Intervention Development for Camp Mariposa Aaron's Place: Increasing Functioning in Families Impacted by Substance Use Disorder

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Abstract

Substance use disorder (SUD) has negatively impacted many children and families across the state of Indiana. Camp Mariposa Aaron's Place was recently established in the Indianapolis community and serves children aged nine to twelve along with their families to mitigate the harmful impacts that SUD has placed in their lives. This camp offers family and group interventions to instill and equip each individual with the skills needed to navigate relationships and conflicts within the family as they arise. By giving families impacted by SUD a safe space to participate in evidence-based, occupation-driven, and trauma-informed activities, the camp will be able to promote resiliency and enhance communication within the families to increase functioning within the home.

Keywords: substance use disorder, family-based intervention, resiliency, family functioning

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Family Intervention Development for Camp Mariposa Aaron's Place

The overall doctoral capstone experience (DCE) project is for a student to become advanced in a specific skill such as clinical practice skills, research skills, administration, theory development, or program development (Accreditation Council for Occupational Therapy Education [ACOTE], 2018, p. 3). This 14-week period is aimed to help improve the previously mentioned skill sets while problem solving an issue that is prevalent to a project site and developing professionalism in the student. The specific site for this project, Camp Mariposa Aaron's Place of Overdose Lifeline, is in the process of planning and hosting a camp for youth and adolescents affected by substance use disorder (SUD). This camp will include positive mentorship, nature-based activities, and mindfulness strategies for the campers. The parents and guardians are also included in the process, as Camp Mariposa Aaron's Place provides them with opportunities for positive social activities and information on how to build resiliency, enhance communication, and improve family connectedness within the home.

Camp Mariposa

Camp Mariposa (CM) is a nationally known program that offers free of charge year-round camps led by mental health providers, community partners, and educators. This organization aims to address addiction prevention for youth ages 9-17 who have been affected by a family member's SUD while also providing opportunities to connect with peers and trained adult mentors. In 2019, CM provided services for 1,347 youth across the United States (Eluna Network). CM offers six weekend sessions for youth in addition to six additional Saturdays throughout the year where the camper and their families are involved in a family-based activity. Striving to provide early intervention and break the cycle of addiction, CM provides positive

benefits such as establishing social support, introducing coping skills, and encouraging campers to have a positive outlook on their future.

Camp Mariposa was established in 2007 and held its first camp in Seattle, Washington. Since 2007, CM has spread to 16 locations in the United States, one of the newest locations serving the Indianapolis, IN community starting in 2021. Camp Mariposa Aaron's Place plans to have between 20 and 30 campers with a 1:3 mentor to camper ratio. Each overnight camp will be held at Jameson Camp, a 125-acre site that allows inner city children to discover their strengths and the wonders of nature, located on the southwest side of Indianapolis (Broady, 2021). The leadership team at Camp Mariposa Aaron's Place is made up of a group of professionals who bring different experiences and backgrounds to the project, including the Executive Director of Overdose Lifeline, an Assistant Professor from the Department of Occupational Therapy at Indiana University, the Program Director for Camp Mariposa Aaron's Place, and the Clinical Director for Camp Mariposa Aaron's Place. With the extensive knowledge provided by this interdisciplinary team, Camp Mariposa Aaron's Place will provide the youth with positive activities and opportunities for personal growth while providing families with relationship enhancement strategies to lessen the harmful nature of SUD on individuals and increase connectedness and functioning within families.

Needs Assessment

Many children in the state of Indiana have been negatively affected by SUD as the opioid epidemic of the nation continues to increase. Indiana ranks 17th in the nation for drug overdose fatalities, counting 1,245 fatal drug overdoses in 2015 (Balio & Greene, 2017). According to Silverman and Indiana Youth Institute (2019), 9.2% of children living in Indiana have lived with someone who has had a problem with alcohol or drugs, and in 2017 the primary cause of

children being removed from their home by Department of Child Services (DCS) was due to parental drug/alcohol misuse.

A child living with someone who misuses drugs or alcohol is considered to have at least one adverse childhood experience, also known as ACE. These ACEs are defined by the Centers for Disease Control and Prevention (2020) as traumatic events that occur in childhood (0-17 years) that may include but are not limited to experiencing or witnessing violence, abuse, or neglect, having a family member attempt or die by suicide, or growing up in a household with someone diagnosed with mental health problems. The 2018 Child Trends Brief showed that 45 percent of children have experienced at least one ACE, affecting non-Hispanic Black children (61 percent), Hispanic children (51 percent), and non-Hispanic white children (40 percent) (Bradford, 2021). In the state of Indiana, children "have a higher prevalence than their peers nationally in eight out of nine ACEs" (Silverman & Indiana Youth Institute, 2019). When ACEs go unaddressed, children have a higher chance of repeating the same patterns of drug misuse that they experienced in their own childhood (Choi et al., 2017) along with other comorbidities, showing a need for a program to be implemented within the Indianapolis area to promote resiliency.

Although statistics support the need for family-based intervention programs to increase resiliency, a study completed by Kelley et al. (2014) suggested that only one third of substance-using parents would allow their children to participate in mental health treatment, showing a significant barrier when attempting to intervene with at-risk children. It is important for the counselors, staff, and program directors at Aaron's Place to educate families on why family-based intervention is a crucial step to take in strengthening family closeness and the child's resilience.

To achieve the objectives of Camp Mariposa Aaron's Place and decrease the impact that ACEs may have on the program's youth in the future, family-based interventions will be offered in order to increase resiliency and family connectedness at home. Resiliency is defined by the American Psychological Association as "the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress" (2012, para. 4). A study completed by Fang and Schinke (2013) discussed the role of a parent-child program to enhance familial relationships, improve the child's resiliency, and prevent substance use behaviors in the future among the participants. This study was designed specifically for girls who have a mother with SUD but may be generalized to a larger population. Guided by family interaction theory, the intervention period consisted of nine 35-45 minute online interactive therapy sessions. Together, the girls and their mothers completed modules that targeted self-efficacy, problem-solving, refusal skills, parent monitoring, parent-child communication, and parent-child closeness. Fang & Schinke's (2013) results determined that the mother-daughter pairs that received the interactive treatment showed higher parent-child closeness than those that did not. Girls who received this program also demonstrated stronger self-efficacy and resilience in tempting situations. At Camp Mariposa Aaron's Place, family-based interventions will be offered at camp kick-off, closing ceremony, and at six additional family days over the course of the year-long camp that will be centered around increasing parent-child communication and vulnerability within the family.

Ijadi-Maghsoodi et al. (2019) conducted in-depth interviews with parents who have a history of SUD and homelessness. Each parent was interviewed about their family's experiences with SUD, how they cope with stress, what family and service needs they had, experiences with family processes (such as speaking to their children about substance use), what barriers to

service were present, and what recommendations they had for improving and providing substance-use preventative interventions for families experiencing homelessness. Some of the main themes for parents were having a strong sense of guilt over their SUD, being afraid to disclose their SUD in fear of having children taken away, and experiencing difficulty discussing substance use. They also discussed how parent-child relationships have declined and communication breakdown has made it difficult for their family to move forward. The themes of this qualitative study support the need for family-based interventions centered around the parents being open and vulnerable with their children regarding their experiences with SUD (Ijadi-Maghsoodi et al., 2019).

The Gap

Aaron's Place will be utilizing Camp Mariposa's nationally established curriculum for the six overnight weekends located at Jameson Camp. In addition to using this curriculum, the site specifically asked for assistance in creating meaningful family-based interventions for kickoff weekend and the closing ceremony that will take place in Spring 2021 and Winter 2022 respectively. As an occupational therapy student working with Aaron's Place, it is important to find activities that will enhance family functioning to address the site's goals, while also aiming to increase occupational performance, life satisfaction, resilience, and quality of life for the campers and their families. This project will require extensive research to determine different interventions that teach emotional regulation, coping strategies, mindfulness, and other useful life skills, as well as discover interventions that are interesting and adaptable for all family members to participate in.

Problem Statement

As substance use grows throughout the United States, the negative impact SUD has on American children and families grows along with it. With the profession of occupational therapy acknowledging addiction-as-occupation as part of its scope of practice (Wasmuth et al., 2014), the capstone student should design activities that will be valuable, meaningful, and enjoyable to both the campers and their family. The intervention protocols designed by the occupational therapy student should use a trauma-based approach and client-centered care to encourage campers and families to maximize resilience which may improve occupational performance. Qualitative methods will be used to gain insight and feedback on the perceptions and responses to the interventions designed. As program development will be the main area of focus during this capstone project and to ensure that the family-based interventions completed at Camp Mariposa Aaron's Place are meaningful and beneficial to each family's functioning, activities should be designed using evidence-based practice after completing a wide review of the literature.

Literature Review

Extensive research was conducted through databases including PsycINFO, Google Scholar, EBSCO, and PubMed using the following search terms; substance use disorder, resiliency, children or youth, family, expression of emotions, emotional regulation, arts or crafts, poetry, Kawa model, empowerment, mindfulness, and impact on performance. The capstone student studied articles and documents regarding effective family-based treatment interventions, trauma-based approaches in intervention, and family functioning. The literature review supported the methods that were used in designing family-based interventions for Camp Mariposa Aaron's Place.

Mindfulness and Meditation

Studies have been completed showing there is a direct correlation between parental mindfulness and lower parental stress, and in turn, more studies are researching how mindfulness may impact a family's functioning (Burgdorf et al., 2019). A meta-analysis completed by Burgdorf et al. (2009) concluded that "mindfulness interventions for parents are associated with small to moderate immediate and maintained reductions in parenting stress," (p. 19) and also indicated small, immediate, and maintained improvements in youth's overall psychological functioning. It is hypothesized that the improvements in youth outcomes are due to reductions in parenting stress, however due to insufficient studies to compare this relationship there is not enough data to make this claim. In addition to Burgdorf's systematic review, research completed at Pennsylvania State University examined how using mindfulness may impact outcomes for children and youth (Greenberg & Harris, 2012). This research provides the conclusion that providing mindfulness meditation is highly valued when building resilience in children and youth.

Although research is limited regarding mindfulness interventions, studies that have been completed show an improvement in parental stress management and youth's overall attention, behavior problems, and anxiety by using mindfulness in treatment. Due to this conclusion, it may be beneficial for interventions at Camp Mariposa Aaron's Place to involve a short mediation or mindfulness activity before completing an intervention.

Game-based Learning

Game-based learning was built around the idea of learning through repetition and trial-and-error while also being focused on accomplishing goals. Stated by Abrams and LaRocca (2020), players may engage in learning as they use specific tools, develop skills, and understand

and assume the values of the game space. “All games … embody a range of techniques that help to create effective learning experiences,” (Whitton, 2012, p. 252), two of those techniques being leadership skills and role development. These techniques are two important factors within a family that play a role in determining how functional a family is, based on the Process Model of Family Functioning. By giving the participants of Camp Mariposa Aaron’s Place no assigned roles, they can have freedom in deciding what role they want to obtain and determine what will work best in their individual family. Participants can adopt their own roles as needed and by collaborating and communicating, have the opportunity to reach their goals, and exercise creative freedom.

Arts and Crafts

In the early stages of occupational therapy developing as a profession, the practice began combining the medicine and science behind therapeutics with activities that incorporated recreation. In the past, arts and crafts have been observed to stimulate the eye, hand, mind, and creative imagination, and therefore occupational therapy began intertwining arts with science (Levine, 1987).

Arts and crafts as an occupational therapy intervention has been shown to have many positive effects on the body, mind, and soul. After reviewing fifteen studies about creative activities as intervention, Hansen et al. (2020) determined common themes regarding the benefits of creative activities being used as therapeutic intervention. It is stated that “creative activities used as intervention are experienced as meaningful and are used in a safe, facilitating environment,” (Hansen et al., 2020, p. 68) showing the need to establish a safe, secure atmosphere at Jameson Camp before arts and crafts are used as an intervention. Hansen also states there are significant benefits of these interventions due to the creative processes,

experiences, and opportunities for self-expression they allow (2020). As a camper of Camp Mariposa Aaron's Place becomes more comfortable with self-expression personally and with peers, it is assumed that they will become more comfortable with this type of interaction within the family, improving communication and increasing family function. Along with these themes, another important theme of creative activities as an intervention includes participants having the potential to develop skills that may enhance occupational performance and better manage everyday life. These skills developed may be transferred to other environments, such as the home, to improve role competency while offering members of the family the opportunity to reestablish habits (Hansen et al., 2020).

Kawa Model

A model well known to the occupational therapy profession, the Kawa Model aims to help a participant understand the "contexts," such as environmental factors, circumstances, and experiences that are negatively or positively impacting their quality of life, occupational performance, and life satisfaction (Iwama et al., 2009). Along with helping the participant understand their current assets and barriers, the Kawa Model also aids the therapist in understanding their clients on a deeper level.

In this activity, participants are asked to draw a river with different parts of the river symbolizing different parts of their lives. Beginning with drawing a riverbed, this portion of the drawing should represent the client's environment (social and physical) that may hinder or facilitate their life. The next portion of the river to be drawn include rocks. The rocks are meant to represent struggles, hardships, and barriers in the client's life. The size of the rocks should be dependent on how much that specific experience affected them. The following part of the river includes driftwood. According to Richardson et al. (2010):

> Driftwood represents the service user's assets and liabilities. Assets appear as driftwood floating on the river surface and are capable of knocking obstructions out of the way to facilitate life flow. Service user's liabilities take the form of driftwood enclosed amongst rocks, the river sides or bed, and thus block their life flow. (p. 82)

Lastly, the remaining space between the driftwood, rocks, and riverbed represents the participant's life flow, or how they perceive their life. Depending on the number of obstructions in their river, the participant and therapist can determine where the healing may need to begin and set goals in order to increase the participant's "life flow."

Research has been conducted to determine if using the Kawa Model as an intervention is beneficial to the client and therapist. Therapists in a study where they administered the Kawa Model to clients stated they noticed their clients were "able to really understand and use the metaphor in meaningful and fun ways, and [the model was] so easy [to administer]" (Paxson et al., 2012, p. 346). The occupational therapists also stated that they felt that this activity increased client/therapist interaction and energy levels enhancing client-centered care (Paxson et al., 2012). At Camp Mariposa Aaron's Place, these increased energy levels and interaction between campers and their families with the activity leaders is a crucial part of building a safe space for all participants to feel comfortable sharing their life experiences. The Kawa Model may be a meaningful and beneficial activity to incorporate into Camp Mariposa Aaron's Place's kick-off to allow the participants to begin reflecting on what goals they want to achieve and how to improve their life flow.

Poetry

According to an article published by Kreuter (2020), the art of creative writing may be an effective treatment for those recovering from addiction. In his article he states:

> When [men recovering from addiction] write about [their substance use], they are quick to accept responsibility for their past actions and decisions. From there, they can increase their resilience, enough to avoid acting on impulse in the form of a relapsed drive towards getting re-hooked on the drink, drug or combination of choice, as in the patterns of their former lifestyle. (p. 185)

Research supports writing and self-expression as a way for women to heal, as it allows them to work through their personal stories and trauma through re-examining, reflecting upon, and taking ownership of their voices (Pinhasi-Vittorio, 2018). Although the writing process may cause participants to re-live memories that are painful, it allows them to "shift the power from the substance to themselves" (Pinhasi-Vittorio, 2018, p. 221), giving those using this writing tool a sense of empowerment.

In addition to men and women recovering from SUD, the children affected by this disease may benefit from poetry intervention as well. Poetry, when used in a group setting of adolescents, has been shown to express their identity and belonging, connect with each other, and increase engagement and resilience within their small community (Scherlong & Santner, 2018). Because poetry can be used with people of all ages and is extremely cost-effective, Camp Mariposa Aaron's Place may benefit from incorporating poetry into family interventions to increase communication, self-expression, and resiliency.

Narrative Slope

The narrative slope is a guided interview that helps one think about their past, present, and future through their own lens (V. Wilburn, personal communication, January 20, 2021). Based on the Model of Human Occupation (MOHO), the Occupational Performance History

Interview (OPHI-II) is broken up into three parts and is given to clients who can complete a life history interview, primarily determined by the client's age and emotional state (Kielhofner & University of Illinois at Chicago, 2004). In order to complete the interview and form scoring, the therapist should set aside approximately 2 hours of time for the interview from start to finish. Test-retest reliability is unavailable for the OPHI-II, however Rasch analysis indicates that this interview is valid when detecting one's occupational performance (Schultz-Krohn, 2014).

The first part of the OPHI is to complete an interview with the client to learn about their occupational history. This interview is semi-structured and guided by recommended questions listed in the OPHI-II Assessment Manual (Kielhofner & University of Illinois at Chicago, 2004, pp. 25-31). Prior to the interview, the therapist should gain as much information about the client prior in order to help facilitate and enhance the interview.

The second step in the OPHI-II process is administering rating scales that give the therapist insight to the client's occupational identity, competence, and environment. These scales help identify the client's beliefs, perceptions, feelings, and actions and how they are incorporated into aspects of their life. The scales are not a mandatory part of the OPHI-II, however are strongly encouraged as they provide an objective and theory-based review of the client which could potentially alter the manner in which the post-OPHI interventions are conducted.

After this data is collected, the interview moves forward to the final step of the process where the client completes the life history narrative. The narrative slope is an important portion of the OPHI as it gives the parents at Camp Mariposa Aaron's Place an opportunity to realize their own trauma through the experience of personal story telling to become aware of what traumas they are passing on to their children (V. Wilburn, personal communication, January 20, 2021). With the intention to build a sense of community and understand the families and children

more in-depth during Camp Mariposa Aaron's Place, a narrative slope will be conducted at the kick-off gathering.

Theoretical Framework

Process Model of Family Functioning

This capstone project used the Process Model of Family Functioning (PMFF) to guide its occupational therapy basis. This model defines six criteria of family functioning and describes how they connect with each other. Basing its essential components on the McMaster Model of Family Functioning, the PMFF is a process-oriented and dynamic model that describe successful and unsuccessful factors of family functioning (Steinhauer et al., 1984). Occupational therapy has incorporated family-centered practice into its profession, finding common themes to be overcome by the family that include "failure to change power relationships that did not value the central role of parents; the lack of responsive and effective communication; and difficulty with parent-therapist collaboration in goal setting and prioritizing interventions important to the child and family" (Bourke-Taylor, 2017, p. 12). By designing family-based interventions centered around PMFF, it is expected that these interventions will provide children and families at Camp Mariposa Aaron's Place the means to begin healing from the destructive effects from SUD in addition to addressing these common themes. The implementation of PMFF for this project is explained by addressing the components and criteria of the model.

Task Accomplishment

According to Steinhauer et al. (1984), task accomplishment requires a common definition of tasks specific to each individual family and is most likely to occur if there is a common understanding of family goals. As acceptance of authority also impacts the completion of familial tasks, each family member should establish who introduces and identifies family tasks,

how family members may have different approaches when completing tasks, and who is ultimately responsible of ensuring that tasks are completed efficiently and correctly. As a family is more successful with task accomplishment, they are known to function more effectively. The family's ability to complete difficult tasks, such as in times of crises, can be a great way to indicate the family's resilience.

Role Performance

As stated in the process of accomplishing tasks, it is important for family members to understand everyone's individual role. "Role performance requires three distinct operations: (1) allocation or assignment of specified activities to each family member; (2) agreement or willingness of family members to assume the assigned roles; and (3) actual enactment or carrying out of prescribed behaviors" (Skinner et al., 2000, p. 192). Traditional roles are not always considered to be best practice. It is more important for the family to arrive at an agreement of what roles work best for each individual family member and that family members are willing to be flexible if roles needed to be altered at any point.

Communication

Communication allows the information required for effective role performance and task accomplishment to be exchanged (Steinhauer et al., 1984). Communication can be negative or positive, verbal or non-verbal, and can have a critical impact on mutual understanding. In familial communication, it is important for the sender to ensure clarity and directness are being utilized for the receiver to obtain the correct information and decrease the potential for confusion. For both task accomplishment and role performance to be achieved, it is important for all information to be conveyed clearly.

Affective Involvement

Based on the relationships and involvement in each other's lives, affective involvement considers the level and value of family member's interest and concern for each other (Steinhauer et al., 1984). This criteria of the PMFF believes all family members' emotional needs should be met to increase security, autonomy, self-esteem, and independence. As affective involvement become increasingly present in the family's nature, so does supportive involvement.

Control

Components of control are important in maintaining role integration and task accomplishment, influencing family members to ensure goals of the family are being met and tasks are being completed. "Successful control of maintenance functioning, which often requires minor adjustments on a day-to-day basis since task and role requirements never remain constant, is essential for successful task accomplishment. Without it, there is failure of role integration [and] inefficient task accomplishment" (Steinhauer et al., 1984, pp. 82-83). It is important for control to have healthy levels of predictability, constructiveness, and responsibility to produce positive and productive social behavior.

Values and Norms

Values and norms differ between families and are a unique aspect that play a large role in individual family functioning. These norms and values explain what is or what is not considered to be acceptable within that family and provide background on a family that should be taken into consideration when intervening as an occupational therapist. Steinhauer et al. (1984) revealed:

> While some of these are culturally defined, others are unique to an individual family and are determined by that family's Values and Norms. These Values and Norms are influenced by the internalized (psychological) derivatives of the parents' experience

> within their own families of origin; the shared history and experiences of the nuclear family; the effects of cultural and subcultural influences. (p. 78)

The *Occupational Therapy Practice Framework: Fourth Edition* (*OTPF-4*) (American Occupational Therapy Association [AOTA], 2020) explains that performance patterns, such as habits and rituals, and client factors, such as values, beliefs, and spirituality can either support or hinder engagement, participation, and health. It is important to understand families' values and norms when designing and implementing interventions to ensure a client-centered session that can guide an occupational therapist to adapt, modify, or maintain future sessions with the family.

Project Plan and Process

After confirming ODL as the capstone site placement, an initial interview with the site coordinator was conducted. In turn the doctoral capstone student established student learning objectives relating to socially responsive healthcare, critical inquiry and reflective practice, and leadership and advocacy (e.g., "see Appendix A"), and created four overall project goals with eight objectives stating how the student will achieve the project goals (e.g., "see Appendix B"). A second interview was completed with the capstone student, community partners, and stakeholders to determine the site's needs from the doctoral capstone student. Regular weekly meetings were conducted to check-in with the site mentor to discuss plans for the week and goal attainment, as well as regular monthly meetings being held with all members of the Camp Mariposa Aaron's Place leadership team to stay up to date with recruitment, activities, and fundraising.

After discussing the need for family-based interventions to be offered at Camp Mariposa Aaron's Place's kick-off and closing ceremony, a substantial amount of literature was reviewed to determine best practices. Research showed that interventions including game-based learning,

arts and crafts, poetry, and nature are all beneficial when attempting to build resilience in the lives of children and families impacted by SUD.

Jameson Camp, the location for kick-off, closing ceremony, and all weekend camps was toured by the capstone student to get a better understanding of the area where the interventions would be taking place. The capstone student was able to plan interventions and activities accordingly based on knowledge of the camp site and gained an overall understanding of resources available.

Intervention Development Using Cole's Group Protocol

As necessary information became available to the capstone student, effective family-based interventions were developed using strategies from Cole's *Group Dynamics in Occupational Therapy: The Theoretical Basis and Practice Application of Group Intervention: Fifth Edition* (2018). The first step used when designing an intervention was selecting a focus and defining the intervention approach to be used. The *OTPF-4* (AOTA, 2020) discusses five approaches to intervention, three of which are relevant to this project. The first approach, "create and promote", was used to provide activities that can improve occupational performance for participants during camp. The second approach to intervention, "establish", could help the participants of Camp Mariposa Aaron's Place to begin finding activities they can enjoy at home while also discovering coping strategies and mindfulness tools to use outside of camp. The third and final approach, "prevent", was aimed at building resilience in the campers in order to live a healthier and more satisfactory lifestyle.

Cole's following step in designing an effective group protocol was to select a model or frame of reference that supported the activity. For the activities being created for Camp Mariposa Aaron's Place family interventions during camp, the Person Environment Occupation (PEO),

Psychodynamic, and Kawa Models were driving forces to assure the interventions were logical and supported by occupational therapy framework.

After discovering best practices through a prior literature search, the focus for the interventions were designed. A complete group intervention outline included a group title, author frame of reference or model, purpose, group membership and size, group goals and rationale, outcome criteria, methods, time and place of meeting, supplies and cost, and references (Cole, 2018). Full outlines and protocols for Camp Mariposa Aaron's Place can be found in Appendices C through F.

Project Implementation

Intervention Finalization

The creation and delivery of materials was the main implementation method for this capstone project. As protocols were completed by the capstone student using the process stated above, they were sent to the Assistant Professor from the Department of Occupational Therapy at Indiana University and the Clinical Director at Camp Mariposa Aaron's Place for review. Given suggestions by the clinical director and assistant professor, protocols were adjusted to better meet the needs and time constraints of Camp Mariposa Aaron's Place for both kick-off and closing ceremony. All kick-off protocols were discussed with the Camp Mariposa Aaron's Place team members over email communication and during in-person team meetings. A schedule for Camp Mariposa Aaron's Place kick-off event was developed and finalized after being agreed upon by the leadership team. Outcome criteria and surveys were decided to be given after the completion of the interventions to measure the family's satisfaction and understanding of the activity at kick-off. The Camp Mariposa Aaron's Place Program Director was given a materials list by the

doctoral capstone student to ensure all materials required for the family activities were purchased in advance.

As the closing ceremony interventions and activities were not delivered at this stage of the camp process, it was noted to the camp staff that these protocols can be altered as the camp evolves to better meet the camp needs. Instructions and editable templates for these future interventions were included in the material and were sent to the Camp Mariposa Aaron's Place clinical director. As feedback was received, protocols were adjusted to benefit the closing ceremony of the camp.

Intervention Delivery

Camp Mariposa Aaron's Place's kick-off consisted of six families, including participants with widespread ages ranging from preschool-aged children to middle adulthood. Each family included two to six immediate family members, some of the family members being foster parents, adoptive parents and siblings, and biological family members. The doctoral capstone student assumed the activity leader position and led the designed family-based interventions by introducing each family to the activity, explaining the purpose, defining goals, and providing materials. Each activity began with a "mindfulness minute" where the families were introduced to or reminded of coping and emotional regulation strategies to utilize during the activity. The activity leader was available throughout the entirety of the activity and provided verbal cues to allow the family to gauge how much time was left until the conclusion of the activity.

Project Evaluation

A final evaluation was completed via Qualtrics survey that was emailed to the Camp Mariposa Aaron's Place leadership team (e.g., "see Appendix G"). This survey measured overall satisfaction with the activities created, quality of the capstone student's intervention, and

provided free text space for the Camp Mariposa Aaron's Place team to openly share any additional feedback they had. Overall, the interventions were rated as high quality and very valuable. In addition, the Camp Mariposa Aaron's Place team was extremely satisfied with the interventions that were provided by the capstone student. It was also reported by the survey results that Camp Mariposa Aaron's Place will likely use the interventions created during the capstone experience for future kick-offs and closing ceremonies.

A short survey was distributed to each family after the first kick-off activity. Five out of six families reported understanding the purpose of the activity extremely well. Half of the families reported using emotional regulation strategies and good communication skills during the activity. Eighty-three percent of families stated they were overall satisfied with the outcome of the activity. In addition, four out of six families responded that they were planning to do more activities that involve communication and working together at home. After the second kick-off family activity, all respondents reported feeling that these activities helped their ability to communicate with their family members. The positive results from these surveys indicate that the activities designed for Camp Mariposa Aaron's Place kick-off have potential to carry over better communication and connectedness to these family homes.

Discussion and Impact

There is a great need for families in the Indianapolis area that have been impacted by SUD to have the opportunity to participate in family-based interventions aimed to increase communication, family connectedness, and resilience. Over nine percent of children living in Indiana have lived with someone who has had a SUD, and substance misuse is often the primary cause of children being removed from their home by the Department of Child Services (Silverman and Indiana Youth Institute, 2019). Despite Camp Mariposa Aaron's Place being a

part of Eluna Network where they were provided with one year of camp curriculum, they were missing key components to the camp's at kick-off and closing ceremony. Based on Eluna Network's curriculum, campers are given six weekends throughout the year to build resilience within themselves through nature, in addition to six weekend sessions to spend time with their family members in attempts to build resilience and promote functioning within the family. It was important to Camp Mariposa Aaron's Place to offer a kick-off and a closing ceremony that would provide activities and interventions that address familial resilience and family functioning. The purpose of the capstone project was to fulfill this request and design family-based interventions by using an evidence-based and trauma-informed approach.

A thorough review of literature regarding substance use disorder, resilience, and family functioning gave insight as to what activities should be included in the intervention protocols for Camp Mariposa Aaron's Place. Interventions included mindfulness, meditation, game-based learning, and arts and crafts, as well a therapeutic occupational therapy assessment known as the Kawa Model. These interventions collectively are aimed to reduce parenting stress, establish roles, improve psychological functioning, increase collaboration and communication, determine personal goals, and exercise creative expression not only while at Camp Mariposa Aaron's Place, but while the individuals and families participate at home and in the community (Burgdorf et al., 2019; Greenberg & Harris, 2012; Abrams & LaRocca, 2020; Whitton, 2012; Hansen et al., 2020; Iwama et al., 2009; Richardson et al. 2010). Camp Mariposa Aaron's Place hopes to continue utilizing the interventions provided by the capstone student to deepen family communication and give the families more opportunities to work together to reach goals and overcome tasks as a healthy, functioning family.

Sustainability Plan

All evidence-based, trauma-informed, and client-centered interventions created by the capstone student will continue to be utilized at camp kick-offs and closing ceremonies. The Clinical Director at Camp Mariposa Aaron's Place is an occupational therapist who will ensure the camp intertwines therapeutic intervention and fun as much as possible. The Clinical Director reviewed, approved, and observed the interventions that occurred during the kick-off and plans to deliver these interventions at future kick-off and closing ceremonies. The electronic portfolio with all documents was shared with the Clinical Director, the Program Director, the Assistant Professor from the Department of Occupational Therapy at Indiana University, and the Executive Director of Overdose Lifeline. All created materials can be utilized, edited, and adapted in the future to better fit the program and the camp needs.

Limitations

Due to this being Camp Mariposa Aaron's Place first event, the goal of twenty to thirty families was not met, resulting in a low sample size for the activity outcome measurements. A larger sample size to yield more accurate feedback from family activities would be beneficial to Camp Mariposa Aaron's Place and the interventions created by the capstone student. Along with a low sample size, only two of the four interventions were executed and received feedback due to the timing of the camp activities. Ideally, the clinical director will execute the remaining interventions at closing ceremony, receive feedback from the families, and alter the protocols if needed.

Conclusion

Although Camp Mariposa Aaron's Place was provided with one year of camp curriculum, the team requested assistance in creating meaningful family-based interventions for

kick-off and closing ceremony. To accomplish this, family-based activities were designed using evidence-based research and a trauma-informed approach. The activities were intended to build resiliency, improve family functioning within the home, increase occupational performance, and enhance quality of life and satisfaction for the campers and their families. A thorough literature review indicated that interventions centered around game-based learning, arts and crafts, poetry, and nature are likely beneficial in achieving these goals. Utilizing Cole's Group Protocol, two of the four interventions designed were executed at kick-off and received positive feedback from the youth and families impacted by SUD as well as the Camp Mariposa Aaron's Place leadership team. Overall, this project provided the program with interventions, tools, and resources that can be used to continue mitigating the harmful impacts of SUD on youth and families.

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Appendix A. Student Learning Objectives for the Doctoral Capstone Experience

OTD Capstone Student: Allison Solesky

Primary Area of Focus: Community Engagement and Research

Secondary Area of Focus: Family-Based Intervention

Curricular Thread: Socially Responsive Health Care

Outcome: *Graduates will demonstrate entry-level competencies in providing client-centered, inclusive, equitable, and research informed care in professional practice.*

Student Learning Objective 1: Student will report higher confidence in group planning and intervention strategies at the end of the capstone experience.

Curricular Thread: Critical Inquiry & Reflective Practice

Outcome: *Graduates will be prepared to apply principles of evidence based and evidence informed decision making in professional practice to improve and expand the delivery and quality of occupational therapy services.*

Student Learning Objective 2: Student will research and utilize evidence-based practice when designing and implementing family-centered, occupation-based interventions to expand and improve the quality of service during family-based intervention.

Curricular Thread: Leadership and Advocacy

Outcome: *Graduates will demonstrate leadership and advocacy to promote health, well-being, and quality of life for people, populations, and communities.*

Student Learning Objective 3: Student will lead evidence-based group interventions and advocate for the health and well-being of families affected by substance use disorder (SUD) to promote health, well-being, and satisfaction of life for those participating in intervention.

Appendix B. Student Project Goals and Objectives for the Doctoral Capstone Experience

Project Goal 1: Group interventions will be designed using an occupation-based and evidence-based approach for at-risk families at Aaron's Place within 4 weeks of starting the capstone project.

Objective 1: Student will research best practices and find evidence that demonstrates family-based and group interventions are successful and which interventions show progress in at-risk family cohesiveness.

Objective 2: Design community minded interventions respecting budget, frequency, and preference.

Project Goal 2: Each family-based intervention will be completed by utilizing an activity analysis to ensure interventions are well-thought out, planned, and have the ability to be graded based on population needs.

Objective 1: Identify appropriate systematic activity analyses utilizing evidence-based resources.

Objective 2: Complete activity analysis at least 2 weeks before intervention delivery to ensure the activity is within budget, all materials are available, and can be appropriately graded.

Project Goal 3: Feedback will be evaluated through an existing survey that measures family connectedness to determine the overall satisfaction of the family as a whole and of individual family members after each intervention session.

Objective 1: Survey will be identified to measure individual and overall family satisfaction of the services they are receiving.

Objective 2: Survey will be administered after every family-based group intervention session.

Project Goal 4: A digital portfolio will be presented to Overdose Lifeline, my community site mentor, and other stakeholders that include intervention and activity analyses, literature, evaluation feedback, and other project-related materials by the end of the capstone experience.

Objective 1: Create a digital folder and/or portfolio with all project-related material to give to stakeholders by the end of the capstone experience.

Objective 2: Meet with site mentor and stakeholders regularly to discuss addition, content, and potential changes to keep project folder current.

Appendix C. Group Intervention Outline – Kick-off Activity 1

Group title: Sticky Spaghetti Structure

Author: Allison Solesky, OTS

Frame of reference or model: Model of Social Interaction

Purpose: Encourages social interaction between family members to enhance communication and collaboration between individuals.

Group membership and size: Closed group membership, approximately 15 youth and their parents/guardians (x2 sessions)

Group goals:

1. Each individual family will collaborate to build a structure with the provided materials that stands alone for at least 20 seconds.
2. Family members will communicate effectively (i.e. using positive language, listening to other's ideas and concerns, being respectful to each family member) to accomplish goal of building the tallest structure.
3. Family members will display appropriate reactions to trial-and-error portion of activity, including coping mechanisms and emotional regulation, if project doesn't go as expected.
4. Family members will constructively discuss individual family member's strengths and weaknesses noticed during the activity at the end of the activity.

Rationale, limitations, adaptations: Rationale for these goals includes the intent for family members to collaborate, bond, and communicate while having fun in a safe environment. Limitations may include the space allotted for structure to be built along with having enough responsibilities for everyone to participate (depending on size of family). Adaptations to make the activity harder include 1) allowing the family to only use nonverbal communication or 2) that

the materials cannot be altered (spaghetti can't be broken, marshmallows can't be torn apart). To make the activity easier, examples of spaghetti structures can be given for families to follow instead of creating plan themselves.

Outcome criteria: A simple five question measurement will be given to each family at the end of the activity with Likert type responses. These questions are intended to measure the family's satisfaction with the activity.

Please answer each question by circling the number that matches with your family's thoughts and feelings about this activity. Thank you!

How well did your family understand the purpose of this activity?				
Not at all		*Somewhat*		*Extremely*
1	2	3	4	5
How often did your family use deep breathing, counting to 10, or positive self-talk during this activity?				
None		*Sometimes*		*Always*
1	2	3	4	5
How often did your family use good communication skills (i.e. being respectful, listening to each other, etc.) during this activity?				
None		*Sometimes*		*Always*
1	2	3	4	5
How satisfied is your family with your structure?				
Not at all		*Somewhat*		*Extremely*
1	2	3	4	5
Does your family plan to do other activities or games like this at home?				
No	*Maybe*	*Yes*		

Methods: This activity should take a total of 20 minutes to complete. Activity will start by the activity leader encouraging families to participate in a "mindfulness minute" that should briefly discuss emotional regulation strategies to be used (i.e., positive self-talk, breathing exercises, counting to 10) during the activity followed by explaining the purpose of the activity (5 minutes). Each family will receive a total of 30 uncooked spaghetti noodles and 15 mini marshmallows to build their structure. Each family will then discuss, plan, and build their structure together (10

minutes). If families finish before the 15-minute time period is up, they should participate in conversation starters located in the middle of the table. At the end of the 10 minutes, the activity leaders will see which structures reached the goal of standing alone for 20 seconds. The activity leader will instruct each family to constructively discuss individual strengths and weaknesses. After family discussion, each family will be asked to complete outcome survey (5 minutes).

Time and place of meeting: This activity is to be completed at the Camp Mariposa – Aaron's Place Kick-off. It will take place in the large gathering area at Jameson Camp and should practice social distancing. The activity should occur before kids split to meet their mentors as a fun introduction to the day.

Supplies and cost:

3 16 oz. boxes of spaghetti @ $1.29 each = $3.87

2 16 oz. bags mini marshmallows @ $1.89 = $3.78

Total: $7.65

References:

Abrams, S. S., LaRocca,T. (2020). Play in the making. In C. A. McClean & J. Rowsell (Eds.), *Maker literacies and maker identities in the digital age: Learning and playing through modes and media*. (pp. 34-55). Taylor & Francis Group. https://doi.org/10.4324/9781003049241

Appendix D. Group Intervention Outline – Kick-off Activity 2

Group title: Making Masks

Author: Allison Solesky, OTS

Frame of reference or model: Person Environment Occupation (PEO) Model

Purpose: Allows each individual family member to differentiate what they choose to show people versus what they are feeling and going through in reality.

Group membership and size: Closed group membership, approximately 15 youth and their parents/guardians (x2 sessions)

Group goals:

1. Each family member will reflect upon why they share or hide certain aspects of their life to begin internal acceptance and healing.
2. Family members will be encouraged to communicate at least one item they share with the world and one item they hide to the other family members to increase trust and vulnerability within the family.
3. Family members will participate in active listening when each family member is presenting their experiences to make each person feel heard and more understood.
4. Family members will use time of discussion to give reassurance about personal topics and talk about areas of agreement, disagreement, and concerns within the family.

Rationale, limitations, adaptations: Rationale for these goals includes the intent for family members to share experiences related to their past and present. This helps parents and the youth to have a deeper understanding of what all family members are feeling. Narrative medicine will be utilized throughout this activity, allowing participants to gain empowerment as they are the ones in control of their own stories. Limitations may include the willingness of family members

to be vulnerable with each other along with the possibility of discouragement due to a lack of artistic abilities. In addition, family members may choose to withhold experiences due to the content having the possibility of triggering painful past experiences. Family members will not be forced to share a specific amount of information but will be given the opportunity to share only what they want to. One adaptation to this activity is to have the family collectively create a list of things they show to others and things they hide then create one family mask, similar to a family crest.

Outcome criteria: At the end of the activity, the leader will propose a question to each family: "Did this activity help or hurt your ability to communicate with your family members? How?" On the outcome criteria sheet of paper (located in a different document), each individual should write a couple sentences, draw a picture, or make a list to answer the question. Express that they do not need to write their names on the paper or identify themselves. The answers to the question should be collected and analyzed to understand themes and determine if this activity helped family members achieve the group goals.

Methods: This activity should take a total of 40 minutes to complete. Activity will start with a "mindfulness minute" followed by the activity leader explaining the purpose of the activity (5 minutes). Paper and writing utensils will be on the table and each member will make a list of 5 things they allow the world to see on one side of the paper. They will then flip the paper over and make a list of 5 things they hide from the world. Each family member will receive a mask along with art supplies such as glue, construction paper, stickers, paint, markers, sequins, etc. Each family member will decorate the inside of the mask based on the list of items they hide from the world. They will also decorate the outside of the mask to represent the list they made of things that people see. (20 minutes). If families finish before the 20-minute time period is up, they

should participate in conversation starters located in the middle of the table. At the end of the decorating time, the activity leader will encourage each family member to explain one item they show to others and one feeling or item they keep hidden (10 minutes). This discussion should help each family member understand each other on a deeper level and improve their willingness to communicate with their family members in the future. To close the family discussion, each family member will answer the outcome criteria question (stated above) and use the remaining time to do an individual reflection on the activity (5 minutes).

Time and place of meeting: This activity is to be completed at the Camp Mariposa – Aaron's Place Kick-off. It will take place in the large gathering area at Jameson Camp and should practice social distancing. The activity should occur toward the end of the day in order for the families to have "warmed up" to the idea of being vulnerable.

Supplies and cost:

30 pack paper mache masks * 4 (4 members per group/family) @ $22.99 = $91.96

Art supplies = $10-20 (could ask for donations, see what Jameson Camp has available)

Paper and pencils = $6.00

Total: $111.96

References:

Beauregard, C. (2014). Effects of classroom-based creative expression programmes on children's well-being. *The Arts in Psychotherapy, 41*(3), 269-277. https://doi.org/10.1016/j.aip.2014.04.003

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Appendix E. Group Intervention Outline – Closing Ceremony Activity 1

Group title: Poem for Me

Author: Allison Solesky, OTS

Frame of reference or model: Psychodynamic Model

Purpose: To allow family members to express their emotions and feelings about their experiences with SUD and Camp Mariposa at Aaron's Place through poetry

Group membership and size: Closed group membership, approximately 15 youth and their parents/guardians (x2 sessions)

Group goals:

1. Each family member will express feelings and emotions through writing one poem regarding their experience with camp or with SUD within 15 minutes.
2. Each camper will share their poem with another camper displaying cohesiveness and trust built between campers.
3. Each family member will share their poem with all family members by end of activity showing increased family connectedness.
4. All family members will listen actively and respectfully to everyone's poem by activity close revealing enhanced family functioning.

Rationale, limitations, adaptations: Rationale for this activity includes the intent for family members to use a coping strategy and express emotions in a healthy way. This activity may also increase communication within the family for them to transfer home after camp closing. Limitations may include the unwillingness of family members to share a personal poem due to fear of a negative response from family. To adapt this activity for someone having difficulty

writing a poem, a more specific prompt can be given to them to assist in initiating the writing process.

Outcome criteria: This activity will be measured qualitatively, as the activity leader should ask the following questions during the group discussion:

- Have you used poetry as a tool to express emotions in the past?
- Is poetry a tool that you can see yourself using after camp in order to express emotions in the future?
- How easy or difficult was it to write a poem?
- What new information did you learn about yourself or about your family members during this activity?

Methods: This activity should take a total of 45 minutes to complete. Activity will start by the activity leader and families participating in a "mindfulness minute" that should include a brief meditation to bring individuals to the proper mindset for the activity. The activity should be introduced by the activity leader, including the methods of the activity and its purpose (5 minutes). Each family will receive an assortment of writing utensils and a short stack of lined loose-leaf paper. Each individual family member will be presented with questions to think about such as:

- How are you feeling at this moment?
- With camp coming to a close, what are some of your biggest takeaways?
- What have you learned?
- How have you (or your children) grown since the beginning of camp?
- Is there anything you have never shared before that you might be ready to?
- What was the most meaningful activity over the past year?

- How will you use the information you've gained from camp to help you in the future?

Each family member and camper will then have time to write a poem about camp. The questions above can be used as prompts for those having difficulty in writing a poem. Templates of poems (i.e., haiku, ab cd e) will be placed on each table for individuals to decide what style they want their poem to be in. The poem doesn't have to rhyme or be in complete sentences and can be as long or short as they want. It should include words of inspiration for themselves or others (15 minutes). At the end of the 15 minutes, campers and parents/guardians will have the opportunity to share their poems with each other (10 minutes). The large group of families will then reconvene and the activity leader will give the individuals time to fill out the outcome criteria sheet (5-10 minutes).

Time and place of meeting: This activity is to be completed at the Camp Mariposa – Aaron's Place Closing Ceremony. It will take place in the large gathering area at Jameson Camp and should practice social distancing. The activity should occur mid- to end of the day as activity may be emotional.

Supplies and cost:

Pencils (40 count) = $12.39

Loose leaf lined paper (175 sheets) = $0.99

60 5x7 photo frames (Dollar Tree order in bulk) = $60

Total: $73.38

References:

Kreuter, E. A. (2020). Incorporation of expressive writing in the treatment of drug and alcohol addiction. *Journal of Poetry Therapy, 33*(3), 179 -186. https://doi.org.10.1080/08893675.2020.1776968

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Appendix F. Group Intervention Outline – Closing Ceremony Activity 2

Group title: Making My River

Author: Allison Solesky, OTS

Frame of reference or model: Kawa Model

Purpose: Allows each family member to tell their life story through the metaphor of a river. Allows each member of the family to get a deeper understanding of each other and reflect on their own lives.

Group membership and size: Closed group membership, approximately 15 youth and their parents/guardians (x2 sessions)

Group goals:

1. Each family member will identify current problems and challenges within their personal lives that are impacting their overall well-being.
2. Family members will recognize at least 3 personal barriers that are limiting them from ideal satisfaction and quality of life.
3. Family members will identify up to 7 personal factors that can be positive or negative, such as personality, values, or skills.
4. Family members will state 2 long-term and 4 short-term goals to decrease current and potential barriers.
5. Family members will participate in active listening when each family member is presenting their river model to increase understanding of presenter's feelings and experiences.

Rationale, limitations, adaptations: Rationale for this activity is for the family member to have a deeper understanding of their feelings due to their previous and current experiences. This

activity will encourage each family member to reflect on their past and set goals for themselves based on how to increase the "flow" of their river. Limitations may include the willingness of family members to be vulnerable with each other. They may be hesitant to share certain aspects of their lives with each other due to fear of disappointment, anger, or judgement. Family members will not be forced to share a specific amount of information but will be given the opportunity to share what they want to. One adaptation to this activity is to have the family members create a list of riverbeds (environment), rocks (current difficulties and barriers), driftwood (values, personality, resources), and satisfaction with life. They could then rank the rocks, driftwood, and riverbed into which impact their lives the most and how they need to adapt in order to increase life satisfaction.

Outcome criteria: Clients should write long- and short-term goals while making a plan of how they will increase their life satisfaction or "river flow." Long-term goals should be written for one year from now as camp is coming to a close. Short-term goals can by written by month-to-month basis.

Goal Attainment Scale (GAS) should also be utilized to measure group goals 2-4:

> Family members will recognize at least 3 personal barriers that are limiting them from ideal satisfaction and quality of life.

+2	Family members recognize more than 5 barriers limiting life satisfaction and QoL
+1	Family members recognize 5 barriers limiting life satisfaction and QoL
0	Family members recognize 3 barriers limiting life satisfaction and QoL
-1	Family members recognize 1 to 2 barriers limiting life satisfaction and QoL
-2	Family members do not recognize any barriers limiting life satisfaction and QoL

Family members will identify up to 7 personal factors that can be positive or negative, such as personality, values, or skills.

+2	Family members recognize 7 positive or negative personal factors
+1	Family members recognize at least 6 positive or negative personal factors
0	Family members recognize 4 or 5 positive or negative personal factors
-1	Family members recognize 1 to 3 positive or negative personal factors
-2	Family members do not recognize any positive or negative personal factors

Family members will state 2 long-term and 4 short-term goals to decrease current and potential barriers.

+2	Family members create 2 long-term and 4 short-term goals
+1	Family members create 2 long-term and 2-3 short-term goals
0	Family members create 1 long-term and 2 short-term goals
-1	Family members create 1 long-term or 2 short-term goals
-2	Family members do not create long- or short-term goals

Methods: This activity should take a total of 45 minutes to complete. Activity will start with the activity leader explaining the purpose of the activity (5 minutes). Paper and drawing utensils will be on the table. Each table should have a generous amount of nature-based material (rocks, sticks, etc.) most likely collected from a nature hike prior to the activity start to incorporate a deeper nature connection. The activity leader will set the mood for relaxation and meditation (dimmed lights and light music). The leader will then instruct everyone to draw their river with step-by-step prompts throughout the entire activity. If preferred, the family members can also utilize the nature materials at the center of the table to design their river before drawing it out on paper (20 minutes). At the end of the drawing time, the activity leader will encourage each family member to explain their rivers to other family members. This discussion should help each family member understand each other on a deeper level and improve their willingness to

communicate with their family members in the future (10 minutes). To close the family discussion, each family member should use the remaining time to do an individual reflection on the activity and set long-term and short-term goals in effort to increase their "river flow" (10 minutes). If families finish before the 10-minute time period is up, they should participate in conversation starters located in the middle of the table. River drawings should be collected by activity leader and analyzed to determine how individuals did reaching the group goals.

Time and place of meeting: This activity is to be completed at the Camp Mariposa – Aaron's Place Closing Ceremony. It will take place in the large gathering area at Jameson Camp and should practice social distancing. The activity should occur as a preparatory activity for the narrative slope as this activity could potentially put the parents in a mind frame necessary for an effective narrative slope as well as the campers for a nature hike.

Supplies and cost:

Ream of printer paper = $6.79

Pack of markers for each family (COVID-19 safety) * 15 = $21.45

Total: $28.24

References:

Iwama, M. K., Thomson, N. A., & Macdonald, R. M. (2009). The Kawa model: the power of culturally responsive occupational therapy. *Disability and rehabilitation*, *31*(14), 1125–1135. https://doi.org/10.1080/09638280902773711

Richardson, P., Jobson, B., & Miles, S. (2010). Using the Kawa model: a practice report. *Mental health occupational therapy*, *15*(3).

Appendix G. Camp Mariposa Aaron's Place Staff Satisfaction Survey

Question 1. How would you rate the quality of the interventions provided by the student?

a. Very high quality
b. High quality
c. Average quality
d. Low quality
e. Very low quality

Question 2. How valuable are the family-centered interventions provided to you by the student?

a. Extremely valuable
b. Very valuable
c. Somewhat valuable
d. Not so valuable
e. Not at all valuable

Question 3. How satisfied are you with the overall product provided by the capstone student?

a. Extremely satisfied
b. Somewhat satisfied
c. Neither satisfied nor dissatisfied
d. Somewhat dissatisfied
e. Extremely dissatisfied

Question 4. How well did the capstone student meet the needs for this project?

a. Extremely well
b. Very well
c. Somewhat well

d. Slightly well

e. Not well at all

Question 5. How responsive was the capstone student to your questions and concerns?

a. Extremely responsive

b. Very responsive

c. Somewhat responsive

d. Not so responsive

e. Not at all responsive

Question 6. How likely are you to use the family-based interventions provided by the capstone student during future kick-offs/closing ceremonies?

a. Extremely likely

b. Somewhat likely

c. Neither likely nor unlikely

d. Somewhat unlikely

e. Extremely unlikely

Question 7. Is there anything the capstone student could have done differently to make this partnership/experience better for Camp Mariposa Aaron's Place?

Free response

Question 8. In what ways did having the capstone student help Camp Mariposa Aaron's Place?

Free response

Question 9. Do you have any other questions, comments, or concerns?

Free response