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## Constructing Culturally Sensitive Creative Interventions for Use with Grieving Children and Adolescents

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### ABSTRACT

A family's culture dictates not only the established traditions for mourning, but also the ways in which a person may internalize the experience of loss. In addition to viewing death within the context of their family's culture, children's understanding of death and experience of grief will also depend upon their level of cognitive development. In this practice-based article, the authors explore developmental and cultural considerations for mental health practitioners counseling children and adolescents who are navigating the grieving process. After detailing steps for enhancing cultural sensitivity, two case studies are presented that describe various ways to utilize culture-specific knowledge when creating developmentally appropriate interventions.

### KEYWORDS

Play therapy, cultural competence, grief counseling, children and adolescents, creativity and counseling

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While it is known that culture is a foundational element of a person's life, it is perhaps never more evident than when a client is working through the grieving process. A family's culture can dictate not only the established traditions for mourning (e.g., perceptions of burial and cremation, funeral and memorial services, acceptable lengths of time for grieving, allowable expressions of grief, and the use of customs and rituals; McGoldrick et al., 2004), but also the ways in which the person may internalize the experience of such a loss. Green (1998) described culture as a way of life that consists of prescribed ways of behaving and norms for beliefs, values, and skills. Cultures have their own coping systems which describe unique practices for structuring families and identifying and solving problems (Green, 1998). It is essential that counselors take their clients' cultural coping systems into consideration when conceptualizing each client's phenomenological view and when determining interventions for helping the client navigate and process grief. In this article, the authors will discuss steps counselors can take to enhance their cultural sensitivity when working with grieving children and adolescents. They will then provide two case studies that include using culture specific knowledge to create developmentally appropriate interventions for use with these client populations.

### Culturally and developmentally appropriate interventions

In addition to viewing death within the context of their family's culture, children's understanding of death and experience of grief will depend partially upon their level of cognitive development (Giblin & Ryan, 1989; Wolfelt, 1983). Counselors must take developmental level into consideration when selecting techniques intended to help the client communicate and process his or her grief experiences. Effective

counseling with children and adolescents requires that practitioners do more than adapt adult counseling techniques (Landreth, Baggerly, & Tyndall-Lind, 1999). Due to the natural progression of cognitive development, children under the age of 12 typically have difficulty using abstract verbal reasoning skills to discuss their concerns and emotions with a counselor (Piaget, 1962). Play serves an important purpose for children, helping them to learn and navigate the developmental spectrums of cognitive, emotional, and social growth (Elkind, 2007). For young clients, play is the symbolic language of their self-expression (Landreth, 2012); toys and expressive arts are their words and processing mechanisms. Although older adolescents are more capable of abstract reasoning and verbal processing than younger children, determining exactly where adolescents fall along that spectrum can still pose a challenge. Techniques that include expressive arts media, such as drawing, creating with clay, writing poetry and stories, and the use of sand tray, allow the counselor to encompass a larger span of the developmental spectrum when considering appropriate interventions. These types of interventions provide older children and adolescents the ability to communicate and express their experiences and emotions in a manner they typically find safe and cathartic. While processing the activity, counselors can then guide their clients through the progression of verbally exploring what they have created and understanding how it relates to their current situation. While the act of playing, which includes expressive arts, can have some unique characteristics between different cultural groups (Lancy, 2007), the desire for and presence of benefits associated with play are common childhood experiences across cultures (Gosso, 2010; Lancy, 2002).

### **Steps for enhancing cultural sensitivity**

Lopez (2011) developed a set of practical guidelines for helping counselors to honor cultural diversity while working with grieving adolescents. She recommends that the counselor begins by developing a deeper understanding of her or his own culture, race, and ethnicity as well as the ways in which they influence daily life. The counselor must also examine personal experiences with loss and how personal culture has influenced grief reactions, responses, and behaviors. Next, she recommends that the counselor explore his or her personal and professional experiences with diverse cultural groups and examine all biases related to them.

To engage in this self-exploration process, counselors can utilize creative techniques like those they might implement with clients. For example, a counselor may not be readily aware of his or her biases that relate to clients with varying levels of ability/disability, who are in themselves a distinct cultural group (Gill, 1995). To help supervisees identify elements of countertransference when working with a client from this population, the first author asked trainees to create a concrete representation of the worst disability they can imagine themselves being affected by. This depiction can be created in many ways, including the use of clay, drawing symbols on paper, or constructing a scene with miniatures used in sand tray therapy. The supervisee then studies the representation and describes the disability aloud. Supervisees often select blindness as their most feared disability. When asked to describe the imagined experience of being blind, supervisees have identified themes such as being completely helpless and isolated, neither of which is typically the actual experience of a person who is blind. These themes, however, describe hidden biases which supervisees are often surprised to discover. As the counselors' countertransference is triggered, these inaccurate beliefs can become generalized assumptions and bring about reactions to clients who have other types of disabilities. Therefore, identifying, exploring, and modifying biases such as this (i.e., people with disabilities are helpless and isolated) is important for the counselor in order to provide more culturally competent services to members of this population.

Once a counselor has a strong understanding of the intrapersonal aspects of cultural sensitivity, attention can shift to the cultural identification of the client. Culture is a multilayered phenomenon that goes beyond race and ethnicity, and any one client may belong to multiple cultures at a given time (Lopez, 2011). For example, Lopez (2011) asserts that the developmental stage of adolescence represents an individual culture

with its own unique characteristics and norms that includes ways of behaving, communicating, identifying problems, and seeking support. The culturally sensitive counselor acknowledges that a child or adolescent may have many cultural affiliations and allows the client to self-identify his or her own cultural groups.

Additionally, counselors must always recognize that there is diversity within diversity. Although cultural norms can be acknowledged, there are exceptions to the norm, and varying levels of acculturation may exist even within a given family. It is important to remember that even individuals who are further along the continuum of acculturation may revert to more traditional values and behaviors while experiencing grief (Vasquez & Rosa, 2011). The counselor can research the client's cultural affiliations to develop a greater awareness of common cultural beliefs, values, and practices related to the experiences of grief.

The culturally competent counselor will intentionally focus on acknowledging, honoring, and/or celebrating the unique aspects as he or she considers the client's culture. This can be more challenging than it may sound at first because some culturally ingrained beliefs may be deemed counterproductive to healing by counselors of a different belief system. For instance, some Asian cultures believe that the death of a young child can be the direct result of mistakes made by a parent in a past life (Braun & Nichols, 1997). As one or both parents experience guilt over the child's death, the client's belief of being at fault can be difficult to accept. Some counselors find themselves stuck viewing the cultural belief as the problem that must be fixed, however, to be culturally sensitive, the counselor needs to find a way to be more accepting of the client's belief and return to the larger issue of processing the loss. One way to do this is to think of an example in which the counselor would understand the parent feeling at fault for the death of the child. Perhaps it would make better sense to the counselor if, hypothetically, the parent had tragically run over the toddler by accident while backing out of the driveway. If the child's death had occurred in this way, would the counselor feel that it was still possible to help the parent through the grieving process? If so, the counselor should proceed with the parent from this newfound perspective understanding that he or she can be of assistance even if the parent feels guilt and blame. Once the counselor has recognized the many cultural components to the client's grieving process, strategies and interventions for counseling the child or adolescent are developed from the context of the identified culture(s).

## **Grief across cultures**

Some researchers assert that grief is not the same across cultures (Rosenblatt, 2008, 2009, 2010, 2012; Rosenblatt & Wallace, 2005), with different groups experiencing varying levels of emotional intensity and periods of duration. Cowles (1996) found that focus groups of individuals from five broadly defined cultural groups (e.g., African, Asian, Anglo, Native American, and Hispanic) largely agreed that all people, regardless of culture, share a similar intrapersonal experience of grief that includes immense sadness and can be mitigated by the relationship to the deceased, the presence or absence of support, and previous life experiences. Regardless, cultural groups often have very different mourning rituals and traditions that contribute to individuals' preferred ways of navigating their grief.

In the following section, the authors discuss case studies that include common beliefs and rituals for two broadly defined cultural groups (i.e., Latino/a and Chinese American) and then use this information to create counseling interventions for an adolescent and a child within these groups. Although a thorough discussion of each culture's background, perceptions and experiences of death and grieving is beyond the scope of this article, additional resources can be found in the Reference section of this article for further study. Again, the authors emphasize the importance of recognizing that there will be diversity within diversity when conceptualizing individuals of any given culture.

## **The use of sand tray with a Mexican American adolescent**

Gerardo, a seventeen-year-old Mexican American male, lost his father to a sudden aneurysm four months prior to seeking treatment. This tragedy had left Gerardo as the only male in his household which included

his mother, maternal grandmother, and two younger sisters. There were also new financial concerns in the family with the loss of his father's income. Although he had always been a strong student academically, Gerardo struggled to concentrate in school and complete his assignments after his father's death. When he sought counseling, Gerardo was halfway through his senior year of high school, and his mother was concerned about his declining grades and the amount of time he was spending away from home with his friends. In addition to missing his father, Gerardo disclosed to his counselor that he generally found himself engulfed in guilt and anxiety about his family's changing expectations of him. Furthermore, he felt weak acknowledging these emotions and believed he was failing at becoming a man.

Two concepts that are important to respect within Latino populations are those of *machismo* and *familismo* (Vasquez & Rosa, 2011). *Machismo* describes an aspect of male gender norms within many Latino populations. This norm dictates that a male is not to show weakness or cry and should be the leader of the family, protect those weaker than himself (such as women and children), behave in ways that show strong masculinity, and maintain the pride and dignity of the family (Vasquez & Rosa, 2011). In traditional families, males may be viewed as superior to females and are expected to exhibit jealousy and protectiveness toward property and family members. Anger is an acceptable emotion and may be perceived as a demonstration of strength. *Familismo* is a cultural concept in which the family comes before any individual within this collective culture (Vasquez & Rosa, 2011). A grieving Latino client's family may be the greatest support he or she has, however, members may also communicate and reinforce some cultural beliefs that can induce guilt. For example, it is sometimes accepted that one can lose an important family member because the grieving person's faith was not strong enough (Vasquez & Rosa, 2011).

When a man dies within a Latino family and a struggling male adolescent becomes the eldest male, he may benefit from examining the ways in which *machismo* and *familismo* are impacting his identity development (Lopez, 2011). The male adolescent client may feel the need to take time away from the family and engage in activities with his friends while his relatives may expect him to step up, be actively engaged, and become the leader of the family. The client may benefit from examining how these cultural concepts are affecting not only his grieving process, but also his developing identity (Lopez, 2011). A direct exploration of these concepts with an informed counselor can be beneficial for the adolescent as he adjusts to his new roles.

A creative intervention that could assist Gerardo with this process was directive sand tray. Ethical use of sand tray therapy, both directive and nondirective, requires that the counselor have specialized training. Once achieved, this modality allows counselors to assist clients as they symbolically explore and organize internal beliefs and processes (Homeyer & Sweeney, 2011). To provide sand tray therapy, the counselor utilizes a sand tray filled with sand and a collection of miniatures that can concretely represent multiple aspects of the client's world. The culturally sensitive counselor has a collection of miniatures that includes culturally diverse people figures with varying skin tones represented (Homeyer & Sweeney, 2011).

After discussing the concepts of *machismo* and *familismo* with Gerardo, the counselor gave him the following direction, "In the sand tray, using as many or as few of the figures as you see, please create or represent yourself as you are today. Use the figures to represent as many aspects or parts of yourself as you can." The counselor observed patiently as Gerardo thoughtfully selected miniatures to represent the following aspects of himself: anger, love, caring, protectiveness, guilt, the good student, the good friend, and carelessness, and then placed them in various locations throughout the tray. Once finished, the counselor asked Gerardo to tell her about what he had created in the tray. As he talked about what he had represented concretely in the tray, Gerardo connected an abstract narrative component to his processing. The counselor observed Gerardo's ability to engage in formal operational thought and believed that allowing for both concrete and abstract processing made the intervention developmentally appropriate for an adolescent's cognitive processing (Piaget, 1962). Taking into consideration which figures he chose to represent aspects of himself and the placement of these figures, Gerardo and the counselor discussed how he saw himself since

the death of his father and how he believed he should be in his new role. Some of the processing questions that helped them do this included (Vasquez & Rosa, 2011):

- “What is it like to be you right now?”
- “How are things changing now that you’re the oldest male in your family?”
- “What is the typical role of a Latino male in your mind? Are there ways in which that is present in the tray?”
- “Are there aspects of being a Latino male that you like more than others?”
- “How do you express your grief?”
- “Are there ways you would express it differently if it were more acceptable?”
- “Are there messages you are hearing from others that are different than what you believe? How might these different perspectives fit together?”
- “What is it that this figure in the tray needs right now to feel better about your new role in your family?”

### **Expressive arts with a Chinese American 10-year-old child**

Another way in which a counselor can incorporate cultural beliefs while helping a client navigate the grieving process is to create activities with features that symbolize meaningful cultural rituals and/or spiritual philosophies, as in the case of Zhaohui. Zhaohui’s mother died of cancer a little more than a year prior to seeking counseling, and Zhaohui had developed health issues that did not appear to have a biological cause. At 10-years-old, Zhaohui was experiencing high blood pressure, a much faster than normal resting pulse rate, an often-upset stomach, frequent headaches, and anxiety. Since these symptoms developed after the death of her mother and an exam revealed no medical cause for her health concerns, her doctor recommended that Zhaohui see a children’s counselor. Zhaohui lived with her father and paternal grandparents, and they agreed to have Zhaohui see a counselor after complementary and alternative medicine practices that were more customary in their traditional Chinese culture had been unsuccessful.

While meeting for the first time with Zhaohui’s father and grandparents, the counselor learned that Zhaohui had a difficult relationship with her mother while she had been alive. Her family members spoke indirectly and were uncomfortable discussing the topic, but the counselor finally understood that Zhaohui was an only child, and her mother had never wished to have children. Zhaohui was aware that her mother did not accept her and had spent much of her childhood trying to avoid bothering her mother. Zhaohui had always been and remained close with her father and her grandparents.

During their meeting, the counselor also worked to better understand the family’s cultural framework and belief systems. Zhaohui’s grandparents were very influential in their family, and they came to America from China when they were in their 40’s. Zhaohui’s father came with his parents to America and met her mother, also originally from China, once he had settled. Coming from a rural area of China, Zhaohui’s father and grandparents ascribed to a traditional belief system, and it was important to the family that they preserve many of their cultural beliefs and traditions.

While working with Zhaohui, there were many facets of her Chinese culture that the counselor found to be important considerations for her healing process. Zhaohui belonged to a collectivist culture in which the family also preferred to solve problems without the use of professional counseling services (Choi & Kim, 2010). Thus, the counselor made even more of an effort to include her father and grandparents, and they began the process by determining a shared definition of what “counseling” meant. Together, they decided that it should be a time during which the counselor would teach Zhaohui how to bring about peaceful feelings and help her to have a better relationship with her mother’s spirit. Because there was a cultural emphasis on concreteness (Cheung & Nguyen, 2012) and Zhaohui’s developmental level was known to

respond well to concrete interventions, the counselor explained that he would use Gestalt interventions that would allow Zhaohui to experience her mixed emotions and the relationship with her mother's spirit in the moment using expressive arts.

Traditional Chinese culture embraces an active relationship with deceased family members that can nurture a sense of continued reciprocity between the living and the dead (Lalande & Bonanno, 2006). Through structured rituals over time, surviving family members may offer food, money, and other valuables to the deceased, and in exchange they may receive benefits such as luck, wealth, and fertility. Another common practice in Chinese culture is to talk to a photo of a departed loved one (Chan, et al., 2005). The contentment of ancestral spirits is very important to the living family members, and they will partake in spiritual practices intended to console departed loved ones (Nagai, 2008).

The counselor strived to be respectful of Zhaohui's Chinese culture and developmental level during their time together. While building the client-counselor relationship, he taught Zhaohui coping and relaxation techniques in playful ways. For instance, the counselor asked Zhaohui to use a stethoscope to count her heartbeats for 15 seconds to get a pre-pulse rate. Then he brought out a soft Chinese rag doll named Lily to playfully lead Zhaohui through a progressive muscle relaxation exercise. Together, Lily and Zhaohui contracted and relaxed their major muscle groups and then Zhaohui again counted her heartbeats using the stethoscope to check for effectiveness. At another time, the counselor led Zhaohui through a guided imagery that helped her to imagine a Chinese spiritual tree that could eternally provide her with a sense of peace and comfort from within.

The counselor understood that it was not the cultural norm to verbalize emotions aloud (Cheung & Nguyen, 2012), and he gave Zhaohui the option of writing and drawing her feelings on paper rather than talking about them. The counselor gave Zhaohui an outline of a body traced on paper, and she chose colors to represent the following feelings that she experienced most often: shame, scared, guilty, sad, grateful, love, and happy. Zhaohui colored the body outline with representations that revealed how much of each emotion she usually felt. The counselor asked her only to study her creation for a bit after she was finished, and then reflected, "It seems like it would be difficult to feel those conflicting feelings all at the same time." Rather than asking her to talk about her emotions, he trusted that the activity gave her the opportunity to recognize and contemplate the feelings for the time being.

Zhaohui chose to talk with the counselor about her fears regarding her mother's spirit. She worried that her mother continued to be unhappy with her and that she would have more of an ability to bring Zhaohui bad luck now that she was a spirit. Zhaohui also believed that she had not been a good enough daughter to her mother while she had been alive. The counselor asked Zhaohui to make a drawing that would represent her mother, and she chose to draw an elephant because it had been her mother's favorite animal. The counselor then led Zhaohui through a Gestalt exercise similar to the empty chair technique that is supported in the literature for use with Chinese clients (Cheung & Nguyen, 2012). He helped her to talk directly to her picture as a representation of her mother asking her to repeat after him, "Ma, I need you to know..." and then complete the sentence. He asked her what one thing she would want her mother to say that would be most helpful to Zhaohui and what she would say in response to her mother. The activity gave Zhaohui the opportunity to have a positive conversation in which both she and her mother apologized to each other. Although a client could use this activity to disclose feelings that may help relieve emotional distress (Cheung & Nguyen, 2012), the counselor did not urge Zhaohui to focus on the negative relationship and difficult emotions in her dialogue. Instead, he allowed her to lead the activity and considered that, as a Chinese American child, Zhaohui would still expect to show respect to her mother and avoid expressing negative emotions to her directly. It was a valuable step that Zhaohui, in effect, experienced her mother speaking positively to her.

Another activity that the counselor chose to facilitate was a family session to which Zhaohui brought a photo of her mother. Zhaohui's father and grandparents helped her perform an appropriate ritual in which

each of them created drawings that could be offerings to her mother's spirit to bring about peace and happiness. Zhaohui drew pictures of her mother's favorite food, some of her favorite belongings, and of money, and she laid them in front of her mother's photo. Zhaohui verbalized that she believed her mother was happier with her and that her mother's spirit would not continue to wish bad luck on her.

## **Precautions to consider**

Codes of ethics relevant to counseling fields dictate that mental health professionals practice only within their scope of competence. The American Counseling Association Code of Ethics (2014) Section C.2.a. not only addresses proficiency as it pertains to technique but also cultural competence stating,

Counselors practice only within the boundaries of their competence, based on their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Whereas multicultural counseling competency is required across all counseling specialties, counselors gain knowledge, personal awareness, sensitivity, dispositions, and skills pertinent to being a culturally competent counselor in working with a diverse client population. (p.10).

The use of expressive arts with clients of any population entails appropriate training and supervision to develop this level of proficiency. Cultural competence when using creative interventions requires some additional considerations. Expressive arts and other creative modalities are often emotionally evocative, and training and supervision can help counselors learn to effectively process client emotions within the norms and expected practices of the other's culture. Additionally, counselors should review literature to ensure that techniques are not contraindicated for the client's culture since some combinations of intervention and culture have been found to have potentially negative effects (Potash et al., 2017). Furthermore, in western culture, expressive arts are often used to help clients enhance personal insight, self-expression, and problem solving, and the counselor may utilize interpretation to facilitate this process depending upon theoretical orientation. As Potash et al. (2017) explain, culturally competent counselors make an effort to understand cultural metaphors and idioms to be sure that any interpretation is context-sensitive. They further describe some cultures as preferring to create with only natural materials like corn husks, wax candles, saw dust, and plant fibers because synthetic items such as crayons and yarn may imply economic privilege. Thus, a final precaution is to always consider the cultural meaning ascribed to expressive art materials when planning interventions.

## **Research implications and conclusion**

Due to the common occurrence of childhood loss and bereavement, there is no shortage of literature suggesting interventions for treatment of this population. Some literature even addresses specific cultural populations, such as Baggerly and Abugideiri's (2010) article detailing their experiences with grief counseling and Muslim children. As Rosner, Kruse, and Hagl (2010) found while conducting a meta-analysis of interventions for bereaved youth, "in contrast to the amount of literature, however, there is a lack of empirical support for most of the suggested interventions" (p. 99). The process of implementing creative therapies, which are considered appropriate for child and adolescent cognitive development, can be difficult to quantify. Furthermore, applying large scale randomized clinical trials (RCTs) to arts-based therapies can be challenging since RCTs require adherence to rigid protocols. The very nature of creative arts implies flexibility in the moment with an ability to respond creatively to the needs of the client. Regardless, more outcome studies are needed to support creative interventions and to help mental health professionals determine the best methods for addressing child and adolescent loss. Furthermore, cultural components must be taken into consideration to avoid potentially missing important sources of variation in outcomes.

To best serve children and adolescents who have experienced the death of someone they love, counselors must be willing and able to meet clients where they are developmentally and provide interventions that are

consistent with the clients' cultural coping systems. Becoming a culturally competent counselor is a multi-step process that requires high levels of self-awareness and an exceptional ability to monitor experiences of countertransference. The process also entails extensive research when encountering a cultural group that is less known to the counselor. Hence, the most effective helpers are those who are prepared to engage in each of these steps and then utilize the knowledge gained through research to create interventions that include spiritual and symbolic representations of the client's cultural world.

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