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A Consumer-based Program Evaluation of a Therapeutic Camp for Military Families

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A CONSUMER-BASED PROGRAM EVALUATION OF A THERAPEUTIC CAMP
FOR MILITARY FAMILIES

A Thesis
Presented to
the Graduate School of
Clemson University

In Partial Fulfillment
of the Requirements for the Degree
Master of Science
Department of Parks, Recreation, and Tourism Management
Recreational Therapy

by
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Accepted by:
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ABSTRACT

Camp programs may be optimal environments to provide military families with opportunities to participate in meaningful leisure to revitalize family relationships and to form connections within the military family community. However, limited research incorporates consumer opinion or publishes justification for their selected services. Thus, the purpose of this study is to perform a consumer-based evaluation of Camp Twin Lakes Family Warrior Weekend, a therapeutic recreation-based camp for military families. Results from an importance-performance analysis illuminated military family preferences for camp programming and evaluations of this camp's performance on services in the identified areas. These findings provide insight into programming practices for this camp and other military family programs of the camp variety.

Key words: military family, recreational therapy, family systems theory, homecoming theory, camp programming, program evaluation

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Finally, I thank my family and friends for teaching me to "chunk it" when life gets too big, for picking up the phone at all hours, and for conveying excitement for my education that could be felt from states away.

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CHAPTER ONE

Military family perspectives on recreation-based programming: An evaluation of Family Warrior Weekend

To be Submitted to the *Journal of Military, Veteran, and Family Health*

ABSTRACT

Introduction: Camp programs may be optimal environments to provide military families with opportunities to participate in meaningful leisure to revitalize family relationships and to form connections within the military family community. However, limited research incorporates consumer opinion or publishes justification for their selected services. Thus, the purpose of this study is to perform a consumer-based evaluation of Camp Twin Lakes Family Warrior Weekend, a therapeutic recreation-based camp for military families.

Methods: A multi-phase, consumer, based importance performance analysis (IPA) was implemented with 19 adult representatives of military families who attended FWW. Participants rated program components on importance and performance using a 5-point Likert scale.

Results: Results revealed high importance and performance scores on all 24 program components, and illuminated military family preferences for military-focused camp programming.

Discussion: These findings provide specific recommendations for the improvement of FWW, as well as insight into future research and/or evaluations of military family camp programming.

INTRODUCTION

When a service member returns from deployment, a transition period arises. Occasionally, issues opposing smooth reintegration back into community and family life pervade this period. In 2010, almost half of all United States military personnel were parents, and over 3 million spouses, partners, children, and other dependents felt the loss of a deployed family member (U.S. Department of Defense, 2010). As the number of returning service members grew from 2001 to the present, research continued to contribute to the general knowledge surrounding the difficulties veterans face during reintegration, including feelings of disconnection from military and civilian life, unfamiliarity and lack of structure with the home environment, loss of sense of purpose, and depression and anxiety symptoms resulting from traumatic deployment experiences (Ahern, Worthern, Masters, et al., 2015; Demers, 2010; Bowling & Sherman, 2008; Wands, 2013).

Since returning service members often feel disconnected from both the family-like community they built within the military, as well as their immediate family, it is important to help family members at home connect and provide structure and support to ease the transition between these environments (Ahern, Worthern, Masters, et al., 2015). Further, it is essential to foster connections with fellow service members and their families for camaraderie and support from individuals who understand the unique experience of this family type. Institutional solutions often focus solely on assisting the returned soldier with readjustment, but the absence and subsequent homecoming of

military personnel has a ripple effect on the family, which demands a wider distribution of treatment services.

One way to address the needs of the whole family is with camp programming through which families can escape home stressors and engage in recreational activities that promote reconnection. Camp programs, specifically, may be an optimal environment to participate in these opportunities, to form novel memories and bond over quality down time, and to connect service members and their families with families from similar circumstances. Two types of camps exist to serve military families: non-therapeutic and therapeutic. Non-therapeutic camps generally provide families with a chance to escape everyday challenges for an experience similar to a family vacation. Therapeutic camps aim to provide services through therapeutic activity and discussion that will result in positive outcomes based on the needs of the population. One type of therapeutic camp that serves this population is based in recreational therapy (RT), which uses purposeful, goal-directed interventions that involve clients in recreational activities that improve their holistic health, including mental, physical, emotional, and social well being (Austin, 2013, p. 154). Certified Therapeutic Recreation Specialists (CTRSs) provide services for military personnel at government-funded hospitals (e.g., Veterans Affairs Medical Centers, Walter Reed National Military Medical Center), as well as at community-based RT and adaptive sports facilities (e.g., Higher Ground, National Ability Center, Lakeshore Foundation, Northeast Passage). Preliminary research evaluating RT and other therapeutic family programs has documented positive outcomes from the combination of recreation and therapeutic discussion to serve this population, but the research is limited

(Bennett, 2014; Ashurst et al., 2014). While numerous studies support the use of recreation and trip-type programs as interventions for service members to provide positive health outcomes, social reconnection, and positive emotions (Bennett et al., 2014; Bennett, 2014), programming often lacks a family focus. Failing to rehabilitate the entire family unit not only neglects family-related issues, but also decreases the family's ability to act as a central source of social support for a service member.

Although some documentation of positive results from RT services with both veterans and their family members exists, an essential question remains: Do RT programs provide veterans and their families with the experiences they personally desire upon enrollment in the program? Valuing client opinions, interests, and needs allows RT to provide the individualized, client-centered care that is fundamental to the field. Little research explains why military family camp programs select their particular array of services or if they consider client preferences in these programming decisions. Further, few programs publish evaluations of their performance on specific services. Therefore, the purpose of the study was to perform an Importance Performance Analysis (IPA) on FWW camps that occurred in 2016 and February and May 2017 to illuminate military family preferences for camp programs in order to generate guidelines that improve the camp's services and performance accordingly.

REVIEW OF THE LITERATURE

The purpose of the study was to illuminate military family preferences for family camp programming in order to generate guidelines to improve the camp's performance on services in these important areas. The literature related to military family characteristics, family dynamics, and recreational programming for military families is presented in this chapter.

Military Family In Transition

Deployment is only the beginning of the journey for a soldier and his or her family. Service members often return to a different home, acting and reacting differently based on new experiences, facing obstacles for which they received little training to face. Common psychological, emotional, and social challenges with which service members return home are symptoms of post-traumatic stress, depression and anxiety, financial difficulties, difficulty connecting to the community and to family, and combat-related physical traumas (Bowling & Sherman, 2008; Sayer, Siamak, Frazier et al., 2010). The presence of these challenges could potentially interfere with an individual's involvement in the community, at work, and at home. However, the described barriers to reintegration do not fully encompass the trials veterans describe as their main concerns in their transition back into civilian life.

A recent study identified three fundamental challenges to reintegration: 1) the perception of the military as a family due to its caretaking nature, social bonds, and structured environment; 2) returning to an unfamiliar home; and 3) the search for a new normal through the support of other veterans or veteran coordinators, or through

assuming an ambassador role for new veterans (Ahern, Worthern, Masters, et al., 2015). Ahern et al. (2015) describe how service members might feel out of place within family and community contexts upon return, as well as untethered from the comfortable community they may have found within the military system, due to transitional circumstances (i.e. feelings of disconnection/civilian incomprehension, lack of structure, modified family roles). Although familial support has the potential to act as an invaluable resource for soldiers in the post-deployment period, changes within the family (e.g. maturation of children, normative development, role changes) may occur in the service member's absence that complicate utilizing the support of the nuclear family right away (MacDermid, 2010). The transition can become even more trying for a service member as the family deals with their own set of challenges.

While not all military families will face the struggles mentioned here and military families are typically resilient when dealing with deployments (Marek & Moore, 2015), theories remind us that any changes, big or small, will influence family members. Thus, families who face challenges post-deployment deserve services that meet their specific needs.

Family Systems Theory and Homecoming Theory

Bowen's (1966) Family Systems Theory supports the previously described ripple effect that a deployment has on all family members and the need for family-oriented services by positing that individuals in a family cannot be understood separately from each other. According to Bowen, family members are interrelated, exhibit coherent behaviors, and interact and depend on each other. Members of the military family fit this

mold. Individuals face unique struggles and cope with reintegration in accordance with their personal relationship with the service member and their role in the family. For example, positive coping in the at-home parent directly predicts positive coping in children (Marek & Moore, 2015). Aiming treatment at family functioning and intrapersonal and interpersonal processes can help relieve some of the stress of home reintegration, as individual coping and adjustment are best understood within a family context (Marek & Moore, 2015). Since individuals in a family cannot be understood separately from each other, programs for military families must understand the entire family system in order to anticipate their needs and address them accordingly.

After World War II, another theory emerged explaining the military family situation post-deployment. Schuetz's (1945) Homecoming Theory posits that soldiers who travel away from home are separated by both time and physical space, allowing both the service member and his or her family members to experience formative, irreversible changes while apart. Due to these changes, the two parties will feel some level of distress when they meet again and find that routines changed, reactions are not as predictable as they once were, and the familiarity and intimacy decreased as different immediate relevancies shaped new thought and behaviors. This may result in some level of shock on both sides and a pressing need to form new connections in the midst of unsettling circumstances. Although Schuetz (1945) conceived of these notions during a much different war in a much different time, the core of his theory still rings true. In this advanced war and due to technological advances in recent decades, families have had the privilege of having a keener sense of the experiences their loved one has had during

deployment, as compared to WWII spouses who solely gained knowledge from propaganda in newspapers and films. Regardless of technological advances that allow for increased contact, there is still no replacement for experiencing routine life with your significant other and connecting on the common ground of shared experiences and relevancies. Schuetz (1945) explains that the spouse or parent leaves with a typified home in their memory, and the family says goodbye with a typified memory of their loved one. Whether changes while away are vast or minute, whether the deployment is long or short, there will be some level of adjustment upon homecoming for which Schuetz argues we must assist the family. Both theories suggest that the family experiences significant changes within their interdependent unit when a loved one returns from an extended absence. Further research identifies key influences on family functioning that can help reconnect and revitalize the family system.

Family Leisure Predicting Family Functioning

Family leisure literature denotes that leisure exhibits a positive relationship between family satisfaction and family functioning (Holman & Epperson, 1989, Townsend, Van Puymbroeck, & Zabrskie, 2017), but families from different circumstances participate in leisure differently, forming distinct memories that contribute to variable levels of functioning. Leisure may be able to influence the family's sense of connection and ability to adapt during deployment periods, as well as create the optimal environment to reconnect and strengthen the family unit post-deployment.

The Core and Balance Model of Family Leisure Functioning (Zabriskie & McCormick, 2001) presents two categories of family leisure patterns that can meet a

family's needs. These categories are *core family leisure activities*, or everyday activities such as board games, family dinners, movie nights, etc.; and *balance family leisure activities*, or novel activities such as vacations or excursions (e.g. theme park visits). Core family leisure requires less time and money to plan and accomplish, and it occurs more frequently in the home. Meanwhile, balance family leisure demands a larger investment of resources and effort to access. Zabriskie and McCormick presented core family activities as the category of family leisure that leads to higher stability and cohesion, while balance family activities are those that provide opportunities for challenges that increase family adaptability. The two patterns, when participated in frequently, tend to predict higher family functioning (Dodd et al., 2009; Smith et al., 2009; Swinton et al., 2008; Townsend, Van Puymbroeck, & Zabriskie, 2017).

Though the combination of core and balance activities is ideal, different family types deal with unique facilitators and constraints that influence the ratio of core to balance leisure activity in which the family chooses or is able to participate. Military families may go through varying periods of time in which they are able to participate in leisure that includes every member of the family. During deployment, military family leisure patterns might manifest in ways comparable to single parent families, constrained by limited time and increased household responsibilities due to reduced members (Shores & Scott, 2005), resulting in limited leisure participation or an emphasis on core activities that do not offer additional challenges for the family. Contrastingly, single parent or military families during deployment might seek to escape everyday struggle with balance

activities. In either scenario, leisure patterns shift as a result of the temporary absence of a parent.

With the knowledge that family leisure participation predicts higher family functioning, practitioners may support military families by helping them engage in core and balance activities during each phase of deployment. Based on the Core and Balance Model (Zabriskie & McCormick, 2001), consistent family leisure involvement pre-deployment should help families boost cohesion and resilience among members. Ideally, this would prepare families to continue leisure practices while a parent is away. However, more guidance might be necessary to reintroduce both forms of leisure during the reintegration period when family communication and organization may decrease due to aforementioned reintegration-related challenges. Core and balance family leisure participation following the service member's return could improve their stability and adaptability, increasing their overall level of family functioning and ability to address stressors and enjoy quality time together.

Recreational and therapeutic programming should incorporate these types of opportunities in their services in order to bolster family functioning. Overnight camps could be an optimal setting to teach families about the importance of family leisure involvement, specifically about core and balance leisure patterns. While military families might initially choose to attend for the novel experience of activities such as high ropes courses or archery that have the appeal of excitement and challenge, camps also offer the opportunity for informal and unplanned core leisure experiences in daily meals, cabin

down time (e.g. playing board games, reading together), arts and crafts, and campfire discussions, to name a few.

Recreational & Therapeutic Programming for Military Families

Both non-therapeutic and therapeutic family camps exist to serve military families, but in distinct capacities. Non-therapeutic camps generally resemble assisted vacations designed to provide families with a diversional escape from their everyday lives—a chance to play together in a worry-free environment. Therapeutic camps differ in that they set specific goals based on each family's needs then plan camp experiences to achieve those outcomes. These types of camps capitalize on the inherent benefits of leisure while utilizing recreation as a tool to improve specific aspects of family functioning.

One type of therapeutic camp uses recreational therapy (RT) as its therapeutic modality. RT takes a holistic, systems approach to treatment by involving clients in recreation and leisure pursuits that will improve their physical, social, psychological, and emotional functioning, promoting health and wellness and limiting barriers to improvement (Austin, 2013). Evidence supports the relationship between of recreation-based and recreational therapy-based programming to yield improvement in relationship and communication skills, marital satisfaction, trust, positive emotions, and feelings of competence, as well as cultivated social community between participants (Ashurst et al., 2014; Bennett, 2014; Bennett et al., 2014; Rogers, Loy, & Brown-Bochicchio, 2013; Huebner et al., 2009; Marek & Moore, 2015).

Apart from these examples, further research on these types of RT services with this population is limited and rarely highlights the specific program preferences of military families. Failing to offer services that meet the specific desires and needs of the entire family unit not only neglects family-related issues, but also decreases the family's ability to fulfill their roles as a central source of social support for a service member to overcome personal challenges associated with deployment. Military families who engage in structured opportunities to build skills, process the deployment cycle, and rekindle relationships tend to have an easier time adjusting to the new family dynamics and reintegration stressors, as well as experiencing stronger bonds within the family (Marek & Moore, 2015).

Program Evaluation

There is little to no research that describes the process of developing therapeutic camps for military service members and their families. Additionally, there is little to no research that reports evaluations of those services. Evaluation is a key component in any program, as it provides immediate feedback that will either support current program practices or will spur strategic action to ensure optimal program quality and consumer satisfaction.

The Importance Performance Analysis (IPA) is a consumer-based evaluation of program characteristics that gives specific and directed feedback to program administrators by using consumer responses to rank program components by levels of importance and performance. Although the IPA has historically and extensively been used in general marketing and business, this evaluation transitioned to increased use in

recreation services to evaluate county parks and recreation services, inclusive recreation programs, and, recently, RT services (Guadagnolo, 1985; Kennedy, 1986; Scholl, Glanz, & Davidson, 2006; Townsend & Van Puymbroeck, 2012).

This type of evaluation reflects the areas of need described by current literature and uses consumer voice to gain feedback that is relevant to participant preferences. A fundamental goal of RT is to provide care driven by client needs and wishes. When programs provide specific services with the expectation that clients will be satisfied with everything despite giving little to no input, they ignore this key component of RT practice. Thus, this study will examine the program components of a RT-based camp for military families, Camp Twin Lakes Family Warrior Weekend (FWW) through the use of the IPA. Camp Twin Lakes provides FWW for families to relax and play together away from the potential worries of home life, while also facilitating therapeutic growth opportunities. This evaluation will seek to identify which program components are important to military family participants and how well Camp Twin Lakes performs on providing quality services related to those important components. Then, this program, and other military family camp programs, may be able to more appropriately meet the needs of this population in an RT-based camp setting. This study will perform an IPA of five FWW sessions to illuminate military family preferences for this program and to generate guidelines to improve the camp's services accordingly.

METHODS

This study utilized a multi-phase, consumer-based, systematic evaluation of Camp Twin Lakes Family Warrior Weekend (FWW) by developing and administering an Importance Performance Analysis (IPA) (Martilla & James, 1977), and received approval from the Institutional Review Board.

Camp Twin Lakes Family Warrior Weekend

Camp Twin Lakes (CTL) is an organization that serves a variety of populations, including children with developmental disabilities, brain injury, epilepsy, organ transplants, and others. CTL expanded their programming to serve military families when they implemented their first Family Warrior Weekend (FWW) in 2010. The design of this program initially emerged from social work practices and primarily offered relationship workshops that lacked recreational learning experiences for the couples or families. In 2015, CTL shifted their program model from its roots in social work to an approach based in recreational therapy (RT), incorporating recreational activities for therapeutic outcomes. They currently offer four FWW sessions per year (approximately February, May, September, November). Around 10 to 15 families attend FWW each session, with a variety of family structures. Single mothers or fathers attend with their children, married couples attend with no children, and married couples attend with anywhere between one to eight children.

Upon arrival to the camp, families are joined by one or two “family buddies” who guide them around the campgrounds to various activities, offer childcare support, and ensure that the entire camp experience runs smoothly for their assigned family. On the

first night of this three-day camp experience, the families and staff members gather around the campfire to state their goals for the weekend. The rest of the weekend consists of therapeutic breakout groups, family free time, community camp meals and camp-wide recreational activities. Two types of therapeutic breakout groups are offered during the weekend – those attended jointly as a couple and those attended individually, divided by gender. During these sessions, participants learn and share with the clinical staff and other participants before, during, and after recreational experiences. The camp provides one hour on Saturday and Sunday to participate in the family free time activities. During this time, families may choose to attend a variety of indoor and outdoor recreation pursuits, including fishing, field sports, archery, zip lining, boating, rock wall climbing, biking, and indoor arts and crafts. Other opportunities are provided to participate in activities of interest during an additional hour of Scheduled Sign-Up Warrior Family Activities, including family competitions, mini golf, and giant swinging. The camp also incorporates other recreational activities into its structured programming, such as morning yoga, low ropes courses with adult breakout groups, and a camp-wide pool party. Community camp experiences include a camp-wide game of capture the flag, family competitions (i.e., Iron Chef competition, Pinewood Derby races), and a family carnival with music and games for families to enjoy together.

CTL takes a multidisciplinary approach to camp, recruiting licensed social workers, recreational therapists, and registered nurses to assist with therapeutic processing or meet varying needs at a given time. The goal of the camp, as described by the camp director, is to provide time and a safe space for couples to work through current

challenges together and apart, and to offer opportunities to spend quality leisure time as a family. The therapeutic focus is on the couple, with the intent to provide resources that will improve the functioning of the entire family.

Importance Performance Analysis (IPA)

The IPA is a multi-phase, cost effective, consumer-based evaluation of program components and has been used to accurately evaluate a variety of recreation programs, both therapeutic and non-therapeutic (e.g. Kennedy, 1986; Scholl, Glanz, & Davidson, 2006; Townsend & Van Puymbroeck, 2012). Though it is most frequently used for business and marketing, it can also be used to evaluate treatment services. For the purpose of this study, researchers applied this measure to identify military family preferences for camp programming and to determine areas for strategic improvement to maximize the benefits military families receive from attending FWW together. The development and implementation of the IPA is a two-phase process. The purpose of Phase I is to build a comprehensive list of program components, informed by important stakeholders, which is then used in Phase II to conduct a formal evaluation of the program.

IPA: Phase I

Phase I involved conducting interviews with military families to create a list of programming preferences. The camp director informed participants of the study through regular camp communication (i.e., email). On the final day of the February and May 2016 camps, adult participants indicated their willingness to take part in the study by providing their contact information to participate in a 15-20 minute semi-structured phone interview

about their specific preferences for FWW programming. The study aimed to involve both the adult service member and their spouse in the interview in a conference-style phone call, but the situation also arose in which only one or the other was available to speak.

These interviews centered around one question with light probing for clarity and context: *What aspects of the FWW program were important to your family's experience at Camp Twin Lakes and your decision to attend?* Since each of these participants had attended a previous FWW camp, they were also prompted with a follow-up question: *What might you have changed about your experience at FWW to make this your ideal camp experience?* Interviews were recorded, but not transcribed.

While participant interviews offered the majority of input in building the list of program components, two other sources were used to contribute as well, which is consistent with the IPA process. An extensive literature review on military family therapy, camps, and recreation programming, and an interview with the camp director were conducted. Information from these sources informed the list of components as well. In sum, Phase I steps intended to ensure that each IPA component embodied insight from military families themselves and the practitioners who develop programs for them, as well as evidence-based program recommendations.

Phase I Data Collection and Analysis

Phase I data consisted of the recorded verbal responses from phone interviews with February and May 2016 adult camp participants and the camp director. In total, 10 interviews were conducted with service members and/or spouses of service members, as well as the camp director. Due to the lack of evidence on military family preferences, a

conventional content analysis was performed, wherein analysis was based on participant's comments rather than preexisting theory (Kondracki & Wellman, 2002; Hsiu-Fang Hsieh & Shannon, 2005). During interviews, the PI took extensive notes and documented potential items for the list. Following the interviews, data analysis began by listening and re-listening to recorded interviews approximately three times per interview to achieve immersion. The PI made notes of impressions from these interviews, including initial analysis and context surrounding those program components, and also highlighted and transcribed specific quotes surrounding the main topic. Codes were then assigned to specific program components and the incidence of each code was tracked across interviews. Next, an external reviewer examined the content analysis and refined the items on the list with the researcher. The list went through three rounds of revisions between the PI and external reviewer to form the most representative statements for each program preference. This list consisted of 24 program preferences, which were used to form the IPA questionnaire to be administered to families in Phase II of this study (see Table 1 for the list of program components included in the IPA).

IPA: Phase II

Phase II participants included military service members and their significant others who participated in FWW over the four camps in 2016 and one camp in 2017. The projected sample size was roughly 50 to 75 adult subjects, estimating one adult subject from each family that attended the camp in 2016 (February, May, September, and November) and May 2017. Ideally, this study intended to represent both adult family members' perceptions of camp (e.g., spouse and service member) through the collection

of individual surveys from each adult in the family. Generally, between 10 to 15 families attend each camp weekend, and data was collected from participants at each of the identified camps.

Participants who completed the Phase II IPA questionnaire were recruited in different ways based on when they attended camp. Families who attended FWW in 2016 were contacted by the camp director via email to complete a retrospective IPA as an online survey. May 2017 camp participants were recruited in person on their final day of camp by a member of the research team. May 2017 participants completed the IPA as an online survey via iPads before leaving camp.

All families from the 2016 and 2017 camps who completed the IPA questionnaire were offered the incentive of entry into a raffle for a \$50 Visa gift card. At the completion of the survey, families were provided an opportunity to enter their name and address to receive the incentive. One participant was randomly selected from each group of participants (2016 families and 2017 families), and both of the selected winners were mailed the gift card.

Phase II Data Collection and Analysis

During Phase II, the administration of the IPA, data consisted of responses to the IPA and demographics collected via online survey. Demographic variables included gender, age, number and ages of children, members of family in the military, years of service in the military, times deployed, self-reported combat-related health conditions, and number of times participants attended FWW.

During their completion of the IPA questionnaire, participants rated each program components' level of importance to them and rated the camps' performance on those components. As previously mentioned, February, May, September, and November 2016 camp participants completed a retrospective version of the IPA questionnaire online in early May 2017, and May 2017 camp participants completed the IPA questionnaire on their final day of camp. The retrospective version of the IPA prompted families to reflect back on their experience at Camp Twin Lakes and indicate their feelings based on how they felt at that time. In all other ways, the IPAs for the two groups were identical. While the retrospective method of data collection occasionally gives rise to doubts about the accuracy of responses, this questionnaire's aim to obtain self-perceptions (e.g., opinions) rather than knowledge, and the novel, emotional experience of camp that enhances accessibility of those perceptions, supports the adequacy of this method to gather data (Cahill & McGaugh, 1995; Sibthorp et al., 2007, p. 300; Bhargave, 2009; McGaugh, 2013).

The importance factors were measured on a 5-point Likert scale ranging from one = *not at all important* to five = *extremely important*, and the performance factors were also measured on a 5-point Likert scale-ranging from one = *terrible performance* to five = *excellent performance*. The researcher calculated the means for each of the importance and performance scales separately, then plotted the program factors on a four-quadrant grid consisting of the following categories: *Concentrate Here*, *Keep Up the Good Work*, *Low Priority*, and *Possible Overkill*. *Concentrate Here* denotes the items were extremely important and had fair performance, *Keep Up the Good Work* denotes items that were

extremely important and had excellent performance, *Low Priority* denotes items were slightly important and had fair performance, and *Possible Overkill* denotes items were slightly important and had excellent performance. Following the importance and performance elements of the IPA, an open-ended question was included asking participants to comment about anything that may have been missed on the list, as well as providing any other comments or feedback about their experience.

Quantitative data were downloaded from an online survey database on Qualtrics and stored in an SPSS database. Prior to analysis, descriptive statistics were performed and included measures of central tendency, frequencies, and variability. All of the data were examined for outliers and non-normality. The data had no outliers, and were normally distributed.

RESULTS

Phase I Sample Description

A total of nine semi-structured phone interviews were conducted with military family adult representatives who attended FWW in February and May 2016, as well as one phone interview with the camp director. Married couples completed four out of the nine military family interviews; thus, a total of 13 military family adults participated in this phase of the study. This sample will be described in terms of the individual responses from each participant of the Phase I interviews.

Individual interview respondents consisted of an equal amount of female (5/13; 38.5%) and male service members (5/13; 38.5%), and wives of service members were also represented (3/13; 23.1%). The majority of the respondents were from dual service member families (8/13; 61.5%), meaning they were one part of a couple in which both adults serve or have served in the military.

Phase I Results: Military Family Preferences

In addition to the literature review on military family therapeutic and recreation-based programming, Phase I interviews primarily informed the list of IPA program components to be administered in Phase II of this study. Table 1 displays this list of military family preferences, as well example quotes from military family members and the camp director. These quotes supported the findings of the IPA questionnaire, and, therefore, will also be referenced in Phase II results section.

Table 1. *Program components and description.*

| Component | Component Description | Exemplar Quotes | Frequency |
|------------------|---|--|------------------|
| A | It is affordable to attend the camp. | “The biggest difference to us was just being able to get the whole family to go and have a good time together without having to worry about money.” | 7 |
| B | The duration of the program is appropriate. | “I wish it was a little longer – it was a lot crammed into a short amount of time” “In an ideal program, we’d have more time, but it’s tough to pull that off financially and a lot of adults work during the week.” [camp director] | 5 |
| C | The number of families in attendance is appropriate. | “We stood in line a lot of times, because everyone wanted to do certain activities during free time” “The best programs tend to be with less families to provide for more individualized service, but that is hard to control and we want to serve as many families as possible.” [camp director] | 4 |
| D | All staff members are sensitive to the needs of service members/veterans. | “I have PTSD, and it’s hard to be out by a dark campfire with lots of unknown people. I had a panic attack on the first night.” “We may not have been down in the trenches with you, but I understand you’ve been through a rough time and we’re here to help.” [camp director] | 12 |
| E | All staff members are sensitive to the needs of the family. | “We have amazing volunteers and staff who really invest in this program and the people they meet” [camp director] “The people there are passionate about your family and truly care about what you get from the experience.” | 11 |
| F | Skilled mental health professionals are on staff. | “I felt safer knowing there were resources for mental health on staff – through the healthcare students, social workers, veterans...” “It’s crucial that we have professional help for mental health issues at any part in their journey” [camp director] | 7 |
| G | Trustworthy | | 10 |

| | | | |
|---|---|--|----|
| | childcare services are provided. | “The volunteers have been vetted completely to be sure that your kids are safe.” | |
| H | Family buddies contribute to a positive experience at camp. | <p>“Family buddies were the most amazing thing- so supportive and kid-friendly. I’m generally very protective over my son, but I spoke to them about my nerves, and they delivered 130%.”</p> <p>“I think the thing I liked the most was having the person assigned to our family – they helped out a lot. I didn’t have to look for someone to help me out or answer my questions.”</p> | 9 |
| I | Program staff members are competent in the recreational activity they run (e.g. ropes courses, archery, etc.) | <p>“Our staff is a huge part of our success. We have awesome staff running our activities, like the ropes course, boating, archery...”</p> <p>[camp director]</p> | 6 |
| J | There are veterans on staff. | <p>“The veterans on our staff can understand and relate to them, and they’re also connected to VA resources and community.”</p> <p>[camp director]</p> | 6 |
| K | Activity options accommodate differing levels of ability. | <p>“They offered a range of activities for different ability levels”</p> | 7 |
| L | There is enough time to participate in the activities in which we are interested. | <p>“We could have had more time for family free time activities like archery, boating, swimming... They happened at the same time. It would have been nice to have 2 days or 2 different times to do that.”</p> | 11 |
| M | There are opportunities for children to interact with other children with similar family backgrounds and experiences. | <p>“My daughter got to connect to kids who understand her situation – ‘my mom doesn’t talk quite right, my dad has headaches...’ It was great to have my kids feel that community, too.”</p> | 7 |
| N | There are opportunities to reconnect and have fun as a family. | <p>“Chance to get away to spend time with each other and our kids.”</p> | 14 |

| | | | |
|---|---|---|----|
| O | There are recreational experiences for the whole family to intentionally learn new skills such as teamwork, coping, problem solving, etc. | <p>“I felt like it was more of a recreational weekend than time to work on stuff. It would have been cool to have even more individual and family work done.”</p> <p>“They provided great resources, but I could have done more structured work on myself and my family.”</p> | 6 |
| P | The camp fosters new relationships with other service members/veterans. | <p>“It helped us, and I think it continues to help us, because we still talk to people from camp.”</p> <p>“I’m already telling people! I explain (FWW) is a really great camp for veterans to link up with other veterans. I feel like we are a little different in society – we have this thing that I notice that civilians look at us and realize you’re a little different – a little off. It’s nice to talk to other veterans, because I feel like only they know your life experiences and things you’ve been through.... I explain that a great aspect of it to be able to connect with other people like us.”</p> | 10 |
| Q | The camp is trusted in the military community. | <p>“Most of the families who come heard from other military families – they trust that someone else went and that they’re in good hands, because we’ve worked with other families with similar issues.” [camp director]</p> | 5 |
| R | The camp is associated with well-known military service providers | <p>“I think it helps that they generally hear about us from a trusted source. We have relationships with all of the military bases in Georgia and many non-profit military service organizations.” [camp director]</p> | 4 |
| S | Information about additional resources was provided for our use after camp (i.e. other treatment services). | <p>“My husband received information about a counseling program to use at home, a program for TBIs, service dogs – every time we go, we bring bck something bigger and better.”</p> | 7 |
| T | There are opportunities to discuss gender-specific issues (i.e., female veterans, male or female spouses). | <p>“It felt good to be made aware of other people’s unique perspectives and struggles – especially those women who didn’t feel comfortable with men due to MST.” [female veteran]</p> <p>“As a female veteran, most males automatically assumed I was a spouse. So when we broke out into</p> | 4 |

| | | | |
|---|---|--|----|
| | | male and female groups the first night, I wasn't able to be recognized as a veteran on, and I had to hear all the complaints wives had instead of those that I could relate to." | |
| U | There is free time to connect with my spouse. | "Having time to separate from the kids and have adult time was a well-thought out plan. I got to spend time with my husband without having to worry about my son." | 9 |
| V | Staff leads structured experiences to connect with my spouse in order to improve our relationship (e.g., relationship workshops). | "Breakout sessions were okay – they were very short and informational. I wish we had more couples ones where we could interact together – couples challenges... something fun." | 10 |
| W | I feel comfortable, valuable, and respected at the camp. | "I like the way everyone can connect with other veterans, other families, our family buddy – it doesn't feel like you're in a fish bowl by yourself." | 11 |
| X | I do not feel like the camp exploits my family in any way for their professional, marketing, or financial gain. | "I've been to places where they say they're there to help you and stuff like that, but then they don't seem to care about you." | 2 |

Phase II Sample Description

Participants in Phase II included 21 adult military family members who attended FWW in 2016 and May 2017 out of the 74 families contacted (28.4% response rate). Two of the 21 participants gave partial responses and did not provide demographic information, and were subsequently removed from the sample, resulting in a final sample size of 19. Table 2 displays demographic information for the sample of this study ($n = 19$). The majority of respondents had between one and four children (84.2%). Ten respondents attended camp in 2016 (47.6%), six respondents attended camp in May 2017 (28.6%), and five did not specify when they last attended camp (23.8%). There were no

major differences in programming between 2016 and 2017 camps, aside from minor

Table 2. Demographic Information.

| Family Characteristics | Descriptive Statistics |
|-------------------------------|--|
| Respondent Gender | 57.9% Female, 42.1% Male |
| Respondent Age | 30 – 48 years old <i>Mean (SD): 39.47 (4.97)</i> |
| Number of Children | 0 – 8 children 5.3% no children 84.2% one to four children 10.6% seven to eight children <i>Mean (SD): 2.74 (2.00)</i> |
| Ages of Children | 5 months – 25 years |
| Role in the Family | 76.2% service member 33.3% spouse of a service member 9.5% dual service member families |

alterations due to seasonal changes and variations in volunteers and staff members.

Service member demographic data included length of time spent in the military, length of deployment, and combat-related health conditions. The average amount of time service members spent in the military was 13.69 years ($SD = 6.30$, $range = 3 - 25$ years). The average length of deployment(s) was 18.25 months ($SD = 16.15$, $range = 0 - 64$ months). Post-traumatic stress disorder (42.9%), sleep disorders (42.9%), generalized anxiety disorder (38.1%), and depression (38.1%) were the most self-reported combat-related health conditions for the FWW service member participants (see Figure 1 for more detailed information on self-reported combat-related health conditions).

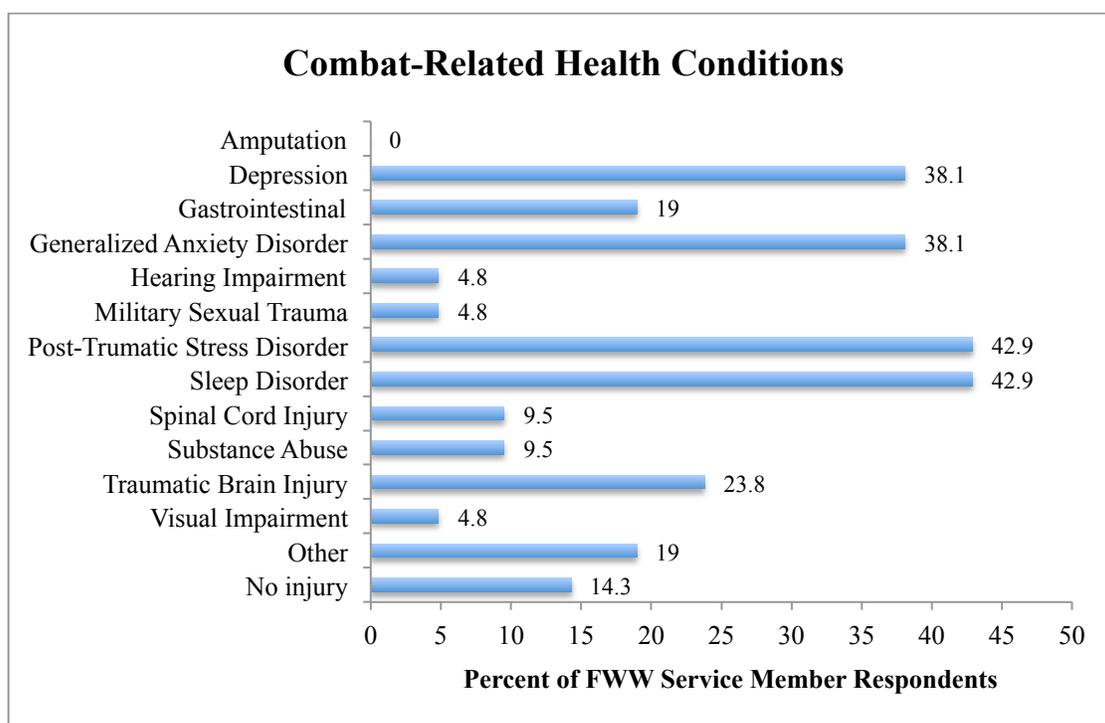


Figure 1. *Combat-Related Health Conditions.*

Phase II Results: IPA

The IPA questionnaire consisted of 24 items representing specific program components (see Table 1 for component descriptions). The mean responses to each of these items were plotted across the four quadrants in order to provide specific feedback based on the importance of these program attributes and the rating of the facility’s performance in these areas. Initially, the axes for this graph were set at zero (see Figure 2) per the recommendation of Martilla and James (1977). This analysis revealed that respondents rated 100 percent of the program components as somewhat to extremely important in their decision to attend FWW and rated the facility’s performance as above average to excellent for each of these components, causing all of the plots to fall in the *Keep Up the Good Work* quadrant. Though it is important to recognize this exceedingly

positive evaluation of the overall experience provided at FWW, this information does not present specific feedback to further enhance FWW’s program design and delivery. Thus, axes were redefined based on the overall means of importance ($M = 4.37, SD = .295$) and performance ($M = 4.47, SD = .202$), as has been done in other IPA literature (Guadagnolo, 1985; Hollenhorst, Olson, and Fortney, 1992; Martilla & James, 1977). This redefinition of axes redistributed mean plots to fall into each of the previously described four quadrants. Essentially, this provided a zoomed-in view to generate recommendations for improvement of program services.

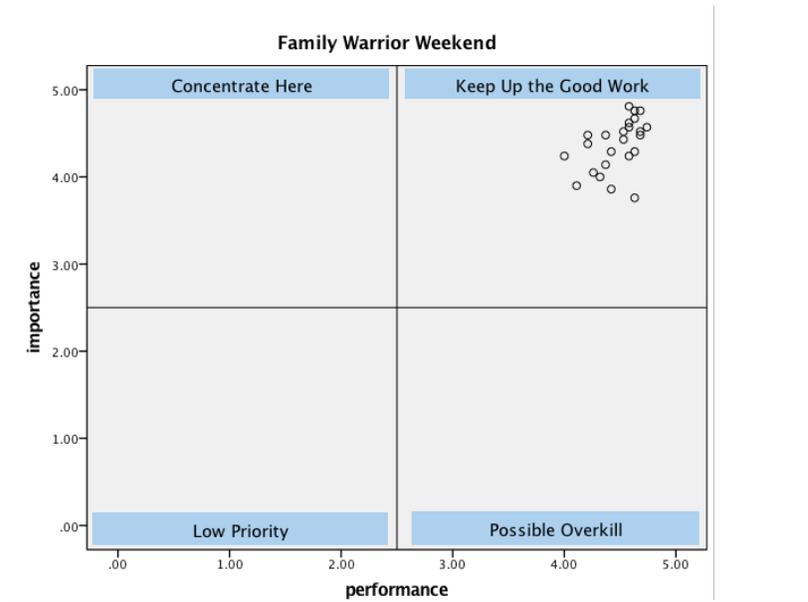


Figure 2. *IPA Graph Prior to Redefinition of Axes.*

See Figure 3 for the distribution of program components in their corresponding quadrants after axes redefinition, and see Table 3 for importance-performance mean scores and confidence intervals.

Table 3. Importance Performance Mean Scores and Confidence Intervals (CI)

| Component | Component Description | Mean Importance Rating (95% CI) | Mean Importance Rating (95% CI) |
|------------------|---|--|--|
| A | It is affordable to attend the camp. | 4.48 (4.16 - 4.80) | 4.68 (4.47 - 4.89) |
| B | The duration of the program is appropriate. | 4.24 (3.88 - 4.59) | 4.58 (4.35 - 4.81) |
| C | The number of families in attendance is appropriate. | 3.76 (3.36 - 4.16) | 4.63 (4.41 - 4.85) |
| D | All staff members are sensitive to the needs of service members/veterans. | 4.76 (4.57 - 4.95) | 4.63 (4.34 - 4.92) |
| E | All staff members are sensitive to the needs of the family. | 4.76 (4.57 - 4.95) | 4.68 (4.42 - 4.94) |
| F | Skilled mental health professionals are on staff. | 4.29 (3.80 - 4.78) | 4.42 (4.11 - 4.73) |
| G | Trustworthy childcare services are provided. | 4.62 (4.30 - 4.94) | 4.58 (4.27 - 4.89) |
| H | Family buddies contribute to a positive experience at camp. | 4.29 (3.86 - 4.72) | 4.63 (4.36 - 4.90) |
| I | Program staff members are competent in the recreational activity they run (e.g. ropes courses, archery, etc.) | 4.67 (4.56 - 4.78) | 4.63 (4.41 - 4.85) |
| J | There are veterans on staff. | 3.86 (3.35 - 4.37) | 4.42 (4.11 - 4.73) |
| K | Activity options accommodate differing levels of ability. | 4.43 (4.17 - 4.69) | 4.53 (4.15 - 4.91) |
| L | There is enough time to participate in the activities in which we are interested. | 4.48 (4.19 - 4.77) | 4.21 (3.93 - 4.49) |
| M | There are opportunities for children to interact with other children with similar family backgrounds and experiences. | 4.57 (4.31 - 4.83) | 4.58 (4.27 - 4.89) |
| N | There are opportunities to reconnect and have fun as a family. | 4.81 (4.64 - 4.98) | 4.58 (4.31 - 4.85) |
| O | There are recreational experiences for the whole family to intentionally learn new skills such as teamwork, coping, problem solving, etc. | 4.48 (4.19 - 4.77) | 4.37 (4.00 - 4.74) |
| P | The camp fosters new relationships with other service members/veterans. | 4.05 (3.73 - 4.37) | 4.26 (3.90 - 4.62) |

| | | | |
|---|---|--------------------|--------------------|
| Q | The camp is trusted in the military community. | 4.52 (4.26 - 4.78) | 4.53 (4.25 - 4.81) |
| R | The camp is associated with well-known military service providers. | 4.00 (3.51 - 4.49) | 4.32 (4.02 - 4.62) |
| S | Information about additional resources was provided for our use after camp (i.e. other treatment services). | 4.14 (3.80 - 4.48) | 4.37 (4.03 - 4.71) |
| T | There are opportunities to discuss gender-specific issues (i.e., female veterans, male or female spouses). | 3.90 (3.41 - 4.39) | 4.11 (3.66 - 4.56) |
| U | There is free time to connect with my spouse. | 4.38 (4.04 - 4.72) | 4.21 (3.77 - 4.65) |
| V | Staff leads structured experiences to connect with my spouse in order to improve our relationship (e.g., relationship workshops). | 4.24 (3.91 - 4.57) | 4.00 (3.56 - 4.45) |
| W | I feel comfortable, valuable, and respected at the camp. | 4.52 (4.26 - 4.78) | 4.68 (4.42 - 4.94) |
| X | I do not feel like the camp exploits my family in any way for their professional, marketing, or financial gain. | 4.57 (4.15 - 4.99) | 4.74 (4.55 - 4.93) |

a. Ratings obtained from a 5-point scale of "not important at all (1)"; "somewhat important (2)"; "neither important nor unimportant (3)"; "somewhat important (4)"; "extremely important (5)"

b. Ratings obtained from a 5-point scale of "terrible performance (1)"; "below average performance (2)"; "neither good nor bad performance (3)"; "above average performance (4)"; "excellent performance (5)"

The *Keep Up the Good Work* quadrant still contains many program components after redistribution. This quadrant included the affordability of the camp (A), staff sensitivity to needs of service members (D) and to needs of military family members (E), provision of trustworthy childcare services (G), staff competency in leading recreational activities (I), activity accommodations for differing levels of ability (K), opportunities for military family children to connect with children from similar backgrounds (M), opportunities to reconnect and have fun as a family (N), military community trust in the

facility (Q), feelings of being comfortable/valued/respected at camp (W), and lack of exploitation by the camp (X). The highly rankings of these characteristics were reflected in open-ended responses from camp participants. For instance, one respondent stated,

The camp made spouses feel that they are an important factor in helping the warrior heal.

Another respondent stated,

The staff and Kate [camp director] have a genuine care and dedication to serving the military and their families.

These comments reflect staff sensitivity to both military service members and their family members (Components D and E). Another response from Phase I interviews highlighted quality of services related to providing a family escape from personal stressors and the opportunity to have fun as a family (Component N).

After having multiple traumatic experiences in one week, I didn't want to come here and then we decided to come anyways, and I'm so thankful we did. We have had a great experience and a chance to unwind from our reality.

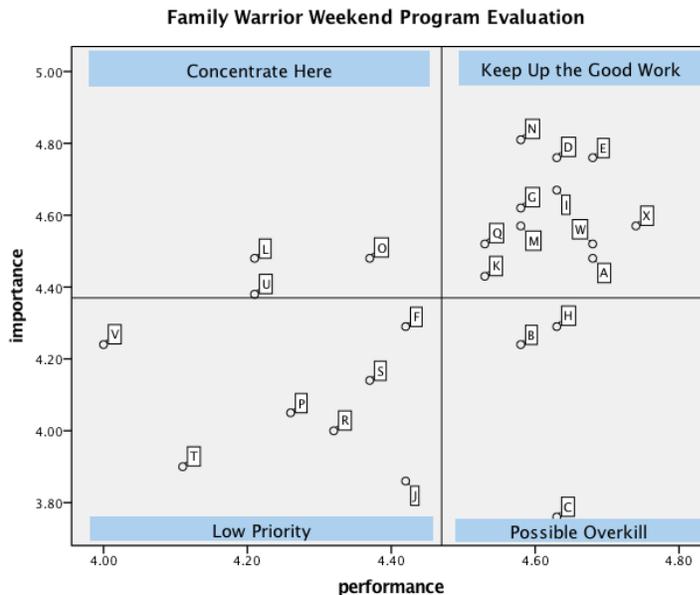


Figure 3. IPA Graph With Redefined Axes.

Table 4. Program Component Importance Rankings.

| Component | Component Description | Importance Rank (Mean) |
|------------------|---|-------------------------------|
| N | There are opportunities to reconnect and have fun as a family. | 1 (4.81) |
| D | All staff members are sensitive to the needs of service members/veterans. | 2 (4.76) |
| E | All staff members are sensitive to the needs of the family. | 3 (4.76) |
| I | Program staff members are competent in the recreational activity they run (e.g. ropes courses, archery, etc.) | 4 (4.67) |
| G | Trustworthy childcare services are provided. | 5 (4.62) |
| M | There are opportunities for children to interact with other children with similar family backgrounds and experiences. | 6 (4.57) |
| X | I do not feel like the camp exploits my family in any way for their professional, marketing, or financial gain. | 7 (4.57) |
| Q | The camp is trusted in the military community. | 8 (4.52) |
| W | I feel comfortable, valuable, and respected at the camp. | 9 (4.52) |
| A | It is affordable to attend the camp. | 10 (4.48) |
| L | There is enough time to participate in the activities in which we are interested. | 11 (4.48) |
| O | There are recreational experiences for the whole family to intentionally learn new skills such as teamwork, coping, problem solving, etc. | 12 (4.48) |
| K | Activity options accommodate differing levels of ability. | 13 (4.43) |
| U | There is free time to connect with my spouse. | 14 (4.38) |
| F | Skilled mental health professionals are on staff. | 15 (4.29) |
| H | Family buddies contribute to a positive experience at camp. | 16 (4.29) |
| B | The duration of the program is appropriate. | 17 (4.24) |
| V | Staff leads structured experiences to connect with my spouse in order to improve our relationship (e.g., relationship workshops). | 18 (4.24) |
| S | Information about additional resources was provided for our use after camp (i.e. other treatment services). | 19 (4.14) |
| P | The camp fosters new relationships with other service members/veterans. | 20 (4.05) |

| | | |
|---|--|-----------|
| R | The camp is associated with well-known military service providers. | 21 (4.00) |
| T | There are opportunities to discuss gender-specific issues (i.e., female veterans, male or female spouses). | 22 (3.90) |
| J | There are veterans on staff. | 23 (3.86) |
| C | The number of families in attendance is appropriate. | 24 (3.76) |

Components in the *Concentrate Here* quadrant included adequate time to participate in activities of interest (L), recreational experiences for family learning (O), and free time to connect with one’s spouse (U). Those components that fall in the *Concentrate Here* quadrant generally result in recommendations for improvements as this quadrant indicates that components were extremely important but only had fair performance. Phase I interviews supported the desire for improvement on these specific components:

We could have had more time for family free time activities like archery, boating, swimming...They all happened at the same time. It would have been nice to have two days or two different times to do that. (L)

I felt like it was more of a recreational weekend than time to work on stuff. It would have been cool to have even more individual and family work done. (O)

The means of component U positioned this item close to the border between *Concentrate Here* and *Low Priority*. Similarly, this component received both negative and positive feedback during phase I interviews. One respondent mentioned

We’re very family-oriented, so we’re always all together, but it was really nice to have time together as a couple. (U)

Meanwhile other military family members were more concerned with spending as much time together as a family, including their children, as possible.

Components in the *Low Priority* quadrant included the presence of skilled mental health professionals (F) and veterans on staff (J), facilitation of relationships with other service members (P), association with well-known military service providers (R), provision of additional resources for use after camp (S), opportunities to discuss gender-specific issues (i.e. female veterans) (T), and structured relationship workshops with one's spouse (V).

Finally, components in the *Possible Overkill* quadrant included appropriate duration of program (B), appropriate number of families in attendance (C), and the contribution of family buddies (H).

DISCUSSION

Although prior research emphasizes the value of recreation-based interventions and camps for military families, there is a distinct lack of published program evaluations that incorporate military families preferences for the services offered at these types of programs. Empirical evidence associates family leisure with positive family outcomes such as cohesion, adaptability, family functioning, and satisfaction with family life (e.g. Hodge et al., 2015; Townsend, Van Puymbroeck, & Zabriskie, 2017) and recreation-based programming has been discussed as having a significant impact on these outcomes in military families, especially those which provide facilitated learning through recreation experiences, therapeutic discussion, and relationship-building opportunities (Ashurst et al., 2014; Bennett, 2014; Bennett et al., 2014; Rogers, Loy, & Brown-Bochicchio, 2013; Huebner et al., 2009; Marek & Moore, 2015). While the evidence exists supporting the use of camp programs with military families, little research describes military family preferences for these types of programs. This study aimed to uncover specific military family preferences for a weekend-long, therapeutic camp in order to formulate recommendations for best practices through the development and implementation of a consumer-based IPA.

Families who participated in this study rated each program component as important and positively evaluated the facility's performance, placing all program components in the *Keep Up the Good Work* quadrant. The overwhelmingly positive response to program components may have been due to a lack of preconceived notions for the camp. The camp director stated that she is intentionally vague in her description of

the camp and markets the program as time to escape daily lives for family reconnection in a comfortable environment with similar families. They aim to provide a balanced program that meets the desires of all families – those who wish to connect with their military community, work through military-related traumas with certified professionals, or simply relax and play as a family with the support of genuine staff members.

Accordingly, FWW generally excelled in the areas of staff sensitivity and competence, activity accommodations, and its provision of opportunities for families to connect with the people from similar circumstances and with their family members.

The facility should aim to continue assuring the quality of services in these areas. While it is important to remember participants' overall satisfaction with the program's design and delivery, it is always necessary to continually refine services based on consumer feedback for persistent success. For this purpose, a redefinition of axes was performed in order to gain further insight into the participants' evaluation of the camp program. Based on the placement of program components on the revised IPA graph (Figure 4), the components that require attention include adequate time to participate in activities of interest, recreational experiences for family learning, and free time to connect with one's spouse.

While limited in its duration to one weekend, there are many leisure options families may wish to pursue during family free time, which likely led to the positioning of component L in the *Concentrate Here* quadrant. It may be optimal to provide continued opportunities to participate in these throughout the day when families have additional free time (e.g. after lunch). As this recommendation is dependent on time and

staff resources, it may also be important to take note of the activities families are keenly interested in pursuing and to incorporate those activities into some of the structured programming as well (e.g., breakout groups). In a program of limited duration, maximizing the number of preferences met by a given service is vital to quality assurance.

Participants' desires for family recreational experiences that promote the acquisition of new skills (e.g. coping, teamwork, problem solving) might be met, similarly, through the combination of service goals at a given time. The present service delivery model during family recreation activities involves facilitation by trained CTL staff members. These facilitators explain safety precautions, rules, and basic skills that are required to participate in a given activity. The facility could slightly alter this model by incorporating recreational therapists and/or mental health professionals into each recreation experience. For instance, when families attend zip lining, therapists might frontload the intervention by emphasizing communication or coping techniques to overcome fear or stress, to communicate directly, and to provide emotional support for one another. Therapists would remain involved throughout the activity, observing how families cope and communicate, providing feedback and facilitating the use of new skills, then processing the experience at its conclusion.

Previously discussed literature supports that this type of facilitated learning through therapeutic discussion is often essential in the transference of newly acquired skills to the home environment after participation (Ashurst et al., 2014; Bennett et al., 2014; Huebner et al., 2009). Retreat-type military family programs (e.g., Project

Sanctuary and Higher Ground) often involve licensed counselors, recreational therapists, clinical social workers, trained peer mentors, and registered nurses to assist with therapeutic processing at any given time during retreats with the intent of teaching military families useful coping skills to manage emotions and stress. By incorporating intentional therapeutic discussion by trained professionals into recreation and leisure experiences, preferences for activity participation and family skill building are met at once.

The final component in the *Concentrate Here* quadrant, adequate free time to spend with one's spouse, fell near the line between *Concentrate Here* and *Low Priority* quadrants, indicating that it is of slightly lesser importance than the previous two service components discussed. Nevertheless, this item requires attention. While free time with one's spouse is not outlined by the camp's schedule, there are opportunities within the weekend in which spouses may intentionally utilize their family buddy in order to gain free time as a couple. One responsibility of the family buddy is to provide childcare for couples to allow them the time to reconnect and unwind from their own responsibilities as parents. However, it has been indicated in the literature that service members, particularly those with PTSD, often have more feelings of concern about the safety and trustworthiness of those who interact with their family (Dekel & Monson, 2010). Open-ended questions and preliminary phone interviews with camp participants revealed that families were often initially hesitant to entrust their children's care to volunteers with which they recently became acquainted. One respondent stated that she was "*uneasy to*

leave my kids at first... I was with people I didn't know and was probably more uneasy than my children." Another respondent revealed how she overcame initial concerns:

Family buddies were the most amazing thing- so supportive and kid-friendly. I'm generally very protective over my son, but I spoke to them about my nerves, and they delivered 130%.

Families may be able to utilize this resource earlier in the weekend if measures are taken to increase feelings of trust in childcare providers. Family buddies completed a daylong training for camp safety procedures and evidence-based practices for providing appropriate services for and developing rapport with military families. They also passed a background check and interview with the camp director and reviewed specific information about their assigned family (i.e., health conditions, dietary needs, etc.) for optimal preparedness to provide appropriate assistance. This vetting process is important to describe to families early in their camp experience.

Although family buddies are generally well prepared to provide services to their designated family, FWW administrators may also provide families with the opportunity to become acquainted with their family buddy before camp. One way to approach this would be to provide families with personal bios written by family buddies a week or so prior to the camp. When families arrive at FWW, they would then be greeted by a somewhat familiar face, with knowledge of their professional experiences.

Relationships and potential trust in family buddies might also benefit from special attention given to developing rapport during icebreakers and campfire discussion on the first night of camp. Family buddies should also clearly express their responsibility and willingness to provide childcare in order to offer time for couples to spend apart from

their children as desired. Special attention should also be given to retaining volunteers in order to increase the amount of familiar faces welcoming returning families. Other options to overcome this obstacle might be to include additional time for spouse reconnection following breakout workshops, during which children are still involved in structured activities with their peers under the supervision of multiple staff members. Family buddies provide a unique opportunity for individualized family support, and past research supports the discussed positive outcomes of this programming element (Townsend & Van Puymbroeck, 2012).

Components in the *Low Priority* quadrant (F, J, P, R, S, T, V) were rated as less important, but also had room to improve performance. After addressing the components that fell in the *Concentrate Here* quadrant, with additional time and/or resources, CTL might consider hiring more skilled mental health professionals and veterans, marketing their association with well-known military service providers, expanding the amount of additional resources/support provided post-camp, increasing the amount of opportunities to discuss issues specific to female veterans, improving relationship-focused breakout group protocols, and increasing facility involvement in facilitating relationships between military families.

Military Family Program Preferences

While the initial focus of this study centered on the evaluative element of the IPA, the conversations that occurred during Phase I interviews illuminated such rich descriptions of military family members' camp experiences, it would be unfortunate not to highlight the components included in the IPA for what they really are – preferences in

themselves. The researchers of this study presume that a primary reason each component was ranked so highly in importance was that they were, indeed, representative of the preferences of military families who attend FWW. The exemplar quotes provided in Table 1 provide vibrant depictions of camp characteristics, which families verbally identified as crucial to their camp experience and decision to attend FWW, and, thus, could provide valuable insight for other camp programs that wish to serve this population value. These preferences not only reflected trends in the literature that support offering a balanced focus on leisure and therapy to naturally reconnect families and assist them in acquiring adaptive skills (Townsend, Van Puymbroeck, & Zabriskie, 2017), but also revealed requests unique to military family consumers of camp and recreation services.

To review the program preferences that emerged, these preferences will be discussed in three categories: 1) camp convenience and accommodations for military family needs; 2) perception by the military community; and 3) therapeutic support and post-camp resources.

Camp Convenience and Accommodations

As expected, each family member expressed their predominant interest in attending FWW due to its essence as a “*great way to get out of the house and have fun with the family for free.*” Since the number one ranked program component in terms of importance was the opportunity to reconnect and have fun as a family, it is appropriate that many military family members cited the ease of accessing and participating in camp as an important factor (see Table 4 for components ranked in order of most to least important). FWW is completely free to its participants, which can be an incredibly

motivating consideration for families who may have difficulty justifying a vacation or may not feel they have the financial means to organize the often costly and meticulous details of lodging, food, and transportation. As roles, responsibilities, and leisure routines often shift when a family member is deployed, planning a vacation may add one more variable influencing the navigation of these boundaries; in this way, home-based leisure pursuits may also become more difficult to access than before (Faber et al., 2008; Melton, Hodge, & Townsend, in review). Many families who attended FWW were simply drawn to a place where their needs were met and where novel recreation opportunities were facilitated for the whole family without considerable effort on their part.

Other preferences pertaining to camp convenience included the duration of the camp and its relation to sufficient time to participate in activities of interest, number of family participants, as well as accommodations for disabilities. Many participants mentioned that they wished they had more time to experience each activity (e.g., zip lining, biking, etc.) stating they “*stood in line a lot of times, because everyone wanted to do certain activities during free time.*” Other families valued the camp’s short duration due to the ease of fitting a weekend vacation into busy work schedules, but mentioned, “*it was a lot crammed into a short amount of time.*” For therapeutic outcomes, fewer families and a slightly longer duration (i.e., 4 -7 days) may be optimal for individualized attention and maximum activity participation, but more participant feedback is necessary to determine the feasibility of longer camps for military families. Further, camp settings were supported, in themselves, as convenient for providing opportunities for adults to address therapeutic goals without worrying about distressing their children or leaving

them at home. As service members and their spouses generally have specific issues to explore during therapeutic sessions and may have limited time to negotiate those topics in the home, an important piece of this type of experience is providing children with the opportunity to “*be kids*” with trustworthy childcare services (Sayers, 2011; Marek & Moore, 2015). Hence, parents will be able to focus solely on their intentions for their family and relationship with each other.

The final, and perhaps most important, identified components influencing camp convenience is the accommodation of and sensitivity to the specific needs of service members and the military family in the programming of activities and training in staff approach. This includes directed attention to activities that may trigger psychological combat-related conditions (i.e., PTSD, anxiety, TBI) and those that may be difficult to access with physical disabilities. For instance, phase I interview respondents described instances during camp in which their PTS symptoms were triggered by activities or staff approach. One respondent explained,

I have PTSD, and it's hard to be out in the dark by a campfire with lots of unknown people. I had a panic attack on the first night.

Especially in camp settings that are unfamiliar environments with sights, sounds, smells, and interactions that may trigger psychological symptoms, it is imperative that all staff is equipped with specific training on how to approach people with combat-related psychological conditions and the knowledge of how to deescalate situations (e.g., grounding techniques). Ideally, staff should receive this training prior to camp or have past experience with working with service members. Furthermore, activities should be

programmed with specific consideration for potential triggering conditions based on each camp participant's specific diagnoses or needs.

To the extent to which activities should be psychologically accessible, they should also be physically accessible. Since CTL serves a variety of populations with physical disabilities, the majority of the pathways and activities are physically accessible. Camps serving military families should plan accordingly, so as not to isolate members of the family with disabilities during structured or free time recreation experiences. On the other hand, activity programming must also meet service member preferences for high arousal activities due to their heightened threshold for adrenaline-producing activities that may have increased due to multiple combat deployments (Warchal, et al., 2011). Outdoor adventure activities may be suited to these fluctuating leisure preferences.

One critically important finding from these interviews emerged from the representation of female veterans in Phase I phone interviews. Each female veteran noted specific desires for their camp experience that were different from spouses and even male veterans. Specifically, female veterans must be considered in programming in terms of the discussions they desire to have that differ based on their unique experiences. On the first night of camp, adults are divided into groups based on gender. Thus, females are in one group, and males attend the other, placing female veterans primarily with spouses of service members, instead of their military comrades. While some female veterans valued getting to know the issues that women specifically face in any role, some women felt out of place speaking to women to whom they could not relate.

As a female veteran, most males automatically assumed I was a spouse... I wasn't able to be recognized as a veteran, and I had to hear all the complaints wives had instead of those I could relate to.

Although some female veterans prefer to experience group discussion with fellow service members, it is also important to remember the unique experiences of female veterans that may cause them to have different preferences. Current research supports that female experiences of Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF) vary from their male counterparts and, in turn, are reacted to differently; therefore, it is important to fully understand the gender-specific implications, so service providers are prepared to provide appropriate care for female service members (Street, Vogt, & Dutra, 2009). In a recent study, female veterans expressly identified “stressful military experiences and post-deployment reintegration problems” such as combat experiences, military sexual trauma (MST), and separation from family as major stressors (Mattocks et al., 2012). Programs must be mindful of varying preferences based on female veteran experiences. Although some female veterans are passionate about connecting with other service members, those who have experienced MST, sexual harassment, or sexual discrimination may have an according opposite preference. Programs should endeavor to continue unearthing specific program preferences of female service members to better serve this population, especially in military family therapeutic programming. With appropriate programming practices for the specific needs of military families, families will feel unencumbered in their ability to attend a beneficial program, relax, reconnect, and gain resources for perhaps a more convenient lifestyle when they return home, as well.

Military Community Perceptions

Service members have distinct ways of relating to each other, rooted in their profession and shared experiences, to such an extent that some researchers even argue that veterans form their own cultural group (Hobbs, 2008). Many of the military family members interviewed in Phase I raised the importance of being referred to camp by trusted comrades in the military community (i.e. leaders on military bases, other trusted military service providers).

Most of the families who come heard from other military families – they trust that someone else went and that they're in good hands, because we've worked with other families with similar issues. [camp director]

Additionally, this value was reflected in the comfort participants expressed in having veterans on staff, as well as their sense of security rooted in the knowledge that families within the military community continue to return to and market the camp. Each military family interviewed confirmed that they promote the camp to other military families.

I'm already telling people! I explain (FWW) is a really great camp for veterans to link up with other veterans. I feel like we are a little different in society – we have this thing that I notice that civilians look at us and realize you're a little different – a little off. It's nice to talk to other veterans, because I feel like only they know your life experiences and things you've been through... I explain that a great aspect of it to be able to connect with other people like us.

Evidence-based solutions to decrease service member distress related to disconnection from military life include forming relationships with other veterans, as well as rediscovering purpose through giving back to the military community (Demers, 2010; Ahern et al., 2015). After receiving advice from military comrades to attend camp, service members might continue to gain a sense of accomplishment through continued advocacy for and marketing of FWW. In a community with specific needs mentioned in

the previous section, there is security in knowing that others in this tight-knit community trust CTL to value their family, treat them with respect, and provide individualized services.

Therapeutic Support and Post-Camp Resources

Another vital program component revealed by Phase I interviews was the value of therapeutic support during and after the camp experience. While many families attend primarily for reconnection and novel experiences with their families, almost all of the interviewees cherished the therapeutic element of camp. Interviewees reported the importance of having mental health and recreational therapy professionals available to them and leading relationship breakout groups. Considering the stigma that is often associated with seeking mental health services as a member of the military (Greene-Shorridge et al., 2007), camp offers a safe gateway for therapeutic support free from judgment. Some military family adults even desired more therapeutic focus, specifically, in which the family could partake and improve themselves together.

I felt like it was more of a recreational weekend than time to work on stuff. It would have been cool to have even more individual and family work done.

While military families gain important memories and learned new skills through activities, workshops and one-on-one attention, one weekend is brief, and families may even feel unhinged heading home after only initiating the healing process at camp. Families may need further support upon returning home to continue working on the challenges they identified as a family. That support may include resources for counseling, military services and programming in families' local community, or VA connections. However, not all resources offered come in pamphlets – some of the most important

continuing camp resources come in the form of the relationships formed with professionals at camp, as well as with the community of military families they meet who have gone through similar experiences and wish to support each other past this weekend (Ahern et al., 2015).

It helped us, and I think it continues to help us, because we still talk to people from camp.

One family continues to reap the benefits of FWW as they return to the camp and recurrently receive more information about services that can help them grow at home, each time addressing a new need they voiced to camp staff.

My husband received information about a counseling program to use at home, a program for TBIs, service dogs – every time we go, we bring back something bigger and better.

Although all of these elements are crucial to meet the voiced desires of our military families, the overarching theme of Phase I interviews highlighted the general desire to feel supported, accepted, and considered as a family, as a spouse, and a service member. If we continue to request and listen to the desires of the people we aim to serve, these preferences should be met.

Limitations and Recommendations for Future Research

Findings provide insight into how practitioners and researchers may approach evaluation of programs similar to FWW, but the military family preferences highlighted in this study are not generalizable past this sample. Numerous attempts were made to increase the sample size, including survey recruitment via emails from the camp director, in-person recruitment, and periodic email reminders. Response rate increased upon the use of incentives and in-person recruitment. Accordingly, a recommendation for future

studies with the military family population is to recruit in-person whenever possible. The response rate from May 2017 participants (31.6%) collected in-person at camp, was higher than that of the 2016 participants who were recruited solely through email contact (18.2%). Researchers believe this may relate to the element of personal appeal and temporal proximity to the experience itself, in contrast to one among many emails that military families receive soliciting their participation in surveys and services. If in-person recruitment is infeasible, incentives might improve recruitment via email.

This study was limited to the adult population, which inhibits our knowledge of program preferences of children in military families. In accordance with Family Systems Theory (Bowen, 1966), future program evaluations would benefit from gaining comprehensive responses from each member of the family and examining the influence of each member's unique characteristics (e.g., role in the family, motivations for participation, gender, etc.) on their individual preferences. It is highly likely, and developmentally appropriate, that children would have different preferences than their parents in regards to program components. Their preferences should be considered equally as important in the process of program development as parent preferences, especially for programs that aim to serve those children.

Due to the limited sample size, a post-hoc analysis could not be performed to determine if demographic variables (i.e., family size, combat-related traumas, times attended FWW, length of deployment, gender) contributed to significant differences in family programming preferences. While family and service member demographics may increase our understanding of the types of participants who attend these types of RT-

based military family experiences, future research is required to determine specific camp program preferences based on these variables. For instance, families who experienced severe trauma or lengthy deployment periods may value therapeutic program components more than families who had not.

The number of times families attended camp might also influence self-reported preferences. First-time attendees may enter with fewer expectations of the experience, while returning campers might have a more comprehensive understanding of the services they value most. Further, those families who already attended the camp may be more familiar with the environment, activities, staff members and overall experience, thereby reducing feelings of anxiety upon arrival. This factor may be especially important due to the amount of service member attendees with psychological disorders or symptoms, such as PTSD, anxiety, sleep disorders, and depression. Service members with these symptoms might be tense, hyper-alert or inattentive, disengaged, or isolated during leisure experiences, especially in unfamiliar environments (i.e. fear of large crowds, open spaces, environmental triggers) (Melton, Townsend, & Hodge, in review). One quote from preliminary interviews with a service member who attended FWW embodied this experience.

For those of us with PTSD, your world tends to become very small in terms of stuff that you're willing to go and do. You tend to stick to the safe stuff that you know isn't going to bother you or trigger you or cause issues, so it's hard to step outside of that box. I thought (CTL) was a good, safe place to do that.

An additional limitation of this study is the potential for differences between the 2016 respondents, who completed this survey further removed from their camp

experience, and those from the May 2017 group, who completed their survey on the final day of FWW. Doubts occasionally emerge concerning the accuracy of the retrospective method of data collection. However, the IPA does not seek to measure knowledge, skills, or behaviors, and retrospective data collection “offers an alternative approach for measuring self-perceptions such as affective states [and] attitudes” as humans are more able to accurately report how they felt at a certain time versus their capabilities at the time (Sibthorp et al., 2007, p. 300). Sibthorp et al. (2007) also found that retrospective pre- and post-testing eliminates some of the bias that occurs at pretesting. Participants may come into a program with strong opinions and conjectures about the program, but by the end of the intervention, participants work through their biases and tend to respond in ways that better represent how they felt.

Studies also suggest that people are more likely to retain memories from novel, emotionally-arousing experiences (Cahill & McGaugh, 1995; McGaugh, 2013). Further, a recent research study examined the impact that a novel experience has on its retrospective evaluation. This study found that novelty enhances accessibility of an affective experience (Bhargave, 2009). It was also revealed in this study that “the more time people spend deliberating on experiences post-episode, the more likely delayed evaluations will resemble immediate evaluations” (p. 125). With intentional therapeutic discussion and reflection, unique activities that produce high arousal such as high ropes courses and ziplines, FWW creates a novel, emotionally stimulating environment that would likely be encoded into long-term memories. Finally, collecting data at only one time decreased the burden of multiple surveys on research participants.

While this IPA identified 24 program components military families prefer in their camp experience, future evaluations of these types of programs might include questions to determine the importance of providing leisure education to military families to encourage continued family leisure participation after camp. Since the absence of a service member results in a renegotiation of roles in the family that undoubtedly alters their leisure practices in some form (e.g., different leisure planners, increased or decreased participation), families might require guidance for optimal leisure participation upon the return of deployed family members, especially if family members return with psychological or physical trauma (Melton, Townsend, & Hodge, in review). Future research should determine the importance of this potential service to military families and best practices for implementation.

Conclusion

Despite limitations, this study provided specified, consumer-driven feedback and recommendations to CTL program administration, as well as offered insight into military family preferences for therapeutic camp programming. Participant responses confirmed the importance of a list of 24 camp program characteristics and revealed examples of quality performance in those service areas by consumer standards. Program evaluation of evidence-based programs is recommended to further expand knowledge of military family preferences and best practices for these types of programs. Actions to increase sample size should be taken to improve generalizability and to provide opportunities to broaden our comprehension of how individual characteristics of family members contribute to their unique program preferences.

CHAPTER TWO

CONCLUSION

Implications for RT Practice

RT practitioners aiming to improve military family recreation services, specifically in the camp or retreat-type setting, may find the information provided useful in designing consumer-driven, evidence-based services. The predominantly positive evaluation of the importance of program components and CTL's performance on those factors emphasizes the value of designing a program based on current literature for the target population. Furthermore, many military family participants expressed gratitude for being asked to contribute their opinions to improve programs for their family and military family community. One participant stated,

I've been to places that say they care for you, and they're there to help you and stuff like that, but then they don't seem to care about you. We don't get follow-up phone calls like we're doing today with this interview for our feedback. You don't feel that atmosphere where you feel so valued in other places.

This quote highlights the potential of program evaluations to serve an additional purpose in communicating a program's genuine mission to continually improve services according to the desires of their clients. In the future, CTL may utilize this IPA as a standardized assessment to determine the value and efficacy of their services and adjust their service design and delivery, accordingly. The consistent use of a program evaluation may also contribute to their ability to market their program to the military family community. Education will be provided to the appropriate CTL staff to endeavor to

preserve the list of program components' consistency with current evidence-based recommendations for military family camp programming and population preferences.

FWW's program design should also be considered for future development of military family recreation programs. While this study specifically applies to camps or retreat-type programming, different settings might incorporate key concepts that are vital to the reconnection of military families through recreational experiences, therapeutic discussion, and relationship building opportunities. These are the key elements of camp programs for military families, around which additional programming elements can be tailored (e.g. setting, specific activities, duration).

Although the camp director described FWW as an RT-based program for military families, FWW appeared to lack many key components of the APIED process that is essential to RT practice. Namely, the APIED process consists of assessment, planning, implementation, evaluation, and documentation (Austin, 2013). While FWW conducts surface level assessments and creates broad family goals for weekend, interventions, evaluations and documentation are not especially individualized. The IPA conducted in this study may serve to provide an evaluative element to the program, but the lack of each other component of the APIED process brings into question the nature of the program as RT-based or recreation-based (Townsend, Hawkins, Bennett, Hoffman, Martin, Sotherden, & Bridges, in review). RT-based programs center around RT as the central component of service, around which all other aspects are organized. According to Townsend, et al, recreation-based programs are those which offer recreation, leisure, or sport as their primary services and may also offer therapeutic services with trained

professionals (i.e. recreational therapists, clinical social workers). For instance, Project Sanctuary is one recreation-based health and wellness program that offers one week, retreat-type programming for military couples that centers around the recreational experience but is characterized by multiple opportunities for therapy with a multidisciplinary team of healthcare professionals, including recreational therapists. The latter description better describes FWW's program. This stipulation does not call into question the needs that FWW is fulfilling in the military family community; however, it does serve to highlight the continued debate within the RT field that seeks to establish the defining qualifications of true RT practice.

For brief programs such as FWW, it may be challenging to provide individualized care to multiple families considering the varying needs and preferences discussed. Future research should investigate how to plan short-term interventions for large groups, while maintaining the high level of individualized care that is foundational to the field. Furthermore, RT practitioners should seek to design programs around the primary underpinnings of individualized care and the APIED process, initially, to avoid misrepresentation of the RT field and the subsequent need to rectify programming in order to comply with standards of practice and to better meet the needs of consumers of RT services.

Reflection

As a future practitioner and researcher in the field, this study was extremely enlightening in more ways than one. I gained extensive knowledge of the proper methods throughout the research process, as well as experience collaborating with community

programs and developing and administering surveys and semi-structured interviews. One crucial lesson I learned as a researcher was the importance of exerting initial effort to recruit participants in-person whenever possible. While it may be tempting to design studies that are more convenient or seemingly require less travel or investment, we must remind ourselves of the impact that personal, human connection can have in encouraging someone to share their experience. In-person recruitment conveys respect to participants and may even save time in the long run.

Other valuable lessons that emerged from this study were the importance of evaluating programs and an increased understanding of the requirements of that undertaking. Although I always understood that evaluation is a crucial component of the APIED process, I now grasp the depth of information that can be gained from this step. Thus, the effort that this stage requires is justified by the discovery of physical, social, emotional, and psychological progress, or lack thereof, and, in the case of this study, by giving a voice to the people you serve. It is our duty as practitioners to remember the reasons we chose this profession and to continually ensure the quality of our services. Furthermore, as we continue to solidify our vital role in healthcare, practitioners and researchers must continue to provide evidence of the outcomes of RT services. As a CTRS, I intend to continue to conduct research, utilizing the skills I gained completing this study.

After combining my passion for practice with a newly discovered passion for research in Clemson University's graduate program, I aim to advocate for the RT field by providing practice-based evidence and education at conferences and in journals. After

gaining an inside perspective through phone interviews and volunteering with my participants, I will undoubtedly remember the intimate, human component of research – the real faces and stories that should continue to inform how we treat people in a variety of settings and continually adapt to strategically meet their needs.

APPENDICES

Appendix A
IPA Online Consent

A Consumer-Based Program Evaluation of a Therapeutic Military Family Camp

Description of the Study and Your Part in It

Dr. Jasmine Townsend and graduate student Katie Mitchell are inviting you to take part in a research study. Dr. Townsend is a recreational therapy professor at Clemson University. Katie Mitchell is a graduate student at Clemson University, running this study with the help of Dr. Townsend. The purpose of this research is to evaluate the Camp Twin Lakes program based on your family's perspectives and priorities. Your part in the study will be to reflect on your experiences at Camp Twin Lakes Family Warrior Weekend and complete this questionnaire. The survey will take about **5-10 minutes to complete**.

Risks and Discomforts

We will do everything we can to protect your privacy and confidentiality. We will not tell anybody outside of the research team what information we collected about you in particular. **There are no perceived risks to you in this study.** Your participation in this study is completely voluntary, and you can stop the survey at any time. You may skip any question that you are not comfortable sharing.

Possible Benefits

We do not know of any way you would benefit directly from taking part in this study. However, this research will help us understand what military families hope to gain from programs like Camp Twin Lakes and how well Camp Twin Lakes is meeting your wishes. This information may help to **improve the quality of the Family Warrior Weekend and other programs serving military families.**

Protection of Privacy and Confidentiality

If you choose to participate in this study, the **information you provide will be kept confidential and will only be used for the purposes of this research.** We might be required to share the information we collect from you with the Clemson University Office of Research Compliance and the federal Office for Human Research Protections. If this happens, the information would only be used to find out if we ran this study properly and protected your rights in the study. Your contact information, should you choose to provide it, will only be used to distribute incentives and will not be linked to your specific responses.

Choosing to Be in the Study

Your participation in the study is voluntary and will not impact your ability to attend Family Warrior Weekend in the future. You may choose not to participate or stop participating at any time. You will not be punished in any way if you decide not to be in the study or stop your participation in the study. If you choose to stop taking part in this study, the information you have already provided will be used in a confidential manner.

Contact Information

If you have any questions or concerns about this study or if any problems arise, please contact Katie Mitchell, Clemson University graduate student, at (757) 784-4842. If you have any questions or concerns about your rights in this research study, please contact the

Clemson University Office of Research Compliance (ORC) at 864-656-0636 or irb@clermson.edu. If you are outside of the Upstate South Carolina area, please use the ORC's toll-free number, 866-297-3071.

By continuing to the survey, you agree to the following:

1. You have read the above information.
2. You voluntarily agree to participate.
3. You are at least 18 years of age.

Appendix B
IPA Questionnaire

Please evaluate how **IMPORTANT** different characteristics of Family Warrior Weekend were in your decision to attend the camp, thinking back to how you felt before your experience at the camp.

| | Not Important At All 1 | Somewhat Unimportant 2 | Neither Important nor Unimportant 3 | Somewhat Important 4 | Extremely Important 5 |
|---|---|---------------------------------------|--|-------------------------------------|--------------------------------------|
| It is affordable to attend the camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The duration of the program is appropriate. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The number of families in attendance is appropriate. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| All staff members are sensitive to the needs of service members/veterans. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| All staff members are sensitive to the needs of the family. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Skilled mental health professionals are on staff. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Trustworthy childcare services are provided. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Family buddies contribute to a positive experience at camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Program staff members are | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| competent in the recreational activity they run (e.g. ropes courses, archery, etc.). | | | | | |
| There are veterans on staff. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Activity options accommodate differing levels of ability. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There is enough time to participate in the activities in which we are interested. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities for children to interact with other children with similar family backgrounds and experiences. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities to reconnect and have fun as a family. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are recreational experiences for the <i>whole</i> family to intentionally learn new skills such as teamwork, coping, problem solving. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| The camp fosters new relationships with other service members/veterans. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The camp is trusted in the military community. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The camp is associated with well-known military service providers. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Information about additional resources was provided for our use after camp (i.e. other treatment services). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities to discuss gender-specific issues (i.e., female veterans, female or male spouses). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There is free time to connect with my spouse. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Staff leads structured experiences to connect with my spouse in order to improve our relationship (e.g. relationship workshops). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| I feel comfortable, valued, and respected at the camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| I do not feel like the camp exploits my family in any way for their professional, marketing, or financial gain. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

Are there any factors that are important to you that we may have missed? Please tell us about them!

Please evaluate the **PERFORMANCE** of Camp Twin Lakes Family Warrior Weekend (FWW) on the following characteristics, thinking back to how you felt after attending.

| | Terrible Performance | Below Average Performance | Neither Good Nor Bad Performance | Above Average Performance | Excellent Performance |
|---|-------------------------------|----------------------------------|---|----------------------------------|-------------------------------|
| It is affordable to attend the camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The duration of the program is appropriate. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The number of families in attendance is appropriate. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| All staff members are sensitive to the needs of service members/veterans. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| All staff members are sensitive to the needs of the family. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Skilled mental health professionals are on staff. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Trustworthy childcare services are provided. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Family buddies contribute to a positive experience at camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| Program staff members are competent in the recreational activity they run (e.g. ropes courses, archery, etc.). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are veterans on staff. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Activity options accommodate differing levels of ability. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There is enough time to participate in the activities in which we are interested. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities for children to interact with other children with similar family backgrounds and experiences. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities to reconnect and have fun as a family. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are recreational experiences for the <i>whole</i> family to intentionally | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|---|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| learn new skills such as teamwork, coping, problem solving. | | | | | |
| The camp fosters new relationships with other service members/veterans. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The camp is trusted in the military community. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| The camp is associated with well-known military service providers. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| Information about additional resources was provided for our use after camp (i.e. other treatment services). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There are opportunities to discuss gender-specific issues (i.e., female veterans, female or male spouses). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| There is free time to connect with | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

| | | | | | |
|--|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| my spouse. | | | | | |
| Staff leads structured experiences to connect with my spouse in order to improve our relationship (e.g. relationship workshops). | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| I feel comfortable, valued, and respected at the camp. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| I do not feel like the camp exploits my family in any way for their professional, marketing, or financial gain. | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

Is there anything else you want to tell us about how you feel about your experience at FWW?

About Me & My Family

Gender:

Male

Female

Your Age:

Number of children:

Ages of children (if applicable):

Members of your immediate family in the military:

Me

My spouse

How many times have you and your family attended the Family Warrior Weekend?

Please answer the following questions about the service member in your family.

Length of time in the military:

Length of deployment(s):

Please identify any combat-related health conditions of the service member in your family. (Check all that apply.)

- Amputation.
- Brain injury.
- Depression
- Gastrointestinal issues.
- Generalized Anxiety Disorder
- Hearing impairment
- Post-traumatic Stress Disorder
- Sleep Disorder
- Spinal Cord Injury.
- Substance Abuse.
- Military Sexual Trauma..
- Visual Impairment.
- Other. Please specify:
- No injuries

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