

THE GRIEVING STUDENT AND SCHOOL SUPPORT: CASE STUDY

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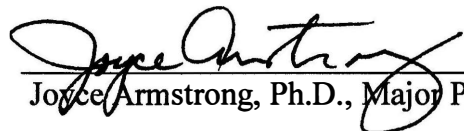
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## DEDICATION

For my mother, Mary Alice Robertson, who supported and encouraged me throughout my education. Thank you for instilling in me a love of learning. You were the inspiration behind this dissertation. You are greatly missed, but never forgotten.

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I would like to thank my husband Michael for always pushing me forward throughout the dissertation journey. You always kept me focused. Thank you for keeping the household in order and taking care of our children while I pursued my dream. Now it is your turn. You are the best! I love you so very much.

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## ABSTRACT

DEMARIUS WASHINGTON

### THE GRIEVING STUDENT AND SCHOOL SUPPORT: CASE STUDY

MAY 2014

The purpose of this multi-case study was to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations present from elementary students, ages 6-12, after the death of their primary caregiver(s). The second purpose of this multi-case study was to describe how the multi-varied grief responses of students were compounded and/or comprehended by educational personnel in the school environment. This study utilized unstructured, open-ended question interviews to gather qualitative data of multi-case studies. All case studies focused on the phenomenon of grief manifestations of elementary age children and their effect on the school environment as perceived by educational personnel. The cases for this study were bounded together by time and place with the death of the students' primary caregiver occurring within the last 24 months. Three major overarching themes emerged from this study:

1. School counseling services are the main source of support for grieving students and their families in the school environment.

2. School counselors and classroom teachers indicated that students' grief was inconsistent with the "normal" moods and behaviors observed prior to the student's death experience.

3. School counselors and classroom teachers indicated a wide array of manifestations of grief within bereaved children, which included behaviors, physical sensations, and feelings (Worden, 2009).

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## CHAPTER I

### INTRODUCTION

The death of a parent is considered to be one of the most profound losses in an individual's life. This event then precipitates the emotion of grief. Wolfelt (1983), suggest "grief is a process, and as a result is not a specific emotion like fear or sadness but instead is a constellation of feelings that can be expressed by many thoughts, emotions, and behaviors" (p. 26). For the purposes of this study, the expression of these thoughts, emotions, and behaviors will be referred to as grief manifestations. Grief manifestations can vary depending on a number of factors. Some factors include, but are not limited to, the context surrounding the death, relationship with the deceased, and the chronological/developmental age of the surviving family member at the time of death (Wolfelt).

This study sought to explore the phenomenon of grief manifestations in children and their effect on the school environment as perceived by elementary educational personnel. The purpose of this multi-case study was to explore the classroom teachers' and school counselors' perceptions of multi-varied grief manifestations present from elementary students, ages 6-12, after the death of their primary caregiver(s). This study described how the multi-varied grief responses of students were compounded and/or comprehended by educational personnel in the school. It was anticipated that the knowledge generated from this inquiry would provide new insights and so inform

educational best practices. This research employed qualitative multi-case study methodology to illustrate the phenomenon under examination. Participants of this study included a purposefully selected group of educational personnel, school counselors and classroom teachers, who have had students in their classroom and school that experienced the death of a primary caregiver within the last 24 months.

By the end of high school, 20% of children will have experienced the death of a parent (Goldman, 2000). A parental death experienced during childhood can be more perplexing due to the child's evolving cognitive development. The grieving process for children is different from that of the adult (Webb, 2002; Willis, 2002; Wolfelt, 1983). Children lack the ability to endure long periods of grief (Corr, 2000). Instead, they grieve intermittingly or in short periods at a time. They also are limited in their ability to verbalize their feelings. They do not always know how to describe what they are feeling, or may be limited by what is deemed "appropriate" expressions of grief by the adults in their lives. In addition, the cognitive ability of children is broad, depending on their chronological and developmental age. The manner in which information is perceived and processed is greatly determined by where they are in their development.

Piaget (1955) gave four stages of cognitive development. The first stage is the sensorimotor stage. It is characteristic of children from birth to age 2. This stage involves the child's thinking being stimulated from sensation and movement. The child begins to learn about his environment through motor and reflex actions. Next, the preoperational stage, ages 2-7, begins with the ability to talk at around age 2. The child's thinking is

influenced by fantasy. At this stage, the child takes on an egocentric view of the world. Oriented to the present, the child has difficulty conceptualizing time. Early in this stage, objects are personified. Piaget's concrete operational stage occurs between the ages of 7-11. This is considered to be the latency age or elementary school age. During this stage, the child develops an ability to think abstractly and to make rational judgments about concrete or observable phenomena. There is reduced egocentricity and an improved capacity for reasoning. The final stage of Piaget's cognitive development is the formal operational stage. It occurs around the ages of 9-12. This individual no longer requires concrete objects to make rational judgments. At this point, the individual is capable of hypothetical and deductive reasoning.

It is important to note that the ages associated with Piaget's stages of cognitive development do overlap at times. Development is not a linear process. Any stage of development mentioned throughout this writing is considered a guide rather than an absolute.

Knowing where children are in their cognitive development, fosters an understanding about which concepts of death they are able to ascertain. There are four components that must be present to fully understand the concept of death – inevitability, irreversibility, causality, and finality (Smilansky, 1987). Inevitability is the understanding that death is something that is going to happen to everyone. Irreversibility means that once a death has occurred, it cannot be “fixed” or reversed. Causality is the

understanding that things happen in which an individual has no control. Death is the end of life and a permanent condition, finality. These components are not conceptualized completely until the later stages of cognitive development. Additionally, with each stage of human development, previous feelings and behaviors surrounding a significant loss are revisited and/or recycled (Biank & Werner-Lin, 2011; Himebauch, Arnold, & May, 2008; McGlaufin, 1990).

A classic study by Nagy (1948) categorizes children's understanding of death into three stages. The first stage is characteristic of children ages 3-5, and involves the denial of death as a regular and final process. During the second stage, which is seen in children ages 5-9, death is personified and considered a person. By age 9, the third and final stage is reached. It involves the recognition that death is inevitable and the end of life.

According to Westmoreland (1996), children's perceptions of death are based on their developmental level and age. Children ages 3-5 could view death as a temporary state. Death is viewed as a deliberate act. The child can believe that his thoughts about the death of a loved one actually caused the death to occur. Six to 8 year olds begin to grasp the concept of death. However, they do not see it as something that could personally happen to them. Nine to 11 year olds are beginning to understand that death is final and irreversible. There is also an understanding that death is universal.

Black (1998) stated that by the age of 5 most children understand that death is irreversible, universal and a permanent state of separation. However, it is not until they

are older, do they understand the physical changes that occur as a result of death. Children ages 5-11 could find it helpful to view the deceased body in an effort to facilitate their understanding of the physical changes that occur during death. However, there are exceptions, such as the condition of the deceased body and the child's willingness to view the body.

An understanding of death does not negate the grieving process. The complex process of grief within children does not have its own model. Wolfelt (1983) stated that a child that is mature enough to love is mature enough to grieve.

An understanding of children's cognitive abilities as well as their grieving process helps educators to adequately and effectively facilitate their student's learning. It also provides the support the grieving student needs to maneuver through the grieving process in a healthy manner. It furthermore provides a safe and nurturing environment to which healing can occur for the grieving child. With adequate knowledge of the manner in which children manifest grief, such misdiagnosis as attention deficit disorder and learning disabilities can be prevented. An awareness of the educator's own philosophy and coping skills as it relates to death is also key in their ability to help the grieving student heal.

### **Statement of the Problem**

Many children in elementary school experience the death of their primary caregiver(s), thus resulting in multi-varied grief manifestations. The effects of this type of loss are often misunderstood, unidentified, or misdiagnosed amongst educational



personnel. There is little information regarding the relationship between the behavior a grieving student exhibits and the perception of those behaviors by educational personnel.

### **Statement of Purpose**

The purpose of this multi-case study was to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations present from elementary students, ages 6-12, after the death of their primary caregiver(s). The second purpose of this multi-case study was to describe how the multi-varied grief responses of students were compounded and/or comprehended by educational personnel in the school environment. Multi-varied grief manifestations included but were not limited to behaviors such as withdrawal, aggressiveness, anger, emotional outburst, anxiety, chronic illness, and fatigue.

### **Rationale and Significance**

The rationale for this study emanated from the researcher's desire to increase educators' understanding of the grief process within children in order to maximize student success. Grieving students present themselves with a range of complex emotions, thoughts, and behaviors. It is the responsibility of the educator to try and understand the student holistically.

This study was significant for several reasons. By comprehending the grief process, healthy relationships that promote secure attachments could be fostered between the educator and the grieving student. Additionally, effective research based strategies and techniques for helping grieving students have the potential for practical application

by educators. Finally, this study might improve school policy by including the consideration of a primary caregiver death before placement decisions and/or diagnosis are decided on the behalf of students.

### **Research Questions**

The following research questions were examined, evaluated, and explored:

1. How can schools support grieving students and their families?
2. How is the students' grief interpreted by school personnel?
3. How is grief manifested in bereaved school age students?

### **Interview Questions**

The following interview questions were posed to research participants. Corresponding research questions are noted in parentheses.

1. How do you know if a student is demonstrating signs of grief? (RQ 2 and 3)
2. What resources/interventions are available for grieving students from the school?  
(RQ 1)
3. What resources/interventions are made available for the families of grieving students? (RQ 1)
4. What professional development and/or resources that address the topic of grief in children are made available for the educational personnel? (RQ 1)
5. How is the behavior of the grieving student different from the non-grieving student? (RQ 2)
6. What "acting out" behaviors do you see in the grieving student? (RQ 2 and 3)

7. What are the health issues/concerns that are seen in grieving students? (RQ 3)
8. In what ways are school attendance impacted in regards to the grieving student?  
(RQ 3)

### **Delimitations**

1. This study confined itself to interviewing selective elementary school counselors and classroom teachers within the Cumberland County School System of North Carolina.
2. School counselors participating in this study had students in their school that experienced the death of their primary caregiver within the last 24 months.
3. Classroom teachers participating in this study had students in their classroom that experienced the death of their primary caregiver within the last 24 months.
4. Bereaved students referenced in this study were between the ages of 6-12 years old and currently enrolled in the participating school.

### **Assumptions**

1. It is assumed that the grieving process affects the student's feelings, physical sensations, cognitions, and behaviors within the school environment.
2. It is assumed that educational personnel have limited or no knowledge about the various ways grief manifest itself in elementary age children.

3. It is assumed that as a result of bereavement, students are misdiagnosed or mislabeled as being learning disabled, aggressive, or having attention deficit disorder/attention deficit hyperactivity disorder.

4. It is assumed that schools are not creating an environment that fosters open communication/dialogue regarding the topic of death for educational personnel as well as bereaved students. This also includes staff trainings and workshops regarding the topic of death.

5. It is assumed that schools have few activities, programs, or services available to help the bereaved student cope with the death of a loved one.

### **Qualitative Research**

A major characteristic of qualitative research is to foster a deep understanding of a social setting or activity as viewed from the perspective of the research participants (Bloomberg & Volpe, 2008). Qualitative research places an emphasis on exploration, discovery, and description. The collection methods and analysis methods used in qualitative research take on meanings and significance in relation to the assumptions underlying the larger intellectual traditions within which these methods are applied (Bloomberg & Volpe).

When a researcher starts a project, certain assumptions are made about how the researcher will learn and what will be learned from the inquiry. These assumptions are

called knowledge claims. The tradition of qualitative research affords various knowledge claims such as the socially constructed knowledge claim and the advocacy/participatory knowledge claim (Creswell, 2009). For the purpose of this study, a socially constructed knowledge claim was assumed.

A socially constructed knowledge claim assumes that individuals seek to understand the world in which they live. The individual applies subjective meanings of their experiences. The meanings individuals apply toward certain objects or things are varied and multiple. As a result, the qualitative researcher is forced to look for a complexity of views from research participants. Broad and open - ended questions are utilized by the researcher to allow participants the opportunity to construct meaning of a situation. Subjective meanings are often negotiated socially and historically, and through interactions with others (Creswell, 2009).

In addition to assumptions about knowledge, there are strategies or traditions of inquiry that are unique to qualitative research. Such strategies include case study, ethnography, phenomenology, grounded theory, narrative inquiry, and hermeneutics (Bloomberg & Volpe, 2008; Creswell, 2009). This study utilized the case study as a strategy of inquiry. The case study is an intensive description and analysis of a phenomenon, social unit, or system that is bounded by time or place (Bloomberg & Volpe, 2008; Creswell, 2009).

## **Attachment Theory**

According to Bowlby (1958), infants form attachments to their primary caregivers within the first year of life. Secure attachments are developed through experiences where the child consistently feels safe, secure, and autonomous. Changes in family structure, such as the death of a parent, could potentially alter early attachment security established as a result of the child- caregiver relationship (Thompson, 2000).

## **Theoretical Framework**

The theoretical framework underlying this study was attachment theory. The development of close relationships and the subsequent loss of an attachment figure were of particular interest to this study. Attachment theory draws some of its background from studies in ethology. This is largely due to the fact that Bowlby (1958, 1969), studied the parent- offspring bonds between birds and primates.

Bowlby (1958) proposed that infants are social beings. They form attachments to their primary caregiver(s) within the first year of life. However, the first six months seem to set the stage for a display of affectional attachment behavior as observed during the latter six months. It is during the second half of the infant's first year of life do they begin to maneuver their locomotor skills, such as climbing, following, and clinging. At this same time, infants are beginning to explore their environments. Exploration is done in proximity to the primary caregiver(s) for reasons of safety and security. The infant feels

safe to explore the environment, but if a problem arises, the caregiver is close for the purpose of protection.

The dyadic relationship between infant and attachment figure(s) is dynamic, and not at all equal. By the end of the first year of life, the child has already formed what Bowlby (1969, 1973) described as an “internal working model”. It is the child’s awareness or predictions of caregiver(s) behavioral tendencies, and their own planned response to the attachment figure(s). The child’s internal working model is initially a direct display of current patterns of interactions. However, over time, the child’s internal working model becomes more defined and fixed. It is for this reason that deviations from existing patterns of interactions between the child and the attachment figure(s) are not readily accepted.

The internal working models of self and caregiver are complimentary of each other. Together, they represent the relationship as a whole. If the caregiver nurtures a relationship that attends to the child’s need for safety, security, and autonomy, then the child is likely to develop an internal working model of self as valued and self reliant. Ainsworth, Bell, Blehar, and Main (1978) described these relationships as having secure attachments. However, if the caregiver has not acknowledged the child’s need for comfort, protection, and exploration, an inharmonious relationship is likely to develop.

Through methods of observation, Ainsworth, et al. (1969, 1978) empirically tested Bowlby’s theory of attachment. In a laboratory playroom scenario known as the

Strange Situation, interactions between mothers and their infants were observed. The mothers of the infants left them in the playroom with an unfamiliar woman, and returned shortly thereafter. There were also toys in the room to encourage exploration.

Observations showed that the infants whose mothers were “sensitively responsive” exhibited behaviors consistent with secure attachments. Such behaviors included welcoming their mothers return after a short separation, seeking interaction or close contact after the separation, and the ability to be quickly soothed and then return to play. Additionally, two categories of insecure attachments emerged as a result of the Strange Situation study, insecure -avoidant and insecure -ambivalent. Insecure avoidant infants displayed behaviors such as looking, turning, or refusing interaction upon their mothers return. Insecure ambivalent infants sought proximity to their mothers upon their return, but responded with expressions of anger and physical resistance. Main and Hesse (1990) later identified another classification of insecure attachment amongst infants known as insecure- disorganized. The infants in this category displayed behaviors that did not fit into the categories described by Ainsworth et al. (1978). The infants’ behavior is described as being a combination of resistant and avoidant. Additionally, they displayed behaviors that did not make sense in the context in which they were occurring. Examples of their disorganized behavior included fleeting fear responses as the mother returned, and sudden stilling in the midst of a greeting.

The consistency of early attachment security amongst individual children varies considerably over time (Thompson, 2000). Early attachment experiences are important,



but can later be transformed by life experiences such as changes in family structure, family processes, and changes in the parent. Changes in family functioning that have comprehensive effects on family members, such as a parental death, are more likely to alter relational security because they force a renegotiation of familiar relational patterns (Thompson, 2000). In an effort to buffer against the negative effects of family stresses, this study will examine the potential development of attachment relationships outside of the family between the grieving student and elementary educational personnel.

### **Definitions**

The following definitions were used by the investigator for the purpose of this study:

Primary Caregiver – the individual(s) responsible for providing the child with food, clothing, and shelter consistently. This individual additionally functions in a parental type role in relation to the child. The child has co-habitated with the individual for the last 3 years.

Educational Personnel – Consist of professional staff and faculty employed within a school system. This includes teachers, school counselors, school administrators, school nurses, and teacher assistants.

School Counselor – An educator who has a master's degree and State school counselor certification. Within the school environment, this individual provides specialized counseling and guidance according to their State agency's developmental

model for guidance and counseling programs. The model usually includes the following components: guidance, individual planning, responsive services, and system support.

Classroom Teacher – An individual who has at least a bachelor’s degree in elementary education and has obtained State certification in their related field of study. Described students are taught by the teacher a minimum of 2 hours daily.

Grief – “An emotional suffering caused by death or bereavement. Grief involves a sequence of thoughts and feelings that follow the loss and accompany mourning. Grief is a process, and as a result is not a specific emotion like fear or sadness but instead is a constellation of feelings that can be expressed by many thoughts, emotions, and behaviors. Grief is the internal meaning given to the external event” (Wolfelt, 1983, p.26).

Grief Manifestations – The expression of thoughts, emotions, and behaviors following the death of a parent and/or primary caregiver.

Bereavement – The state or status of an individual who has experienced a loss, in this case, a physical death (Webb, 2002).

Grieving Student – An individual between the ages of 6-12 enrolled in an elementary school that is experiencing grief as a result of the death of a parent and/or primary caregiver within the last year.

ADD/ADHD (Attention Deficit Disorder)(Attention Deficit Hyperactivity Disorder) Is a neurological condition that is usually genetically transmitted. It is characterized by distractibility, impulsivity and restlessness or hyperactivity. These symptoms are present from childhood on, and with much greater intensity than in the everyday person, so that they interfere with everyday functioning (Hallowel & Ratey, 2005).

Learning Deficits – any learning problem that limits intellectual functioning and has the potential of making students eligible for special education services.

### **Summary**

The death of a primary caregiver, especially a parent, produces a variety of emotions, thoughts, and behaviors. This is what is defined as grief. The expression of those emotions and behaviors are known as grief manifestations. All individuals grieve, but children grieve differently than adults. This is largely due to their cognitive development and abilities. It also impedes their capacity for understanding the concepts of death – inevitability, causality, irreversibility, and finality.

In early infancy, an attachment bond is formed between the child and caregiver. Secure attachments occur as a result of mothers being “sensitively responsive” (Ainsworth, Bell, & Stayton, 1974). This means that they were receptive to the child's needs and met them consistently. The opportunity for exploration was also encouraged and supported. Mothers that were “insensitive” to the infant seemingly created an

inharmonious relationship. However, early attachments are not always consistent over time. Family stressors can impact attachment security. Death of an attachment figure, such as the primary caregiver, forces the individual to renegotiate familiar relational patterns (Thompson, 2000).

Educational personnel have the opportunity to establish secure attachment relationships with bereaved students within their schools. They can also foster an environment that promotes healing for these students. However, first they must understand how children manifest their grief. Often children's expression of grief is misunderstood, unidentified, or misdiagnosed. With the utilization of qualitative multi-case study methodology, this study explored how bereaved students in elementary schools were manifesting their grief. Furthermore, this study described how the grief manifested by bereaved students was interpreted by the educators in their school environment.

## CHAPTER II

### REVIEW OF LITERATURE

By the end of high school, 20% of students will have experienced the death of a parent (Goldman, 2000). Children's cognitive development plays a major role in their understanding and processing of death. As a result of immature cognitive development, grief can manifest itself in the form of anger, inability to focus on school work, sadness, and confusion (Lohan, 2006). The grief experienced by children is often misunderstood, unidentified, or misdiagnosed amongst the educational personnel that are responsible for their teaching and learning. The purpose of this review of literature was two- fold: (a) explore the multi-varied grief manifestations present from elementary age students, ages 6-12, after the death of their primary caregiver; and (b) describe how the multi-varied grief responses of students are compounded and/or comprehended by educational personnel in the school environment. The literature review reflected various theories of grief, teachers training and ability to assist grieving students, support for grieving students by school counselors, and children's manifestations of grief with relation to diagnosis of attention deficit disorder and learning disabilities.

## **Mediators of Grief**

Grief is defined as “an emotional suffering caused by death or bereavement” (Wolfelt, 1983, p.26). Its intensity and duration will vary depending on certain factors. Worden (2009) identified 7 factors that mediated grief that are applicable to children’s grief, (a) who was the person who died, (b) the nature of the attachment, (c) how the person died, (d) personality variables, (e) social variables, (f) historical antecedents, and (g) concurrent stresses.

The relationship or kinship of the person who died to the bereaved individual requires consideration in the application of the grief process (Worden, 2009). The death of a parent by a bereaved individual will probably be grieved differently than the death of a cousin. The death of a close sibling will probably be grieved differently than the death of a distant uncle. Looking at the relationship between the deceased and the bereaved individual can aid in understanding the response to a loss (Worden).

In the existence of relationships, there can be secure or conflicted attachments. Worden (2009) stated the type of attachment bond developed has an impact on the intensity and duration of the grief process. The intensity of the love relationship between the bereaved and deceased individual contributes to one’s grief reaction. Additionally, the history of conflicts that exist within a relationship affects an individual’s reaction to grief. In the case of the presence of physical and/or sexual abuse, it is possible that the death of the abuser could result in “unfinished business” for the victim. Bereaved individuals in

dependent relationships may experience difficulty adapting to the death due to their dependence on the deceased for the fulfillment of various daily activities.

According to Worden (2009), the circumstances surrounding a death affect the process of grief. One must consider such factors as the expectedness of death. Was the death preventable? Is the death considered to be stigmatizing? Was the death traumatic? Are there multiple losses? Is this death ambiguous? Where did the death occur in proximity to the bereaved individual?

Personality variables play a part in the process of grief. Variables include an individual's age, gender, coping style, attachment style, cognitive style, individual beliefs, and individual values (Worden, 2009). Consequently, grief is an individualized process.

Social variables include such things as the availability of support. The satisfaction of that support by the bereaved individual is factored into the grieving process. Religious resources and ethnic expectations can also influence an individual during the period of grief (Worden, 2009).

In the context of historical antecedents, an individual's loss history is considered. There is the possibility of previous experiences with a loss where the individual developed some coping skills. Historical antecedents affect the manner in which an individual may experience grief (Worden, 2009).

Concurrent stresses involve life change events (Worden, 2009). They can vary significantly. Some examples include an increase in household chore responsibilities, less money due to the death of the family member, having to transition to a new home or school, etc.

### **Theories of Grief**

In an effort to better understand how an individual processes grief, many theories have emerged on the topic. The theories attempt to explain the grief process in clusters, phases, stages, or tasks. Grief is an individual process. Its course cannot be predetermined by a theory. However, the preceding grief theories provide a guide for the uncomplicated grieving process.

Lindemann (1944) proposed symptom clusters in the grieving process. In essence these were categorizations of grief manifestations that could occur throughout the grieving process. These included the presence of somatic symptoms such as shortness of breath or tightening in the throat. There are also feelings of guilt and feelings of hostility towards others as a result of one's loss. A preoccupation with the image of the deceased and a feeling of distance from others could also be present. Finally, there can be difficulty in performing normal routines. Lindemann's work was with individuals who experienced natural disasters.

Parkes (1998) developed a 4 phase model that identified different psychological grief processes, or phases. They included shock or numbness. This phase involves a



feeling of disbelief, and usually occurs close to the time of the loss. Another phase of Parkes theory of grief includes yearning and pining, which includes a snowball combination of feelings such as anxiety, anger, and irritability. The disorganization and despair phase involves feelings of depression and a tendency to withdraw socially. During the recovery phase, there is evidence of recognized behavior and signs of beginning to pull life back together. Bowlby's (1973) theory of attachment, in relation to bereaved persons, is very similar to Parkes' theory of grief. It also includes 4 phases. They are (a) shock, (b) yearning and protest, (c) despair, and (d) recovery. Parkes' findings were the result of his work with widows, while Bowlby's work focused mainly on the strong affectional bonds developed throughout childhood and the distress of having those ties severed. The phase models of grief are not intended to occur sequentially. They tend to overlap and can reoccur depending on various life triggers.

According to Worden (2009), there are certain tasks that must be completed or worked through in an effort to resolve grief. This is also referred to as "grief work." One task involves accepting the reality of the loss. This means knowing that the deceased person is no longer alive and will not be a part of an individual's everyday life. Another task is to experience the pain of grief. Throughout this task, a variety of intense feelings may be experienced. It is also during this task that the individual may begin to work through those feelings as part of the grieving process. The task of adjusting to the new environment where the deceased person is missing involves struggling with the changes that happen as a result of the person being gone. Some changes can include more

responsibilities at home, less income, or a loss of a sense of identity. The final task is to reinvest energy in life, loosen ties to the deceased and forge a new type of relationship with them based on memory, spirit, and love. This simply means accepting that death is the end of a life, but not the end of a relationship.

Kubler-Ross (1969) described grief in terms of five stages. The stages are denial, anger, bargaining, depression, and acceptance. Kubler-Ross' work as a psychiatrist with dying patients influenced the development of her stages of grief. There is criticism regarding the five stages because it is argued that grief does not proceed from one stage to the next, as in a linear fashion (Corr, 1993). Additionally, it is misinterpreted that these stages of grief are identifiable with the surviving individual (Kastenbaun, 1991). In fact, these stages of grief were meant to describe the grieving process for the individual who is dying.

Stroebe and Schut (1999) proposed a revised model of coping with bereavement, the dual process model. Other theories of grief focus on the constant loss oriented processes that include grief work, breaking bonds with the deceased, and denial/avoidance of restoration changes. The dual process model identifies two types of stressors, loss oriented and restoration oriented. Restoration oriented processes include such things as attending to life changes, distractions from the grief, doing new things, establishing new roles, identities, and relationships. There is a dynamic regulatory coping process that allows the bereaved individual to at times confront and other times avoid the

different task of grieving. This dynamic coping process is called oscillation. The dual process model advocates for a respite from dealing with the loss oriented stressors and restoration oriented stressors in an effort to promote adaptive coping. The dual process model takes into account the individual bereavement experience, such as the circumstances of the death, personality factors, gender, and cultural background (Buglass, 2010).

There is no one grief theory or model that can be advanced as a comprehensive grief model for children. However, the dual process model makes a significant effort to compensate for the evolving cognitive development of children as they experience grief.

### **Teacher Training in Relation to Student Grief**

Factors that may impede the grieving process of a child include a lack of a caring and secure environment, and the absence of a caring adult who can stimulate and support the process (Himebauch, Arnold, & May 2008; Rando, 1984). Classroom teachers are placed in the position to assist grieving students. They have the power to either impede or support the grieving process for their students.

Teacher preparation programs seldom teach about addressing the issue of death in the school environment or classroom (Wood, 2008). The result is teachers in classrooms that are left to feel inadequate in helping children deal with grief (Le Count, 2000; Perkins & Mackey, 2008). As an extension of an earlier study by Pratt, Hare, and Wright (1987), researchers Reid and Dixon (1999) conducted research to examine the following:

(a) teacher attitudes regarding death and dying, (b) teacher attitudes regarding their ability to assist grieving students, and (c) based on the findings, would providing school in-service on the topic of death and grief increase the classroom teacher's comfort level. Unlike the Pratt study, this research included teachers of older, school age students. There were 67 individuals included in the sample, which included teachers, classroom assistants, counselors, librarians, and clerical staff. A survey was distributed to participants. The survey included both open and closed ended questions to provide both quantitative and qualitative data. The survey instrument also included a section for the measurement of attitudes toward death. Findings of this study implied that many of the educational personnel reported some discomfort and/or lack of preparation for coping with death in the classroom. Based on the findings, most classroom teachers would require some assistance in successfully dealing with a death in the life of a student in their classroom. Additionally, some teachers stated that they would feel uncomfortable addressing any loss issues at all.

While many teacher education preparation programs provide limited to no training to teacher education candidates (Wood, 2008), some colleges and universities offer information and workshops to the general student population. Vickio (2008), offers practical guidelines for conducting grief workshops for college students. Grief workshops are different from grief support groups, because they are not therapeutic in nature. They provide informational resources, and are led by trained campus professionals. Additionally, they are regarded as being less stigmatizing for the student involved. Grief

workshops are an alternative to counseling. According to Vickio, some things to consider when planning a grief workshop include the process to be utilized in determining the goals and selecting the content of the workshop. This can be achieved through the utilization of a needs assessment from participants. Next, consideration should be given regarding the structure of the workshop. Without exception, there should be an informational section regarding the topic of grief, and time for the participants to share their experiences and concerns. Then, careful consideration should be given about who should facilitate the workshop. Facilitators should be knowledgeable of the content area and be able to establish a connection with the participants. The facilitator should be aware as well as prepared to manage their own grief emotions that may be evoked as a result of talking to students regarding grief. Consideration should be given to the utilization of two facilitators. Then, the location of the workshop must be considered. It should be somewhere that is accessible for the students as well as somewhere that is quiet, private, and comfortable. Finally, the manner in which the workshop will be publicized must be considered.

The use of grief workshops as described by Vickio (2008) were meant to assist bereaved college students. However, this same technique can be implemented in helping teachers and other educational personnel understand the needs of grieving students. It can also serve as a form of helping educators deal with their own personal grief reactions and emotions.

## **School Support for Grieving Students by School Counselors**

In an effort to provide support for bereaved students, school counselors must be competent in the following areas: (a) child and adolescent development as it relates to the grieving process; (b) cultural variations in beliefs about death and mourning practices, and (c) specific interventions to help bereaved children (Morgan & Roberts, 2010). Interventions utilized by school counselors to help bereaved children include grief support groups, drawings, and bibliotherapy.

Counselor led grief groups in schools can be an effective way to assist grieving students (Samide & Stockton, 2002). These groups can offer support and encouragement for students. Morgan and Roberts (2010) described these groups as “a safe place where [students] could better understand, express, and cope with their grief” (p. 210). According to Massat, Moses, and Ornstein (2008), grief support groups fit well into the school setting, model empowerment, and allow peer support. They are a preferred intervention.

Another intervention used by school counselors with students are drawings. Drawings are a non-verbal tool utilized by counselors to aid in the expression of feelings and thoughts regarding grief. Le Count (2000) examined two case studies in which drawings were used to help students with unresolved grief issues. The first case study was conducted with a 12 year old boy who had experienced the death of his father 14 months earlier. He was referred to counseling due to his mild disruptive behavior in the school environment. The researcher chose to use the continuous line technique, which

involved a free flowing line drawn with the non-dominant hand for 30 seconds. The goal of this technique is to release images from the unconscious. The student was then able to verbalize what he drew. As a result of this technique, the student was able to deal with his feelings of anger and allow himself to experience the pain of grief he had thus far denied himself. The next case study included a 7 year old male student who had experienced multiple losses. This student had been suspended and/or expelled from 3 out of the 7 schools attended. He was perceived as aggressive, hostile, and hyperactive by the educational personnel. During counseling the student began to draw, and eventually began to express himself through the drawings. As a result, this student began to develop a sense of his identity. He began to understand that life for him could be fulfilling again despite the losses he had already experienced in his life. However, grief is a process, and this particular student did have setbacks with another suspension from school. He was still dealing with working through his grief issues. Willis (2002) stated “very young children benefit from the freedom of expressing their feelings by being able to draw or color, even if they are just scribbling” (p. 223).

School counselors use bibliotherapy as an intervention to help students either individually or in small groups. Bibliotherapy is defined as “the use of any kind of literature by a skilled adult or other interested person in an effort to normalize a child’s grief reactions to loss, support constructive coping, reduce feelings of isolation, and reinforce creativity and problem solving” (Berns, 2004, p. 324). It is considered an interactive process. To maximize success of the bibliotherapy process, four specific

aspects should be in place: identification, selection, presentation, and follow-up (Pardeck & Pardeck, 1989). Identification involves an awareness of the child's issues and emotions that the skilled adult is trying to address. It requires an understanding and awareness of the child's developmental and cognitive abilities. The selection of appropriate materials and knowing what resources are available to best meet the needs of the child is required. Presentation is based on the skills of the adult and the introduction of literary materials to the child. Follow-up can include many different strategies such as conversations or activities. Without the presence of a follow-up, this aspect of bibliotherapy loses its effectiveness. Pehrsson (2005) states that bibliotherapy helps children identify themselves through the utilization of characters in a book. It also allows them to evoke emotions from a story and apply those emotions to what they may be feeling in a safe environment. Finally, children gain awareness of their own issues and may find solutions to those issues by utilizing the examples of characters in books.

### **Children's Grief Manifestations and Attention Deficit Disorder (ADD)/ Learning Disabilities**

The manifestations of grief in children are observed as late as two years after the death of a loved one (Westmoreland, 1996; Wolfelt, 1983). Grief manifestations are multi-faceted, affecting an individual physically, cognitively, behaviorally, and emotionally. Examples of grief manifestations bereaved children may experience include anxiety, insomnia, hyperactivity, a feeling of helplessness, symptoms of depression,



withdrawal, changes in conduct or mood, physical complaints, or psychosomatic illness (Buglass, 2010; Massat, Moses, & Ornstein, 2008). Children of preschool age could experience such regressive behaviors such as bedwetting, or crankiness due to changes in sleep patterns of family members (Massat, et al., 2008; Willis, 2002). Black (1998) assessed emotional disturbances for bereaved children at higher levels than nonbereaved children for up to two years after the death of a loved one. Additionally, learning problems and a failure to maintain school progress was noted as a difficulty associated with bereavement in childhood (Black).

The manifestations of grief previously mentioned similarly mirror the characteristics of learning deficits, such as attention deficit hyperactivity disorder, ADHD, and being learning disabled. The Diagnostic and Statistical Manual for Mental Disorders (DSM- IV) (2000), published by the American Psychiatric Association, is the guide that lays out the criteria to be used by doctors, mental health professionals, and other qualified clinicians when making a diagnosis of ADHD. According to the Diagnostic Statistical Manual- IV, an individual may qualify as being diagnosed with attention deficit disorder if six of the 9 criteria have persisted for at least 6 months to a degree that is maladaptive and inconsistent with developmental level:

- (1) Often fails to give close attention to details or makes careless mistakes in schoolwork, work, or other activities.
- (2) Often has difficulty sustaining attention in tasks or play activities.

- (3) Often does not seem to listen when spoken to directly.
- (4) Often does not follow through on instructions and fails to finish school work, chores, or duties in the workplace.
- (5) Often avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework).
- (6) Often has difficulty organizing tasks or activities.
- (7) Often loses things necessary for tasks or activities.
- (8) Is often easily distracted by extraneous stimuli.
- (9) Is often forgetful in daily activities.

The Centers for Disease Control and Prevention's (CDC) publication *Vital and Health Statistics* (2010) stated that 2.1 million children between the ages of 5 to 11 have ADHD. If family structure is considered, 1.6 million children without a father have ADHD and 226,000 children without a mother have ADHD. Findings do not report if the missing parent is deceased or not.

### **Summary**

This research explored the grieving process of children and the perceptions of the educational personnel that work with them on a consistent basis. The grief process is an individual experience. In attempt to explain these individual differences, Worden (2009) gave many factors that can affect the way an individual responds to death. Additionally,

there are also many theories that attempt to explain the grief process (Lindemann, 1944; Kubler-Ross, 1969; Parkes, 1998; Stroebe & Schut, 1999; Worden, 2009).

Most college based teacher preparation programs do not offer any training to future educators in relation to recognizing the signs of grief in children (Wood, 2008). As a result, classroom teachers reported feeling inadequate dealing with such issues (Le Count, 2000; Perkins & Mackey, 2008). Since many grief manifestations resemble characteristics of learning deficits, a student's grief could be misinterpreted/ misdiagnosed as ADD/ADHD and/or a learning disability by classroom teachers. The use of grief workshops to help classroom teachers understand the needs of grieving students could be beneficial for all stakeholders (Vickio, 2008).

In an effort to facilitate healing within grieving students, effective school counselors incorporate grief groups, bibliotherapy, and the use of drawings into their comprehensive guidance program (LeCount, 2000; Pardeck & Pardeck 1989; Samide & Stockton, 2002). Training for teachers and other educational personnel regarding the process of grief and its manifestations in children is useful in helping to inform best practices as well as provide a safe and nurturing environment for students to grow and learn. This research sought to discover the interventions used by school professionals with their grieving students.

## CHAPTER III

### METHODOLOGY

The purpose of this study was to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations present from elementary age students, ages 6-12, after the death of their primary caregiver. This study also described how the multi-varied grief responses of students are compounded and/or comprehended by educational personnel in the school environment. The researcher believed that the knowledge generated from this inquiry would provide new insights into students' grief process and so inform educational best practices. In seeking to understand this phenomenon, this study addressed three research questions: (a) how can schools support grieving students and their families, (b) how is the student's grief interpreted by school personnel, and (c) how is grief manifested in bereaved school age students?

This chapter describes the study's qualitative research methodology and discussions around the following areas: (a) research participants, (b) research participant demographics, (c) research design, (d) procedures, (e) protection of human rights, (f) role of the researcher, (g) data collection, (h) instrumentation, (i) data analysis, and (j) summary.

## **Research Participants**

Participants in this study consisted of educational personnel from Cumberland County Schools of North Carolina. Cumberland County Schools is an urban school district located in the south central region of North Carolina. During the 2011-2012 school year, it educated 23,848 students in grades K-5. Its student population is diverse with the following distributions: (a) 44.91% Black students, (b) 33.78% White students, and (c) 10.93% Hispanic students. Fifty three elementary schools, 16 middle schools, and 15 high schools make up the school district. It employed 6,531 employees during the 2011-2012 school year. Of that number, 3,376 were classroom teachers. The number of student support staff employed was 1, 389. Educational personnel from Cumberland County Schools included school counselors and teachers who had students in their classrooms and schools who experienced the death of their primary caregiver within the last 24 months.

## **Research Participants Demographic**

Prior to the initial interview with school counselors and classroom teachers, a personal data sheet (Appendix A) was distributed to all research participants. The personal data sheet provided information regarding the participants' age, gender, ethnicity, education, years of experience in the field of education, years of employment at current school, certifications, and their current position.

## **Research Design**

Qualitative research is emergent rather than a tightly prefigured type of study. It allows for a constructivist philosophical position (Creswell, 2009). Qualitative research is concerned with how phenomena is interpreted and understood in a particular context and at a particular point in time. The methods utilized in qualitative research are interactive and humanistic. Its methodology implies an emphasis on discovery and description (Bloomberg & Volpe, 2008). The researcher is allowed to enter the world of others and attempt to achieve a holistic rather than reductionist understanding. The researcher is focused on extracting and interpreting the meaning of experience (Denzin & Lincoln, 2007). Qualitative research allows for participants to play an active role, while also invoking sensitivity toward the participants by the researcher.

Within the framework of a qualitative approach, this study was most suited for a case study design. A case study is an intensive description and analysis of a phenomenon, social unit, or system bounded by time or place ( Bloomberg & Volpe, 2008; Creswell, 2009). The phenomenon being researched is studied in its natural context (Yin, 2003). Case studies are highly descriptive. They allow the researcher to employ direct quotes of key participants and provide anecdotal information, which creates a mental image that brings to life the complex variables of the phenomenon being studied (Hancock & Algozzine, 2006). The case study is an ideal design for understanding and interpreting the phenomenon of children's grief. This research fit well with a case study

strategy because it sought a better understanding of the phenomenon of children's grief and educational personnel's perception of their grief.

### **Procedures**

The researcher developed and successfully defended a proposal for this study that included: the background, problem statement, purpose statement, and research questions outlined in chapter 1; the literature review included in chapter 2; and the methodological approach as outlined in chapter 3. Prior to conducting any formal research, the Texas Woman's University Institutional Review Board's approval was met. A written proposal of this research project was also submitted to the Superintendent of Cumberland County Schools or his designee for review and approval (Appendix B).

Upon approval from both the Texas Woman's University Review Board (Appendix C), TWU Graduate School (Appendix D), and the Cumberland County Schools Review Board (Appendix B), notification of this study's approval was sent to Cumberland County School's Director of School Counselors from the Superintendent or his designee (Appendix E). At this time, a request was sent out via email for potential volunteers for the study. Participants in the study were selected on a volunteer basis. A purposeful sampling procedure, criterion sampling, was used to select the research participants. The criterion for participation in the study was the following:

- All participants must be employed with Cumberland County Schools as an elementary school counselor or classroom teacher, and

- All participants have had a student in their classroom and school that experienced the death of a primary caregiver within the last 24 months.

Once potential volunteer participants were identified, a time and date was scheduled for an initial interview. In accordance with the American Psychological Association's (APA) Ethics Code, informed consent (Appendix F) was acquired from all participants of the study (Appendix E). The informed consent included (1) the purpose of the research and the expected duration and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) potential risks, discomfort or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. After the initial interview with the school counselor, the snowball sampling technique was utilized to refer classroom teachers for participation in the study. The principal researcher provided to the Cumberland County Schools following the study, a prepublication copy of the results and any educational implications derived from the study.

### **Protection of Human Rights**

Several steps were taken to ensure that this study was conducted ethically and that its participants' were informed of their rights as research participants in consulting or answering the interview protocol questions (Appendix G). Institutional approval from



both Texas Woman's University and Cumberland County Schools was attained before any formal research was conducted. All participants in the study were informed that the purpose of this study was to examine the student's response to grief and their perceptions of the student's response(s) were examined. The procedure for this study was an audio taped interview that lasted approximately 1 hour. Participants were told that their involvement in this research study was completely voluntary, and they may discontinue participation in the study at any time without penalty. Potential risks involved in the study included physical discomfort from having to sit for the hour long interview. This was minimized by assuring the participant that breaks could be taken as often as necessary and standing is allowed during the interview. Another potential risk was the loss of time for the participant. To minimize this risk, the researcher kept the interviews between 45 minutes to an hour. The loss of confidentiality as a risk factor was also discussed with participants. Steps taken to minimize this included assigning identification codes to each interview protocol and subsequent transcription. Identifiable data such as audio tapes, transcripts, and interview protocols were put away in a locked file cabinet that only the researcher could access. Within three months of collection, the audio tapes will be erased. Transcripts and interview protocols will be shredded upon successful defense of dissertation. Confidentiality of interview discussions were protected to the extent that was allowed by law.

The knowledge generated from this research provided new insights and informed educational best practices as it related to grieving students in the elementary school

environment. The results contributed to the body of knowledge in the field of childhood bereavement and education. Participants in the study will receive access to the results of the study upon their request via email at no cost. Participants were given the opportunity to ask questions during recruitment, when the researcher was explaining the intent of the study, and when the researcher was explaining the consent form. Questions could be asked in person verbally, written, and/or via email communication. Questions, comments, or concerns regarding this study could be directed to the researcher, the researcher's advisor, and/or the Institutional Review Board at Texas Woman's University. Contact information was given to participants. Written informed consent of the previously mentioned conditions of the study was sought from all research participants.

### **Role of the Researcher**

The researcher has been a professional educator for 14 years. The educational credentials of the researcher include a bachelor's degree in elementary education as well as a Master's degree in both Curriculum & Instruction and School Counseling .Tenure as a classroom teacher and elementary school counselor make up the professional experience of the researcher. The researcher's interest in the topic of childhood grief came from the researcher's own personal experience from watching her child grieve the death of her grandmother.

As a school counselor, the researcher interacted with many bereaved students who needed assistance throughout their grieving process. The researcher also noted that there

were very few professional development trainings offered to school counselors on the topic of grief and loss. In an effort to promote understanding and healing of bereaved students, the researcher provided teachers as well as school counselors with resources on the topic of childhood grief.

The researcher disclosed her professional background to all research participants. As a result of the researcher's professional experience, it is believed that the research participants were more open and willing to answer interview questions honestly. The researcher felt that a rapport was established throughout the interview(s) with research participants. Data collection and analysis was viewed through the lens of a professional educator.

### **Data Collection**

This study utilized unstructured, open-ended question interviews to gather qualitative data of multi-case studies during non-instructional time. All case studies focused on the phenomenon of grief manifestations of elementary age children and their effect on the school environment as perceived by educational personnel. The cases for this study were bounded together by time and place with the death of the students' primary caregiver occurring within the last 24 months.

The researcher conducted 8 interviews within 5 different schools with school counselors and classroom teachers during their non-instructional time. The interviews lasted approximately 45 minutes to an hour in length, and were audio recorded. The audio

recordings for each interview were played and listened to by the researcher within 72 hours of the interview. The audio tapes were then transcribed verbatim for further data analysis.

The researcher developed an observational protocol to collect information of a descriptive nature, such as a description of the physical setting, accounts of particular events, and activities (Creswell, 2009). The observational protocol will have a section for reflective notes that will address the researcher's personal thoughts, speculations, feelings, impressions, or hunches.

The researcher developed an interview protocol for recording information during the qualitative interview. It will consist of interview questions developed by the researcher in an effort to answer the key research questions of the study. The following research questions were examined, evaluated, and explored:

1. How can schools support grieving students and their families?
2. How is the students' grief interpreted by school personnel?
3. How is grief manifested in bereaved school age students?

In addition to the interview questions, the interview protocol also contained a space for reflective notes (Creswell, 2009).

Information gathered during the interview process, observational protocols, and interview protocols were the only source of data collection for this study. The grief

manifestations of elementary age children after the death of their primary caregiver and the perception of these grief manifestations by educational personnel was the focus of this study. As a result, that was the information sought through its data collection.

### **Instrumentation**

The instruments utilized for this study were the personal data sheet, observational protocol sheet, and interview protocol sheet. All instruments were developed by the researcher. These instruments are acceptable and correlate with the methods of qualitative research (Creswell, 2009). The researcher was also situated as an instrument in the study. Reflections about the participants' observations and experiences with bereaved children began during the audio taped interviews as the researcher listened to their responses to questions, and continued throughout the transcription of the interviews.

### **Data Analysis**

#### **Interview**

The researcher audio taped interviews with the research participants. During the interview, significant insight into the participants' beliefs and feelings was noted in the brackets of the researcher's interview protocol. Within 72 hours of each interview, the researcher listened to the tape of that interview.

## **Transcription**

The audio taped interviews were transcribed into a verbatim written form. All tapes were transcribed by the researcher. Frequent stops and replays were made while editing, listening to the tape, and reading the transcript on the computer monitor. Each transcript was fully checked for accuracy. Each audio taped interview was listened to at least three times by the researcher. Editorial comments of the emotional content such as laughter, tears, and pauses were located in brackets of each transcript. After tape analysis was complete, audio tapes were put away in a locked file cabinet that only the researcher could access. In an effort to protect research participant's identity and confidentiality, the researcher assigned identification codes to each interview protocol and subsequent transcription. Within three months, these tapes will be erased.

## **Coding**

The corrected written transcripts with editorial comments were printed and bound for reading and additional analysis. The researcher read each transcript again. The interview guide questions were then highlighted and numbered with a marker. After the second reading of the transcripts (and third hearings of the interviews), the researcher made a list of the themes heard or read that were related to the interview questions. Themes were noted on a theme list (Appendix H) using the identification code that corresponded with its research participant.

## **Trustworthiness of Study**

This study used triangulation methods to ensure the trustworthiness of the study. Triangulation is a process of using multiple perceptions to clarify meaning (Bloomberg & Volpe, 2008). Additional copies of transcripts from the interviews were made and bound. Interview questions were highlighted. A Ph.D. trained family scientist and a non-family scientist professional were given copies of the bounded interviews, along with a list of themes the researcher found in those transcripts. The two reviewers were asked to examine the transcripts and determine if they had the same themes that the researcher had noted as being present. At the same time, another Ph.D. trained family scientist and a non-family scientist professional were given a copy of the bounded transcripts. The bounded transcripts did not include any of the identified themes. They were asked to record any themes they found related to the highlighted interview questions. This study consisted of a total of 4 reviewers.

## **Summary**

Qualitative research methodology was utilized in this study of the phenomenon of children's grief and educators' perception of their grief. Case studies of students who have experienced the death of a primary caregiver within the last 24 months was examined. The study used in-depth, audio taped interviews of school counselors and classroom teachers to gain qualitative descriptions of bereaved student's grief manifestations and educator's perception of those manifestations. Observation protocols

and interview protocols were developed by the researcher prior to the interviews. This study was conducted within Cumberland County Schools of North Carolina. Participants of the study were eligible for participation based on specific criteria outlined by the researcher. Data was analyzed by the researcher for themes to give a more complete description of this phenomenon. Trustworthiness of the study was ensured through the use of triangulation methods. Professionals within the family science field and closely related social science fields also analyzed data for themes.



## CHAPTER IV

### FINDINGS

#### **Introduction**

The purpose of this multi-case study was to explore classroom teachers' and school counselor's perceptions of multi-varied grief manifestations in the school environment among elementary students, ages 6-12, after the death of their primary caregiver(s). The second purpose of this multi-case study was to describe how the multi-varied grief responses of students are compounded and/or comprehended by educational personnel in the school environment. The researcher believed that the knowledge generated from this study would provide new insights and so inform educational best practices. This chapter presents demographic findings and the key themes obtained from 8 in-depth interviews with school counselors and classroom teachers employed with Cumberland County Schools of North Carolina. Three major overarching themes emerged from this study:

1. School counseling services are the main source of support for grieving students and their families in the school environment.
2. School counselors and classroom teachers indicated that students' grief was inconsistent with the "normal" moods and behaviors observed prior to the student's death experience.

3. School counselors and classroom teachers indicated a wide array of manifestations of grief within bereaved children, which included behaviors, physical sensations, and feelings (Worden, 2009).

Following is a detailed description of research participants' demographics as well as a discussion of the themes with details that support and explain each. By way of "thick description" (Denzin, 2007), the researcher set out to document a broad range of experiences, and thereby provide an opportunity for the reader to enter into this study and better understand the reality of the research participants. The emphasis throughout is on letting the participants speak for themselves. Illustrative quotations taken from interview transcripts attempt to portray participant perspectives and capture some of the richness and complexity of the subject matter.

### **Participant Demographic**

This section is utilized to give a more detailed description of the research participants. As stated previously, all participants were employed with Cumberland County School System of North Carolina. All participants worked with students on the elementary school level. This study consisted of a total of 8 participants. The researcher conducted one in-depth interview with each participant. Prior to the initial interview with research participants, a personal data sheet was distributed. The personal data provided information regarding the participant's age, gender, ethnicity, education, years of

experience in the field of education, years of employment at current school, certifications, and their current position.

The following is a summary of the data collected on the participants' personal data sheet (Appendix I). Five participants were school counselors and 3 were classroom teachers. Seven of the participants were females, with only 1 male comprising the study. The ethnicity of participants is as follows: 1 Native American; 4 White; 3 African-American. Three participants were age 50+; 3 were ages 31-40, and 2 were ages 21-30. Seven participants possessed Master's degrees, with one possessing a Bachelor's. Five participants were certified in school counseling, and 3 were certified in elementary education. Five participants were currently employed as school counselors, and three were employed as classroom teachers. It is important to note that school counselors are Master level educators, with a minimum of 2 years teaching experience. The years of experience consisted of a range from 4 ½ years to 30 years. Years of employment at the participant's current school ranged from 1 year to 30 years.

Below is a more detailed description of each participant and the researcher's interview observations. In an effort to minimize the risk of loss of anonymity, each research participant was assigned a pseudonym in place of their real name. The gender of some participants has also been changed to reduce the risk of loss of anonymity.

## **Todd**

The participant greeted me as I entered the school building. I was asked to wait a few minutes in the front office before going to the meeting room. Once in the meeting room, I noticed that it was small but rather cozy. We sat at a small round table in the room. To the left of the table was a waist high book shelf where supplies were stored. Todd is a school counselor with 5 years of experience in the field of education. He has been at his current school for 4 years. I felt that the participant answered the interview questions very openly and honestly.

## **Sadie**

It was “Santa” Day at the participant’s school on the day of our interview. Everyone was dressed according to the holiday season, and wore a jingle bell. Upon my arrival, I spoke to a person outside who was doing their morning duty. I told them who I was there to meet. To my surprise, I was speaking to the person I was there to meet. Minutes later we began our interview in the participant’s office. We walked through a large, spacious room to get to the office. I was told that the large room was used for activities with large groups of students. The participant shared with me personal experiences with deaths. Prior to recording the interview, Sadie told me that the student being discussed was a 2<sup>nd</sup> grader who lived with her dad. The father was the one who had died. The environment could be described as very cozy and family oriented. Sadie has 14

years of experience as a professional educator. She is a certified school counselor, and has been at her current school for 4 1/2 years.

### **Beth**

Beth escorted me to our meeting room for the scheduled interview. It was a large classroom that had been converted into an office. It was shared with the school social worker and school psychologist. There were 3 tables with polka dotted tablecloths on them. I also noted colorful posters on the walls. Beth seemed to be very knowledgeable and informed throughout the interview. She had books to share on the topic of grief ready to share with me. She also shared her own personal experience with the death of a close loved one. Beth has 9 years of experience as an educator. She is a school counselor. She has been at her current school for three years.

### **Derek**

Upon entering the school building, I went to the front office. The office was very busy with the phone ringing continuously. There was one person at the front desk, the receptionist. I informed her that I was here to speak with Derek. She then called him to the front office. Derek came to the front office and shook my hand. We then began to walk to the meeting room. We went out of one door and into another. Due to the configuration of the school, at one point we were walking outside with the outdoors to the right of me, and the school sidewalk to the left. It was a cold day. Once in the meeting room, I noted that it was nice and cozy. There was 1 round table to the right of the door.

The office had large, wooden, tall cabinets that were built into the wall to the right of the room. Looking forward was a tall book shelf with many children's books. On top of the shelf were multiple teddy bears. To the right of the bookshelf was a coat rack with 2 coats and a hat on it. Derek was very neat and organized. Derek has 25 years of experience as a professional educator. Derek is a certified school counselor, who has been at his current school for 19 years.

### **Megan**

It was a rainy day when I met with Megan for the scheduled interview. She met me in the front office and escorted me to her office. We walked through a crowded library filled with children. At the back of the library was the meeting room where we were to conduct our interview. This room consisted of a long, brown conference table in the middle of it, and a small bookshelf on the right wall. In the back was a smaller room where Megan had her desk and computer. We sat at the conference table to begin our interview. Megan seemed at ease at answering my questions. At the close of the interview, we discovered that we had a lot in common, including that we were from the same city and state. Megan has been a professional educator for 7 years. She has been at her current school for 2 years. Megan is a certified school counselor.

### **Makaly**

The interview was conducted in Makaly's meeting room. We sat at one of the many desk in the room. The desk were organized into groups of 4. As the interview

began, voices from the hallway could be heard. The room was large, but also free of clutter. There were posters up in the classroom. Due to scheduling, our interview was not as long. I wish there could have been more time to interview with Makaly. However, her answers were detailed and honest. Makaly has been a professional educator for 9 years. She has been at her current school for 1 year. Makaly is a certified teacher.

### **Anna**

I was early for the interview with Anna. Once in the building, I was told where the room was where I was to meet her. Anna was at the computer and listening to music. I introduced myself and was warmly received. We sat down at one of the many desk in the room. There were no blinds open in the room, so the lighting was rather dull. However, the student work on the walls was quite bright and vivid. The room was quite neat and well kept. During the interview, Anna was very articulate and precise. Anna has been a professional educator for 4 and a half years. She has been at her current school for 31/2 years. Anna is also a classroom teacher.

### **Addison**

I arrived early for the interview with Addison because it was scheduled to be conducted after school hours. The receptionist at the front desk was getting ready to leave for the day shortly after I arrived. I told her who I was there to see, and she called for her over the telecom. I waited for a while. Addison came to the office wearing her comfortable work- out clothes. The school offered a weekly exercise program, in which

she participated. We walked to her meeting room. There were several desk in the room. We sat at her kidney table, and began the interview. Addison was quite friendly and honest throughout the interview. At the conclusion of the interview, she walked me back to the front door. Addison has been a professional educator for 30 years. She has been at her current school for 30 years. Addison is a classroom teacher.

### **Findings**

Observations were noted on the researcher's interview protocol of the school setting. All interviews were transcribed into a verbatim written form. Frequent stops and replays were made while editing, listening to the tape, and checking for accuracy. The transcripts were then printed and bound for reading and additional analysis. Interview guide questions were then highlighted with a marker. The researcher made a list of themes heard and read that were related to the interview questions. Next, a theme list was developed using identification codes.

In an effort to ensure the trustworthiness of the study, triangulation methods were employed. Triangulation is a process of using multiple perceptions to clarify meaning (Bloomberg & Volpe, 2008). Along with the list of themes the researcher found, one set of transcripts was distributed to a trained family scientist and a non-family scientist professional. The two reviewers were asked to examine the transcripts and determine if they had the same themes noted as the researcher. Another set of transcripts were distributed without the themes list to a trained family scientist and non-family scientist



professional. They were asked to note any themes found that related to the interview questions.

### **Theme 1: School Counseling Services are the Main Source of Support for Grieving Students and Their Families in the School Environment**

The primary theme of this study is that school counseling services were the main source of support for grieving students and their families in the school environment. In an effort to provide support for grieving students, school counselors must be competent in specific interventions to help bereaved children (Morgan & Roberts, 2010). Participants were asked what resources/interventions were made available for the grieving students and their families from the school. In response Sadie stated, “I offer individual counseling and small group counseling, whichever is needed at the time.” Another participant, Megan, said specifically of activities implemented with grieving students: “I do a lot of art, drawing what you feel... maybe writing a letter to that loved one or whomever it is that you’re missing”.

School counselors are responsible for implementing the 4 components that make up a comprehensive guidance program. They include guidance, responsive services, individual planning, and system support. The roles and responsibilities of the school counselor in relation to supporting the emotional needs of students and their families were defined in the following quotes from participants:

Whenever we notice that a student is experiencing a grief event we normally, I will talk with the family and see if they give consent to meet with them individually or in a group setting. Typically in the past, there have been students that have experienced events in a similar time, so we've done a lot of group counseling with them. I've, since being at the elementary level for three years, I've kind of perused different materials and I've went through a lot of different resources. { someone enters the room to speak with another staff member } {interview continues} I've bought books and different activity things. I can show you some of them. {grabbing different books that are on the table where we are seated and showing them to the researcher} We have Creative interventions for bereaved children, and that's one of the kind of books I've been using for different group things. This book has a lot. It has a lot of different, it starts at the beginning of the process. Then it goes into when there are different holidays and when it is the year anniversary, so it kind of is a thorough book, and it has things that they can take home- so, just to process different things. So, that's been a really good resource for me. (Beth)

Our main focus of course is to try keep things as normal as possible for the student here at school so we don't / We want to be available in a supportive way- do individual counseling if that's needed on short term, and often times that comes from what the child is preferring to do. There were occasions where I've met with students just to let them know I'm here if they need me, be glad to talk

with them, but I don't want to take away from there instructional day – try to keep be respectful of that. (Derek)

An overwhelming majority of participants (7 of 8) either facilitated or referred grieving families for consultations with the school counselor. One reason for this could be that teacher preparation programs seldom teach about addressing the issue of death in the school environment or classroom (Wood, 2008), whereas school counselors are trained for such interactions. Sadie, a school counselor, described in detail a description of a consultation she facilitated by stating, “We do have a list of area counseling resources, and we let them [the family] know it's a place to start if their interested in receiving help outside of school. We'll give them...I'll give them a list of things to look for in their child,” and by Megan, who commented, “If the parent is upset, they have called me to speak with the parent and I have just kind of leant an ear.” Another participant added the following to the conversation:

If the student needs additional or if I think it's to the point where they may need some professional help, then I will call the family. The one student that I had in mind who lost his mother last year...the grandfather and I have had several, confidential , and I'm going to call them mini counseling sessions. I've recommended grief counseling to the grandfather. (Todd)

Half of participants (4 of 8) described indirect support for grieving students and families through formal professional development opportunities on the topic of grief.

Participants were asked what professional development and/or resources that address the topic of grief in children are made available for the educational personnel. Half of the participants responded by stating that they had personally received formal training on the topic either through the County school in which they were employed or other professional organizations. Derek expounded on this by stating, “Through our school system counseling department, we have ongoing opportunities to hear different presenters share about resources and new things if you will on dealing with loss and trauma.” In addition, Makaly stated, “At my old school I had professional development...and learning the signs and what you can do.” Two other participants described their professional development experience as follows:

Now, I’ve received a lot of training through the North Carolina School Counselors Association, their annual conference. One year, a lot of the focus was on grief and loss. So, each year there are different sessions, and I try to get at least one to update me to what’s going on... and the counseling department, through the County has also done some training. (Sadie)

They do address it when we have like our ...I guess County wide professional development days. They’ll try to have a speaker come in and talk about it [grief and loss]. So, this is my second year here. So, they’ve done that a couple of times – try to talk about tips and different things like that. (Megan)

Some participants (3) described their professional development regarding the topic of grief as nonexistent on the school level. Two of the three participants were classroom teachers, and one was a school counselor. Anna stated, “Currently at the school, I do not believe we have too many resources regarding that issue...that topic.” When asked about her professional development history regarding grief and loss, Addison said, “ Personally, I haven’t had any [pause] professional development. I’m sure there’s probably some out there [laughter]. I have not participated personally in any. Additionally, Sadie concurred by saying, “As a school, they don’t...I don’t know if we’ve done any school-wide professional development.”

Despite no formal acquisition of knowledge on the topic of grief school-wide, one participant described how she shared information with other educational personnel. The description is as follows:

I give them a lot of different resources about how to talk to students when a loved one dies. I’ve given them books in the past. I feel like a lot of times, teachers are very empathetic and sympathetic, but they don’t know exactly how to talk to them [students] about it. So, we just talk to them about trying to create a sense of normalcy...So, we give them books and pamphlets and things like that. (Beth)

## **Theme 2: School Counselors and Classroom Teachers Indicated that Students' Grief was Inconsistent With the "Normal" Moods and Behaviors Observed Prior to the Student's Death Experience**

Given the number of participants who utilized school counseling services as a source of support for grieving students and families, it is not surprising that an overwhelming majority of participants indicated that students' grief was inconsistent with the "normal" moods and behaviors previously observed. Grief is defined as "an emotional suffering caused by death or bereavement. It involves a sequence of thoughts and feelings that follow the loss and accompany mourning. Grief is a process, and as a result is not a specific emotion like fear or sadness but instead is a constellation of feelings that can be expressed by many thoughts, emotions, and behaviors." (Wolfelt, 1983, p.26). The mere definition of grief would explain theme 2. Participants were asked how they knew a student was demonstrating signs of grief. Todd described it by saying, "In a lot of cases, the teacher will say the student has changed. The student is not doing what he had been doing previously." When asked how she knew a student was demonstrating signs of grief, Sadie said, " Usually it's in the things that they say, the body language [pause]...but anything that is a change in how we've seen them behave in the past." Addison stated, " There might be some differences in their personality...what is normal for them. If they're active, they may become quiet." Other participants gave more detailed descriptions of their interpretations:

Often times from my experience, the students who are dealing with grief have mood swings to a degree. Their moods change. Normally, they have a more positive affect, and then you can see something is bothering them...and when I talk to them...it's they're missing someone. Someone died, even if it's a pet. I've had a couple of situations like that. (Megan)

My current student...I can definitely tell when she is upset...if she's just not as active...cause she's an extremely engaged person in everything...and so maybe she seems sleepy...maybe she'll have her head down. (Anna)

In addition to seeing the grieving students' behavior as out of the "norm", some participants also interpreted the moods and behaviors of grieving students as "acting out" or disruptive. One reason for this interpretation of the student's grief manifestations could be a lack of formal training on the topic of grief. Another reason for this interpretation could be a lack of experience. Three of the 8 participants that responded by describing grief behaviors as "acting out" or disruptive had 7 years or less experience in education. When asked about the behaviors observed from a particular student, Todd said, "Being disrespectful...Basically speaking out of turn, just talking because you want to...even raising your voice when you know it's not the right thing to do and you shouldn't do stuff like that." More examples of "acting out"/disruptive illustrations from other participants are stated as follows:

For me...maybe than raising her hand for attention, she comes to me directly...even if prior to that a few minutes before that I restate our rule...classroom rule...please raise your hand before coming to me...that way she'll come back up and come to me, ... and other students...I guess, she's just in their... I don't want to use the word "business", but [laughter]... in matters that are not related to her. She's definitely involved...My student that experienced the loss of a primary caregiver has been known to have "sticky fingers" in my classroom. When something goes missing, the other students look at her and mention a previous event in which she took something that wasn't hers. (Anna)

If you're not doing your work... You know teachers will consider that not following directions. Sometimes they will [pause] There's a girl last year who had a issue with grief and she had peer issues...The way she would relate to her peers... (Megan)

One participant interpreted the grief of a student who recently experienced the death of her father as not being a factor. There could be a number of reasons for this interpretation. Children lack the ability to endure long periods of grief (Corr, 2000). They grieve in short periods. Additionally, a child's cognitive development and understanding of the concepts of grief play a major role in their processing of the grief experience .

When asked about grief behaviors observed, the following comment was made:



She's very smart, very active in school...So, I don't really notice any changed behaviors...I think she is adjusting well. Like I said, she is probably the most well behaved, very hard worker, perfectionist. I told [staff member's name]... I said..."this child is not...there's no way...she's no problem that I see". (Makaly)

### **Theme 3: School Counselors and Classroom Teachers Indicated a Wide Array of Manifestations of Grief within Bereaved Children, Which Included Behaviors, Physical Sensations, and Feelings**

Worden (2009) classified grief manifestations into 4 categories – behaviors, cognitions, physical sensations and feelings. Often times these manifestations of grief overlap and co- exist. School counselors and classroom teachers indicated a wide array of manifestations of grief observed within bereaved children. Behavioral categorizations of manifestations of grief are expressed through an individual's actions (Worden, 2009). Examples of behavioral manifestations include withdrawal and sleep disturbances. Beth noted her observations of a bereaved student by stating, "Sometimes they might withdraw and not want to do activities. Addison described her grieving student's manifestation of grief by stating, "They were withdrawn...just not really with us." Participants described a more detailed account of the manifestation of grief in students as follows:

In certain situations...maybe she may feel a little withdrawn, depending on the topic we're discussing. I do believe early in the year we were discussing one thing about parents...I believe it was about veterans, and her father was a veteran. He

passed away. So, definitely she became withdrawn after that for a few hours.

(Anna)

Children who are experiencing grief tend to pull into themselves more often [withdrawal]... You know you mention maybe a certain food, a memory, or an experience..and they just have that [finger snap] trigger and their mentally zoned out. That head, spacy type thing is really obvious. (Megan)

Todd also reported of his student's grief manifestations, " Sometimes he gets very withdrawn, antisocial...don't want to talk to anybody." Similar comments were made by other participants. Beth said, " I feel like sometimes the student suffers a loss of appetite...might not be getting enough sleep. The sleeping cycles and patterns sometimes change. [speaking heard in the background] "

In addition to behaviors associated with grief, there are also physical sensations that transpire during the grieving process ( Worden, 2009). Examples of physical sensations include but are not limited to muscle weakness, stomachaches, and headaches. Participants described manifestations of grief that were evident through physical sensations in bereaved students. When asked about any health issues or concerns observed in relation to the grieving student, the following was stated:

He doesn't eat, and the grandfather's concerned also because he does not eat. He doesn't eat his lunch, even though he has to have lunch. Granddaddy says he

doesn't eat a lot at home... So, I'm worried about him. The student has...it's like he has a nervous stomach. He can make himself sick. I don't know that it's intentional...he has like diarrhea and you have to like call granddaddy to come and get him or something like that. (Todd)

In conjunction with the previous comment on health issues and concerns of bereaved students, Megan stated, " Stomachaches, headaches... Those are the most popular ones here on our level. Stomachaches and headaches...and a lot of the times it's something behind that besides food. [simultaneous laughter]"

Participants also noted grief manifestations that were expressed through the students' feelings. Frequent feelings observed by participants tended to be sadness and anger. Sadie said, "Generally, I look for either the sadness or the anger...I have seen some [students] in the past that are angry, and they don't know why... and I have the one [student] more recently who will just break down [pause] sobbing." In reference to a bereaved student observed, Todd stated, " It's just a sulken look he displays, depressed."

### **Summary**

This chapter presented three themes uncovered by this study. Findings were organized according to the research questions. Data from individual interviews revealed research participants' interpretations and observations of grieving students. As is typical of qualitative research, extensive samples of quotations from participants' own words

were included in the report. By using participants' own words, the researcher aimed to build the confidence of readers by accurately representing the reality of the persons and situations studied.

The primary theme of this study is that school counseling services are the main source of support for grieving students and their families in the school environment. All participants stated that they utilized the school counselor for services such as individual and group counseling with grieving students. Other services included consultations with bereaved families. Half of participants indirectly supported grieving students and families through formal professional development opportunities on the topic of grief.

The second theme was that school counselors and classroom teachers indicated that students' grief was inconsistent with the "normal" moods and behaviors observed prior to the student's death experience. The common sentiment echoed by participants was that there was some sort of change in the student from what is usually observed. A few participants interpreted the student's grief as exhibiting "acting out" behaviors. Such behaviors included talking back, not doing classwork, poor peer relations, and not raising hand in class to get attention. One participant interpreted student's grief as not being a factor at all.

The third theme was school counselors and classroom teachers indicated a wide array of manifestations of grief within bereaved children, which included behaviors, physical sensations, and feelings (Worden, 2009). Many categorizations of grief

manifestations were present in bereaved students. Participants stated that students' were withdrawn and anti-social. In addition, participants also noted manifestations of grief that involved physical sensations. The physical sensations observed were mainly stomachaches, headaches, and sleep disturbances. Participants also noted that students felt sad and angry.

CHAPTER V  
DISCUSSION, CONCLUSIONS, IMPLICATIONS,  
AND RECOMMENDATIONS

The preceding chapters presented an introduction to the study, a review of the related research literature, a description of the research design and procedures, and the findings obtained from the in-depth interviews and analysis. In this chapter discussion, conclusions, and implications are presented, along with recommendations for future research.

**Overview of Study**

The purpose of this study was to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations in the school environment among elementary students, ages 6-12, after the death of their primary caregiver(s). The second purpose of this study was to describe how the multi-varied grief responses of students are compounded and/or comprehended by educational personnel in the school environment.

Qualitative research methodology was used throughout the study. The qualitative research strategy employed was the case study. A case study is an intensive description and analysis of a phenomenon, social unit, or system bounded by time or place

(Bloomberg & Volpe, 2008; Creswell, 2009). A total of 8 school counselors and classroom teachers were interviewed by the researcher. All participants had to have had a student in their school or classroom who had experienced the death of their primary caregiver within the last 24 months. Additionally, each participant had to be currently employed within Cumberland County Schools of North Carolina as a school counselor or classroom teacher. All interviews were audiotaped and later transcribed by the researcher. The transcripts from the interviews were analyzed for themes. The following research questions were examined, evaluated, and explored:

1. How can schools support grieving students and their families?
2. How is the students' grief interpreted by school personnel?
3. How is grief manifested in bereaved school age students?

### **Discussion of Findings**

The case study interviews of 8 classroom teachers and school counselors offered insight into how schools support grieving students, educational personnel's interpretations of students' grief manifestations, and what manifestations of grief were expressed by bereaved students. This study consisted of 5 school counselors and 3 classroom teachers from 5 different schools within Cumberland County School System of North Carolina. All research participants had a student in their school and/or classroom that experienced the death of a primary caregiver within the last 24 months. Seven of the

8 participants held a Master's degree in education and/or school counseling. Three major overarching themes emerged from this study.

The primary theme of this study was that school counseling services were the main source of support for grieving students and their families in the school environment. All participants indicated utilizing the school counselor for responsive services in cases that involved bereaved students. Most interventions involved individual and group counseling provided by the school counselor for bereaved students. Samide and Stockton (2002) described grief groups led by school counselors as an effective way to assist students who have experienced a traumatic event. School counselors interviewed also indicated the utilization of activities in counseling sessions with students that included therapeutic art activities, and books for bibliotherapy. Drawings provide an avenue for children to express their thoughts and feelings in a manner in which they may not be able to verbally (Morgan & Roberts, 2010; LeCount, 2000). Through the use of bibliotherapy, children are able to identify with characters in books that have similar thoughts and feelings. As a result, children feel less isolated, awkward, and more hopeful (Berns, 2004).

Half of all participants described indirect support for grieving students and families through formal professional development opportunities on the topic of grief. Participants who stated they received professional development on this topic received it through the County school system in which they were employed. Most participants who



took advantage of such trainings were school counselors. This was most likely because it was a required, scheduled part of their training development. Classroom teachers interviewed were not required to partake in any professional development as it related to the topic of grief. Furthermore, classroom teachers were also less likely to receive this training at the school wide level. As an exception, one teacher stated she received professional development on grief at the school wide level from the school counselor, and this was the result of a death that occurred in a car wreck.

Theme 2 of the study that emerged was school counselors and classroom teachers indicated that students' grief was inconsistent with the "normal" moods and behaviors observed prior to the student's death experience. There are various mediating factors that would determine how an individual responds to a death. Worden (2009) identified 7 factors that mediated grief, (a) who was the person who died, (b) the nature of the attachment, (c) how the person died, (d) personality variables, (e) social variables, (f) historical antecedents, and (g) concurrent stresses. Grief is an individual experience. Each individual responds to it in different ways. It is also a process that an individual must go through in an effort to heal. Most participants noted a change in the students who experienced a grief event. Some participants also interpreted the moods and behaviors of grieving students as "acting out" or disruptive. Only 1 research participant interpreted the grief of a student who recently experienced the death of her father as not being a factor. Perhaps the most important influence on the child's grief journey will be the response of the surviving parent or other important adults in the child's life. In order

to observe a change, there must exist an established, interactive relationship. Through the development of secure attachments between a caring adult and the grieving student, healing can commence.

Theme 3 of the study was school counselors and classroom teachers indicated a wide array of manifestations of grief within bereaved children, which included behaviors, physical sensations, and feelings (Worden, 2009). Behavioral manifestations of grief commonly stated by participants were being withdrawn and anti-social. This could pose a problem if the grieving student is not doing class assignments, and not focused on academic instruction. Educators must be cognizant of the students' grief experience and its manifestations. Consideration could be given to possibly allowing students more time to complete assignments or modify assignments by shortening their length. In more severe cases where a professional diagnosis has been made, a student support team meeting could commence in an effort to develop an accommodation plan for the student.

Grieving a loss can affect an individual's body. Other manifestations of grief that were stated by research participants were physical sensations. These included predominately headaches and stomachaches. Physical sensations as a manifestation of grief could be missed if an individual is not aware of them being a possibility.

Common feelings associated with bereaved students by research participants were sadness and anger. Sadness is probably the most common emotion in the grieving experience. It does not need to include crying, but it often does.

## **Reactions from the Research**

The researcher began this study with the goal of providing new insight and informing best practices for educators that work with bereaved children. The initial assumption was that schools were not creating an environment that fostered open communication/dialogue regarding the topic of death for bereaved students. It was also assumed that educational personnel had limited or no knowledge about the various ways grief manifest itself in elementary age students. Throughout the interview process with school counselors and classroom teachers, it was noted that there was the presence of secure and safe environments that could promote healing for grieving children. Furthermore, the researcher encountered educational personnel that were more knowledgeable about the topic of death than previously assumed. However, the researcher believes there is still more that can be done to help the grieving students in classrooms. It is noted from the interviews conducted that there is a need to provide classroom teachers with more training on the topic of death.

All case studies involved required an intense and in depth analysis for themes. The researcher found this to be the most challenging task of the study. Overall, the researcher was pleased with the professionalism and strict adherence to ethical standards this study demonstrated in an effort to maintain its trustworthiness.

## **Conclusions**

From the evaluation of the 8 interviews with school counselors and classroom teachers of students who experienced the death of a primary caregiver within the last 24 months in this study, the following conclusions are made:

1. School counselors are recognized for possessing the necessary knowledge, skills, and training to effectively work with and assist grieving students and their families.
2. School counselors and classroom teachers are aware that the grieving process evokes changes in each individual.
3. Manifestations of grief do not occur in a vacuum. They can be observed at any time and in any environment. Additionally, there is usually more than one manifestation present at a time.

## **Limitations and Recommendations for Future Research**

This study provided new insight into the perceptions of school counselors and classroom teachers who had grieving students in their class or school. It also highlighted the grief manifestations exhibited by these students as observed by educational personnel. The phenomenon of grief manifestations in children and their effect on the school environment warrants additional studies in an effort to promote best practices.

The multi-case study which was comprised of both school counselors and classroom teachers offered understanding and insights not possible from other campus based educational personnel. However, the inclusion of both school counselors and classroom teachers presented limitations to the study. An examination of classroom teachers' acquisition of knowledge regarding the topic of grief, knowledge of resources for grieving families, and interventions for grieving students was limited. Further study is needed to determine if this finding would be consistent with other samples of classroom teachers with bereaved students in their class.

Research participants interviewed were asked about their experiences and observations of bereaved students' in their school or class. However, they were not intentionally interviewed for the purpose of seeking personal information regarding their own experiences with death. Worden (2009) listed historical antecedents as a mediator of grief. There is the possibility of previous experiences with a loss where the individual developed some coping skills. An individual's comfort level with the topic of death can affect their ability to work with grieving students (Reid & Dixon, 1999). Further study is needed to explore this phenomenon further.

This study was confined to interviewing selective elementary school counselors and classroom teachers within the Cumberland County School System of North Carolina. Further expansion of the study to other urban school systems in large cities is needed to determine if this studies finding would be consistent with other samples.

School counselors and classroom teachers participating in this study had students in their classroom and school that experienced the death of their primary caregiver within the last 24 months. Wolfelt (1983) stated that manifestations of grief can be seen as late as 2 years after the actual occurrence of a death. Further study is needed to see if these manifestations of grief are observed beyond 2 years.

Classroom teachers participating in this study cited the a lack of school wide professional development on the topic of grief. It is recommended that classroom teachers be offered training on the topic of grief, which includes its various manifestations, components of death, and stages of children's cognitive development in relation to their understanding death.

### **Theory Application**

The development of close relationships and subsequent loss of an attachment figure were of particular interest to this study. Changes in family structure such as the loss of a primary caregiver, would expectedly affect family dynamics. During this time of transition, strong school, family, and community partnerships are essential to the healing process. School is the conduit between lifelong education and continuing bonds with families, teachers, education staff, and communities. Resiliency in families could be fostered through the utilization of community resources, such as mentoring to bereaved students. This could also develop secure attachment relationships. Additionally, community partnerships could promote growth and increase knowledge by providing to teachers and other educational personnel trainings on the topic of grief and loss.

## Implications

The death of a parent is one of the most profound losses an individual could experience. Imagine how much more complex this loss would be for a young child. Grief is a process that is unique for every individual that experiences it. It is filled with many emotions, thoughts, and feelings. Children are faced with the challenge of revisiting their grief with every stage of development they undertake with a new and different understanding or perspective. Often times, the families of these children are so overwhelmed by their own grief that they do not know how to emotionally support them. It is vital that the child has someone in their life that is able to understand what they are going through, and is also able to help them on their road to healing. This attachment figure or trusted adult could very well be the student's classroom teacher or school counselor. It is for certain that during this time of grief, the student needs an advocate, someone who cares. A participant's words drawn from the transcript of an interview says it best:

Sometimes I just wish that I could do more to make him happy...I know that it's a process that he has to go through...but you want to...it's sort of like a parent...you want them to be happy...and realizing there's nothing you can do at this time, except for to be there for them.

## REFERENCES

- Ainsworth, M. D. S., & Bell, S. M. (1969). Some contemporary patterns in the feeding situation. In A. Ambrose (Ed.), *Stimulation in early infancy* (pp. 133-170). London England: Academic Press.
- Ainsworth, M. D. S., Bell, S. M., & Stayton, D. (1974). Infant- mother attachment and social development. In M. P. Richards (Ed.), *The introduction of the child into a social world* (pp. 99-135). London: Cambridge University Press.
- Ainsworth, M. D. S., Blehar, M. C., Water, E., & Wall, S. (1978). *Patterns of attachment*. Hillsdale, NJ: Erlbaum.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4<sup>th</sup> ed.). Washington, DC: Author.
- Berns, C. F. (2004). Bibliotherapy: Using books to help bereaved children. *Omega*, 48(4), 321-336.
- Biank, N. M., & Werner-Lin, A. (2011). Growing up with grief: Revisiting the death of a parent over the life course. *Omega*, 63(3), 271-290.
- Black, D. (1998). Coping with loss: Bereavement in childhood. *British Medical Journal*, 316, 931-933.



- Bloom, B., Cohen, R. A., & Freeman, G. Summary health statistics for U.S. children: National health interview survey, 2009. National Center for Health Statistics. Vital Health Statistics, *10(247)*, 2010.
- Bloomberg, L. D., & Volpe, M. (2008). *Completing your qualitative dissertation: A roadmap from beginning to end*. Thousand Oaks, CA: Sage.
- Bowlby, J. (1958). The child's tie to his mother. *International Journal of Psychoanalysis*, *39*, 1-23.
- Bowlby, J. (1969). *Attachment and loss. Vol. 2: Separation*. New York: Basic Books (rev. ed., 1982).
- Bowlby, J. (1973). *Attachment and loss. Vol. 2: Separation*. New York: Basic Books.
- Buglass, E. (2010). Grief and bereavement theories. *Nursing Standard*, *24(41)*, 44-47.
- Corr, C. (1993). Coping with dying: Lessons that we should and should not learn from the work of Elisabeth Kubler-Ross. *Death Studies*, *17(1)*, 69-83.
- Corr, C. (2000). Living with grief: Children, adolescents, and loss. In K. J. Doka (Ed.), *What do we know about grieving children and adolescents* (pp. 21-32). Philadelphia: Brunner/Mazel.
- Creswell, J. W. (2009). *Research design qualitative, quantitative, and mixed methods approaches* (3<sup>rd</sup> ed.). Thousand Oaks, CA: Sage.

- Denzin, N. K., & Lincoln, Y. S. (2007). *The landscape of qualitative research: Theories and issues* (3<sup>rd</sup> ed.). Thousand Oaks, CA: Sage.
- Goldman, L. (2000). *Helping the grieving child in school*. Bloomington, IN: Phi Delta Kappa.
- Hallowell, E., & Ratey, J. J. (2005). *Delivered from distraction: Getting the most out of life with attention deficit disorder*. New York City, NY: Ballantine.
- Hancock, D. R., & Algozzine, B. (2006). *Doing case study research: A practical guide for beginning researchers*. New York City, NY: Teachers College.
- Himebauch, A., Arnold, R. M., & May, C. (2008). Grief in children and developmental concepts of death #138. *Journal of Palliative Medicine*, 11(2), 242-226.
- Kastenbaum, R. (1991). *Death, society, and human experience*. New York City, NY: Macmillan.
- Kubler-Ross, E. (1969). *On death and dying*. New York: Macmillan.
- Le Count, D. (2000). Working with 'difficult' children from the inside out: Loss and bereavement and how the creative arts can help. *Pastoral Care in Education*, 18(2), 17-27.
- Lindemann, E. (1944). Symptomatology and management of acute grief. *American Journal of Psychiatry*, 101(3), 141-149.

- Lohan, J. A. (2006). School nurses' support for bereaved students: A pilot study. *The Journal of School Nursing, 22*(1), 48-52.
- Main, M., & Hesse, E. (1990). Parents' unresolved traumatic experiences are related to infant disorganized attachment status: Is frightened or frightening parental behavior of linking mechanism? In M. T. Greenberg, D. Cicchetti, & E. M. Cummings (Eds.), *Attachment in the years* (pp. 161-182). Chicago: University of Chicago Press.
- Massat, C. R., Moses, H., & Ornstein, E. (2008). Grief and loss in schools: A perspective for school social workers. *School Social Work Journal, 33*(1), 80-96.
- McGlauffin, H. (1990). *How children grieve: Implications for counseling*. (ERIC Document Reproduction Service No. 326789).
- Morgan, J. P., & Roberts, J. E. (2010). Helping bereaved children and adolescents: Strategies and implications for counselors. *Journal of Mental Health Counseling, 32*(3), 206-217.
- Nagy, M. (1948). The child's theories concerning death. *Pedagogical Seminary and Journal of Genetic Psychology, 73*, 3-27.
- Pardeck, J. A., & Pardeck, J. T. (1989). Bibliotherapy: A tool for helping preschool children deal with developmental change related to family relationships. *Early Child Development and Care, 37*, 107-129.

- Parkes, C. (1998). Bereavement in adult life. *British Medical Journal*, 316(7134), 856-859.
- Pehrsson, D. E. (2005). Fictive bibliotherapy and therapeutic storytelling with children who hurt. *Journal of Creativity in Mental Health*, 1, 273-286.
- Perkins, K. D. & Mackey, B. (2008). Supporting grieving children in early childhood programs. *Dimensions of Early Childhood*, 36(3), 13-18.
- Piaget, J. (1955). *The child's construction of reality*. New York City, NY: Basic Books.
- Pratt C. C., Hare, J., & Wright, C. (1987) Death and dying in early childhood education: Are educators prepared? *Education*, 107, 279-286.
- Rando, T. (1984). *Grief, dying, and death: Clinical interventions for caregivers*. 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 School*, 36(3), 219-229.
- Samide, L. L., & Stockton, R. (2002). Letting go of grief: Bereavement groups for children in the school setting. *Journal for Specialists in Group Work*, 27(2), 192-204.
- Smilansky, S. (1987). *On death: Helping children understand and cope*. New York City: NY: Peter Lang.

- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies, 23*, 197-224.
- Thompson, R. A. (2000). The legacy of early attachments. *Child Development, 71*, 145-152.
- Vickio, C. J. (2008). Designing and conducting grief workshops for college students. *New Directions for Student Services, 121*, 41-50.
- Webb, N. B. (2002). Helping bereaved children: A handbook for practitioners. In N. B. Webb (Ed.), *The child and death* (pp. 3-18). New York City, NY: Guilford.
- Westmoreland, P. (1996). Coping with death: Helping students grieve. *Childhood Education, 72*(3), 157-160.
- Willis, C. A. (2002). The grieving process in children: Strategies for understanding, educating, and Reconciling children's perceptions of death. *Early Childhood Education, 29*(4), 221-226.
- Wolfelt, A. (1983). *Helping children cope with grief*. Bristol, PA: Accelerated Development.
- Wood, F. B. (2008). Helping young children cope. *Young Children, 63*(5), 28-31.
- Worden, W. J. (2009). *Grief counseling and grief therapy: A handbook for the mental health practitioner*. New York City, NY: Springer.

Yin, R. K. (2003). *Case study research: Design and methods*. (3<sup>rd</sup> ed.). Thousand Oaks, CA. Sage.

**APPENDIX A**  
**Personal Data Sheet**

### Personal Data Sheet

1. My gender is: \_\_\_\_\_ Female \_\_\_\_\_ Male
2. My age is \_\_\_\_\_ 21-30 \_\_\_\_\_ 31-40 \_\_\_\_\_ 41-50  
\_\_\_\_\_ 50+
3. My race/ethnicity is:
  - a. White
  - b. African American
  - c. Asian
  - d. Hispanic
  - e. Native American
4. Educational Background:

Bachelors Degree	Major area of study
Masters Degree	Major area of study
Doctoral Degree	Major area of study
Other	Major area of study
5. Years of experience in the field of education:
6. Years of employment at current school:
7. Please list all certifications you presently hold: (Please print)
8. Please list your current position at this school:



**APPENDIX B**

**Cumberland County Approval Letter**



**Cumberland County Schools**

ALICIA S. CHISOLM, CHAIR

GREGORY E. WEST, VICE CHAIR

MICHAEL C. BOOSE

KIMBERLY P. FISHER

MACKY HALL

**June 26, 2013**

**P.O. Box 2357**

Fayetteville, North Carolina 28302

910-678-2300

LARRY LANCASTER

JAMES A. MCLAUCHLIN

CARRIE SUTTON

SUSAN B. WILLIAMS

Demarius Washington,

The Cumberland County Schools Research Committee has reviewed the request to conduct research in the Cumberland County Schools. Your study, "The Grieving Student and School Support: Case Study", has been approved.

Please note that Cumberland County Schools does not give out email addresses or phone numbers. Participants will be informed by email providing information on participation in the study. The cover letter that was attached to the original request could be the information that is shared with participants.

We receive numerous requests to conduct research throughout the year. The process is always voluntary and once we send the initial information, we do not get involved with the process. The approval is valid for six months from the date of this approval letter.

Thank you,

Ron Phipps  
Associate Superintendent  
Evaluation and Testing

**APPENDIX C**

**Texas Woman's University IRB Approval Letter**



Institutional Review Board
Office of Research and Sponsored Programs
P.O. Box 425619, Denton, TX 76204-5619
940-898-3378 FAX 940-898-4416
e-mail: IRB@twu.edu

November 11, 2013

Ms. Demarius Washington
39 Croatan Street
Cameron, NC 28326

Dear Ms. Washington:

Re: The Grieving Student and School Support: Case Study (Protocol #: 17469)

The above referenced study has been reviewed by the TWU Institutional Review Board (IRB) and appears to meet our requirements for the protection of individuals' rights.

If applicable, agency approval letters must be submitted to the IRB upon receipt PRIOR to any data collection at that agency. A copy of the approved consent form with the IRB approval stamp is enclosed. Please use the consent form with the most recent approval date stamp when obtaining consent from your participants. A copy of the signed consent forms must be submitted with the request to close the study file at the completion of the study.

This approval is valid one year from November 7, 2013. Any modifications to this study must be submitted for review to the IRB using the Modification Request Form. Additionally, the IRB must be notified immediately of any unanticipated incidents. If you have any questions, please contact the TWU IRB.

Sincerely,

Handwritten signature of Rhonda R. Buckley

Dr. Rhonda Buckley, Chair
Institutional Review Board - Denton

- cc. Dr. Karen Petty, Department of Family Sciences
Dr. Joyce Armstrong, Department of Family Sciences
Graduate School

**APPENDIX D**

**Graduate School Approval Letter**



**The Graduate School**  
P.O. Box 425649, Denton, TX 76204-5649  
940-898-3415 FAX 940-898-3412 gradschool@twu.edu

DENTON DALLAS HOUSTON

0681444

November 21, 2013

Demarius Washington  
39 Croatan Street  
Cameron, NC 28326

**Dear Ms. Washington:**

I have received and approved the prospectus entitled *The Grieving Student and School Support: Case Study* for your Dissertation research project.

Best wishes to you in the research and writing of your project.

Sincerely yours,

Ruth A. Johnson, Ph.D.  
Associate Dean of the Graduate School

kjb

cc: Dr. Joyce Armstrong, Family Sciences  
Dr. Karen Petty, Interim Chair, Family Sciences

**APPENDIX E**  
**Recruitment Letter**

Texas Woman's University

Request for Research Participants

School Support and the Grieving Student: Case study

Investigator: Demarius Washington, Doctoral Candidate; Cell number (919)721-7749

Texas Woman's University Family Sciences Department

Explanation and Purpose of the Research

You are being asked to participate in a research study for Mrs. Demarius Washington's dissertation at Texas Woman's University. Elementary school counselors and classroom teachers of students who have experienced the death of their primary caregiver within the last 24 months are eligible to participate in this study. Elementary school counselors and classroom teachers must also be employees of Cumberland County Schools of North Carolina in order to participate in this study. The purpose of this study is to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations in the school environment among elementary students, ages 6-12, after the death of their primary caregiver(s). The death must have occurred within the last 24 months. The school personnel have an opportunity to examine the child's response to the grief process and their perceptions will be examined. Your participation in this study requires an interview during which you will be asked questions about your opinions, observations, and attitudes relative to your experience working with bereaved students in your school/classroom in the capacity of a school counselor or classroom teacher. The interview will take place in the school counseling office and/or the room of the classroom teacher. The duration of the interview will be approximately 45 minutes. With your permission, the interview will be audio taped and transcribed, the purpose thereof being to capture and maintain an accurate record of the discussion. Your name will not be used at all. On all transcripts and data collected you will be referred to only by way of a pseudonym.

Participation and Benefits

Your involvement in this research study is completely voluntary, and you may discontinue your participation in the study at any time without penalty. The knowledge generated from this research will provide new insights and so inform educational best



practices as it relates to grieving students in the elementary school environment. The results will contribute to the body of knowledge in the field of childhood bereavement and their education. Participants in the study will receive access to the results of the study upon their request via email.

#### Potential Risk

Risks of this study to participants include possible physical discomfort, loss of time, loss of confidentiality, loss of anonymity, and emotional discomfort. Steps to minimize risk include assurance to participants that frequent breaks can be taken during the interview process. The interview can be stopped at anytime by the participant. Interviews will be kept to approximately 45 minutes to an hour. All email communication will be sent and received to the principal investigator's private email specifically set up for this particular research study. However, there is a potential risk of loss of confidentiality in all email, downloading, and internet transactions. Only the principal investigator will have access to this email account. All transcripts of interviews and audiotapes will be locked in a file cabinet that only the researcher can access. Upon successful defense of the researcher's dissertation, all transcripts will be shredded. All audiotaped interviews will be erased after 3 months. Confidentiality will be protected to the extent that is allowed by law. All participants will be provided with a referral list of agencies that provide counseling, crisis intervention, or other services.

#### Volunteering for the Research Study

If you would like to volunteer to be a participant for this study, please call Mrs. Demarius Washington at (919)721-7749, or email at demariuswashington1913@gmail.com.

**APPENDIX F**

**Consent Form**

TEXAS WOMAN'S UNIVERSITY  
CONSENT TO PARTICIPATE IN RESEARCH

Title: School support and the grieving student: Case study

Investigator: Demarius Washington.....demariuswashington1913@gmail.com 919/721/7749

Advisor: Joyce Armstrong, PhD.....Jarmstrong@twu.edu 940/898-2690

Explanation and Purpose of the Research

You are being asked to participate in a research study for Mrs. Demarius Washington's dissertation at Texas Woman's University. The purpose of this research is to explore classroom teachers' and school counselors' perceptions of multi-varied grief manifestations in the school environment among elementary students ages 6-12, after the death of their primary caregiver(s). You have been asked to participate in this study because you are an elementary school counselor or classroom teacher who has had a student that experienced the death of a primary caregiver within the last 24 months.

Description of Procedures

As a participant in this study you will be asked to spend one hour of your time in a face-to-face interview with the researcher. The researcher will ask you questions about your opinions, observations, and attitudes relative to your experience working with bereaved students in your school or classroom. The interview will occur at the Cumberland County School campus where the participant is employed. You and the researcher will decide when the interview will happen. The researcher will decide on a code name for you to use during the interview. The interview will be audio recorded and then written down so that the researcher can be accurate when studying what you have said. In order to be a participant in this study, you must be at least 21 years of age or older and be employed as a school counselor or classroom teacher within Cumberland County Schools of North Carolina.

Potential Risks

The researcher will ask you questions about your experience working with bereaved children. A possible risk in this study is emotional discomfort with these questions you are asked. If you feel you need to talk to a professional about your emotional discomfort, the researcher has provided you with a list of resources to minimize this risk.

Physical discomfort is a risk associated with this study. As a participant in this study you are being asked to spend up to one hour of your time in a face-to-face interview with the researcher. If you become tired, you may take breaks as needed. You may also stop answering questions at any time and end the interview.

Another risk in this study is loss of confidentiality. There is a potential risk of loss of confidentiality in all email, downloading, and internet transactions. Confidentiality will be protected to the extent that is allowed by law. To minimize this risk, all email communication will

be sent and received to the researcher's private email specifically set up for this research study. Only the researcher will have access to this email account. Transcripts of audiotaped interviews will be kept in a locked file cabinet that only the researcher will have access.

Initials  
Page 1 of 2

Loss of anonymity is a risk associated with this study. To minimize this risk, a code name or pseudonym, not your real name, will be assigned by the researcher to you during the interview. The pseudonym will be used on all written transcripts of your audiotaped interview. No one but the researcher will know your real name. The tapes and the written interview will be stored in a locked cabinet in the researcher's office. Only the researcher and the person who writes down the interview will hear the tapes. The tapes and the written interview will be shredded within 1 year after the study is finished. The results of the study could be reported in scholarly journals, but your name or any other identifying information will not be included.

Another risk in this study is loss of time. To minimize this risk, interviews will be kept to approximately 45 minutes to an hour.

The researchers will try to prevent any problem that could happen because of this research. You should let the researchers know at once if there is a problem and they will help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

#### Participation and Benefits

Your involvement in this study is completely voluntary and you may withdraw from the study at any time. The knowledge generated from this research will provide new insights and so inform educational best practices. If you would like to know the results of this study we will mail/email them to you.\*

#### Questions Regarding the Study

You will be given a copy of this signed and dated consent form to keep. If you have any questions about the research study you should ask the researchers; their phone numbers are at the top of this form. If you have questions about your rights as a participant in this research or the way this study has been conducted, you may contact the Texas Woman's University Office of Research and Sponsored Programs at 940-898-3378 or via e-mail at [IRB@twu.edu](mailto:IRB@twu.edu).

Signature of Participant

Date

**\*If you would like to know the results of this study tell us where you want them to be sent:**

**Email:** \_\_\_\_\_

**or**

**Address:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Appendix G**  
**Interview Protocol**

Principal Investigator: Demarius Washington

### Interview Questions

1. How do you know if a student is demonstrating signs of grief?
2. What resources/interventions are available for grieving students from the school?
3. What resources/interventions are made available for the families of grieving students?
4. What professional development and/or resources that address the topic of grief in children are made available for the educational personnel?
5. How is the behavior of the grieving student different from the non-grieving student?
6. What “acting out” behaviors do you see in the grieving student?

7. What are the health issues/concerns that are seen in grieving students?
8. In what ways are school attendance impacted in regards to the grieving student?

Reflections:



## Appendix H

### Theme List

## Theme List

### **School Support Systems**

#### For Students and Families

- School Counseling Services
- Personnel Formal Knowledge Acquisition of Grief
- Personnel Informal Knowledge Acquisition of Grief

### **Interpretations of Grief**

- Non-factor
- Inconsistent
- Acting out/ Disruptive

### **Grief Manifestations**

- Feelings
- Cognitions
- Physical Sensations
- Behaviors

Research Question	Interview Question	Themes
<p>1. How can schools support grieving students and their families?</p>	<ol style="list-style-type: none"> <li>1. What resources/interventions are available for grieving students from the school?</li> <li>2. What resources/interventions are made available for the families of grieving students?</li> <li>3. What professional development and/or resources that address the topic of grief in children are made available for the educational personnel?</li> </ol>	<p>School counseling services are the main source of support for grieving students and their families in the school environment.</p>
<p>2. How is the students' grief interpreted by school personnel?</p>	<ol style="list-style-type: none"> <li>1. How do you know if a student is demonstrating signs of grief?</li> <li>2. How is the behavior of the grieving student different from the non-grieving student?</li> <li>3. What "acting out" behaviors do you see in the grieving student?</li> </ol>	<p>School counselors and classroom teachers indicated that students' grief was inconsistent with the "normal" moods and behaviors observed prior to the student's death experience.</p>
<p>3. How is grief manifested in bereaved school age students?</p>	<ol style="list-style-type: none"> <li>1. What are the health issues /concerns that are seen in grieving students?</li> <li>2. In what ways are school attendance impacted in regards to the grieving student?</li> </ol>	<p>School counselors and classroom teachers indicated a wide array of manifestations of grief within bereaved children, which included behaviors, physical sensations, and feelings.</p>

**Appendix I**  
**Personal Data Summary**

Participant	Gender	Age	Ethnicity	Educational Background	Years of Experience	Years of employment at Current School	Certifications	Position
A1 (Todd)	F	50+	Native American	Masters	5	4	School Counselor and Social Work	School Counselor
B2 (Sadie)	F	31-40	White	Masters	14	4 1/2	School Counselor and LPC	School Counselor
C3 (Beth)	F	31-40	White	Masters	9	3	School Counseling	School Counselor
D4 (Derek)	F	50+	White	Masters	25	19	Guidance & Counseling	School Counselor
E5 (Megan)	F	21-30	African American	Masters	7	2	ELA 6-12; ELA 8-12; ESL supplemental; School counselor	School Counseling
F6 (Makaly)	F	31-40	White	Bachelors	9	1	Reading K-12; Elem Ed K-6	Teacher-5 <sup>th</sup> grade
G7 (Anna)	M	21-30	African American	Masters	4 1/2	3 1/2	ESOL, Middle grades Social Studies and Reading; Elementary Education	3 <sup>rd</sup> Grade Teacher
H8 (Addison)	F	50+	African American	Masters	30	30	Reading Education	3 <sup>rd</sup> Grade teacher