care is almost fully provided at home except some very most critical issues that need to be solved in hospital care. The aim of palliative treatment and care provided by Plamienok n.o. is to alleviate physical pain and offer possibilities for the child to spend the last days at home. Professional care is focused on providing medication, rehabilitation, and other activities. Particular importance is given to comprehensive approach. This includes not only medical care, but also psychological, social and spiritual care as a holistic approach. Children's hospice Plamienok n.o. provides care to clients with different diagnoses. Approximately 40 percent are children with cancer, other diagnoses are quite heterogeneous – congenital developmental defects, severe metabolic disorders and others (Jasenková, 2013). Sometimes it is hardly possible to clearly determine the prognosis of child's illness. In such cases child is taken into hospice care for a transitional period of three to six months (Plamienok, 2014). *Grief Counselling Centre Plamienok n.o.* focuses on three categories of clients:

- families that have lost a close person for various reasons,
- children and adolescents who have lost a close person,
- parents after the loss of a child.

Counselling is provided by a team of experts – psychologists and psychotherapists. Individual or group sessions together with therapeutic weekend meetings and even therapeutic camps are major forms of help provided in Grief Counselling centre (Plamienok, 2016a).

*Education Center Plamienok n.o.* was established in 2007 under the auspices of the President of the Slovak Republic Ivan Gašparovič. Since its beginning, centre gives education to professionals from various helping professions and also students, whether it's half-year Bereavement Course,

lectures for university students *Principles of treatment and care of a terminally ill child and family in a children mobile hospice* or educational workshops *Creativity in nursing in paediatric palliative care* (Plamienok, 2016c).

Professional work in the Plamienok n.o. is based on a model of “*creative accompaniment*”. Author of this concept is *Rubén Bild*, honorary president of Plamienok n.o.. This model integrates Gestalt theory principles, Psychodrama and Psychodynamic principles. One of the *creative accompaniment* goals is to offer space in which family members can examine and clarify the issues emerged by approaching child's death (Bild & Gómez, 2014:30, 32). The model is based on the assumption that creativity belongs to the most important expression of human existence – helps to free us from an automatic responses triggered by usual options (Bild & Gómez, 2014:27). Creativity can be used in the interaction between professionals and patients, and that is what is important in this process because repeated phrases deny the importance of communication (Bild & Gómez, 2014:27).

Chart 1. stages of the creative accompaniment

Model of *creative accompaniment* consist of eight stages:

1.Strategy /What do I see? What do I feel? What will I do?/ <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2.The initial profile and strategy <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
3.Forming a bond <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
4.Availability <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
5.Confrontation <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
6.Constructing a space <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
7.Closing the bond <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
8.Final profile and evaluation

(Source: Bild & Gómez, 2014)

*1. Strategy. What do I see?* – This question recalls the importance of this issue to take every situation with a neutral stance. In the case that the family, children or adolescents see in our attitudes and experiencing peace and security, it is easier for them to express and share their suffering (Bild & Gómez, 2014).

*What do I feel?* – The second question helps us to focus on our own apperception and the intensity of how we experience a particular situation. Despite the recommendations of the previous questions- importance to

accept any situation with a neutral stance, it is important not to suppress emotions and feelings that arise in particular situation, because this could cause an inability to link with suffering and vulnerability of a particular family (Bild & Gómez, 2014).

*What will I do?* – The third and last question relate to preparation of intervention strategy (Bild & Gómez, 2014).

2. *The initial profile and strategy.* Second stage aims to create a basic profile of the family, which includes a history of the family (family members, mutual relations) and establishing a hypothesis (Bild & Gómez, 2014).

3. *Forming a bond.* Essential part of this stage is to assure the family, child and adolescent, that interviews are always confidential. This helps family members to be open, make the opportunity to complain, to present concerns and fears (Bild & Gómez, 2014).

4. *Availability.* Working with terminally ill child or a child, adolescent, family after the loss of a loved one demands essential ability to be available. Despite ambivalent feelings (hatred, disgust, pity, desire to help) still be available to person we are trying to help (Bild & Gómez, 2014).

5. *Confrontation.* Main concern of this stage is to eliminate authoritarian position "I'm a professional". Behind this phrase are often hidden uncertainty and fear, and our aim is to eliminate this inappropriate behaviour and replace it with a more effective approach as is creativity (Bild & Gómez, 2014).

6. *Constructing a space.* We can talk about this stage if all previous stages are conducted in harmony. Result should be a strong bond between professionals and clients on the same emotional level, to be together, regardless age and social status (Bild & Gómez, 2014).

7. *Closing the bond.* Main concern is to farewell with the client. The farewell does not take the verbal form, and often in this situation is very appropriate to use the technique of silence. "Saying goodbye is not just shown in words, but also by sharing the time that remains and being able to find some answers to vital questions that have arisen for both the family and the team" (Bild & Gómez, 2014:37).

8. *Final profile and evaluation.* The last stage is essential for several reasons. One is the assessment of our own work in a particular case from the perspective that helps us in the future to avoid mistakes (Bild & Gómez, 2014).

Model of *creative accompaniment* is used in the *children home hospice care Plamienok n.o.*, also in the *Education Center Plamienok n.o.* and as well as in *Grief Counselling Centre Plamienok n.o.* and its various activities. One of them is therapeutic summer camp for children and adolescents who lost a close person which is targeted in our paper.

*Therapeutic summer camp for children and adolescent who lost close person: "Call of the Wilderness"*

Grief Counseling Centre Plamienok n.o. organizes therapeutic summer camps (for the past six years) for children and young people who lost their loved one: mother, father, brother or sister (Plamienok, 2016c). Despite their age, these children are facing a very challenging time full of pain, which they cannot be spared, no matter how much the adults try. They often face exclusion from their peer group. Therapeutic summer camp brings them opportunity to meet children with similar experience and make them feel they are not alone. Support from the other children and their presence help them to cope with the loss. This takes place under the supervision of our specialists and trained volunteers providing to children various programme including sports, creative and therapeutic activities and games.

This year in July 2016 we organized a therapeutic summer camp called "Call of the Wilderness". Totally 57 children age 6 to 18 years attended. Our aim is to give to all children and a young people the opportunity to experience solidarity, regardless of whether their family can afford it or not. Therefore, camp participation is free of any charges. This year team consisted of two psychologists, one doctor and one play therapist as a staff of Plamienok n.o. and 11 trained volunteers under the supervision of the director of Grief Counseling Centre – Iván Gómez (Plamienok, 2016b).

Figure 2. Number of children and adolescent, staff and volunteers Plamienok n.o. on therapeutic summer camp

<b>Number of children on therapeutic summer camp 57</b>	
<b>2016</b>	
<b>Staff</b>	<b>5</b>
<b>Volunteers</b>	<b>11</b>

(Source: Plamienok – Letné terapeutické tábory, 2016b)

One of the important therapeutic techniques during summer camp was group sharing time (children were divided according to age). In these groups we worked with mix of interview and various expressive techniques – creative methods taken from art therapy, drama therapy, bibliotherapy. We tried to create a space for children and adolescent to share their own losses (feelings which bring loss, search for hope, sources). One of the important techniques was therapeutic book: Ivan Gomez "The Adventures of Ayu and Grof: The Land Of Volcanoes". We worked with a story of Ayu – the 6 years old girl, who lost her mother; she with her true friend Labrador Grof started out to a journey to find answers to her questions (Gómez, 2016). This story is a symbolic depiction of creative model of accompaniment.

## *Illustration of uses of therapeutic book "Iván Gómez: The Adventures of Ayu and Grof: The Land of Volcanoes"*

We would like to present how this book can be used in therapeutic work (in accompaniment) with child, adolescents and families after loss of a close person.

- *„I am Ayu. I am six years old. Grof is my best friend.“* (Gómez, 2016)
  - ACTIVITY: Introducing ourselves
  - Instruction: Each member of group say loudly his/her name and make a gesture or some movement, which characterize him/her.
- *„Why adults lie to children?“* (Gómez, 2016)
  - ACTIVITY: Interview
  - Interviews on theme: What do you think, why adults lie to children?
  - Have I lied before? Why?
- *„In the morning we used to go together to the market. At night, she sat by my bed cuddling me and reading me a story until I fall asleep.“* (Gómez, 2016).
  - ACTIVITY: Drawing
  - Instruction: Draw your nice memory of person you have lost.
- *„After lunch I like to lay on the grass with Grof and look at the clouds“.* (Gómez, 2016)
  - ACTIVITY: Observing clouds
  - We are outside observing shapes of clouds, guess and say what they reminds us.
- *„Your fear will disappear as a soothing light grows in your heart.“* (Gómez, 2016)
  - ACTIVITY: Writing
  - Instruction: Write about topic of fear – in which situations I feel fear, what helps me not to be afraid.
- *„There is nothing here in this land of volcanoes! I am very angry!“* (Gómez, 2016)
  - ACTIVITY: Orchestra using Orff ´s instrumentation
  - Instruction: Express your anger troughs sounds. Imagine that you are a volcano full of anger, that begins to live. Firstly just slowly bubbling, than bubbling is stronger, more intensive and finally volcano explodes.
- *„The stars are always there but we cannot always see them. Stars look brighter when the sky is dark.“* (Gómez, 2016)
  - ACTIVITY: Drawing
  - Instruction: Black paper represents the night sky. Draw on this paper stars which represent the people or things that are important for you. You can write names on it.
- *„Sunlight breaks through the first drops of rain. Ayu is crying.“* (Gómez, 2016)
  - ACTIVITY: Orchestra using hands for sounds



- Instruction: Try to create using your hands sounds of the rain. We can use rubbing with palms, snapping with fingers, clapping with hands. Chaperone is conductor, who leads orchestra. Name of the song is Sad rain. First falls are only a few drops of rain, and it gradually changes on big rain and storm, rain finally stops.
- „Ayu cries... Grof is beside her. Ayu smiles... Her sadness disappears.“ (Gómez, 2016)
  - ACTIVITY: Finishing sentences.
  - Instruction: On paper are wrote unfinished sentences. You can finish as you wish.
    - I am crying when....
    - I am laughing when....
- „They find a narrow path that leads them to the circus of happiness ...“ (Gómez, 2016)
  - ACTIVITY: Finishing a picture
  - Instruction: There is an empty space of Circus Happiness stage on paper. Draw what you wish to have in your Circus of Happiness.
- „Grof is wearing magician’s costume and gives Ayu a necklace with the power of the land of volcanoes.“ (Gómez, 2016).
  - ACTIVITY: Creation of necklace.
  - Instruction: Each can create own necklace as a symbol of power.

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