

Camp Research Forum Book of Abstracts



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Dear Colleagues:

The ACA Research Forum is an opportunity for researchers and camp professionals to share and discuss new research related to campers, camp staff, camp programs, and a wide variety of other camp-related topics.

This book includes 29 abstracts that will be presented at the 2024 American Camp Association (ACA) Research Forum to be held during the ACA annual conference from February 5-9 in New Orleans, LA. Abstracts have been grouped into similar areas and will be presented across five verbal sessions and one poster session. All abstracts will be on display as posters.

We are pleased to recognize the recipients of two research awards in 2024:

- Marge Scanlin Award for Outstanding Student Research: Monica Arkin
- Eleanor P. Eells Award for Excellence in Research in Practice: Camp Twin Lakes

The Camp Research Forum has grown in quantity and quality over the past two decades. ACA's Research and Evaluation Advisory Committee (REAC) and the previous Committee for the Advancement of Research and Evaluation (CARE) have been instrumental in advancing camp research. Staff at ACA have been enthusiastically supportive, especially Dr. Laurie Browne and Melany Irvin. Two external reviewers provided peer-reviewed evaluations for the selection of these abstracts. We thank these reviewers for their time, expertise, and energy.

We look forward to presenting these papers at the 2024 Camp Research Forum, but also recognize that many people cannot attend the annual meeting. We hope these short abstracts and poster images will provide information for those not able to attend. Please contact the authors if you have further questions.

Best wishes,

Ann Gillard, Ph.D.

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2024 ACA Research Forum Co-Coordinator

The proper way to cite these abstracts using APA 7th edition is:

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USING HIGH IMPACT PRACTICES FOR PROGRAM SCALING: CREATING A FAMILY DIABETES CAMP

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Managing type 1 diabetes (T1D) requires a lifelong commitment to healthy lifestyle choices, often learned through recreation (Allen et al., 2021). Access to recreation programs for families and youth facing T1D challenges can be difficult. An innovative solution to this challenge is employing High Impact Practices (HIPs), a model adapted from higher education, known for its educational benefits, including increased student success (American Association of Colleges and Universities, 2023). The HIPs may encompass collaborative projects, undergraduate research, and service-learning, to name a few. For service-learning, emphasis should be on the partner or recipient of the effort as the most important part of the equation (Bowie & Cassim, 2016). Goff et al. (2014) successfully applied a service-learning HIP utilizing college students to facilitate an after-school program for 6th graders - the partners (i.e. community nonprofits and school administrators) identified a high need for kids in transition. Recently integration of outdoor recreation and education within various HIPs has been shown to be beneficial (e.g., Hill et al., 2023), although limited literature exists on using the HIP to facilitate a recreation experience for youth with T1D. Programs serving youth with T1D inherently have unique support networks and by integrating college students with camp/medical professionals while at camp that utilizes HIPs can create a real-world connection for students. Using HIPs could provide a sustainable approach to address the need of providing recreation experiences for youth with T1D and their families to positively impact quality of life. Therefore, this study aimed to evaluate the efficacy of using a college class HIP to pilot a new family diabetes adventure day camp.

Methods

As part of the Center for Community Engaged Learning at a Mountain West university, during the spring and early summer of 2023, students were enrolled in an adventure programming course where they created, implemented, and evaluated a day camp for youth with TID. The service-learning HIP provided students with a theoretical and applied understanding of adventure programming within the field of outdoor and community recreation. As a starting point of the project, students developed an in-depth understanding of community issues associated with T1D to include how to work with/in the community to create change. The students used Outcome-focused Programming (OFP) from class to go through the project from start to finish; the culminating experience being the camp. Using OFP, college students intentionally structured all family adventure diabetes day camp activities around self-determination theory, a well-established principle of human motivation and development. Next, the students used their civic engagement skills to implement a one-day family diabetes camp. Finally, the college students collected, analyzed and reported the camp data, adding a second HIP to the experience, undergraduate research.

Fifteen families (n = 59) of youth diagnosed with T1D, participated in the pilot of a family adventure diabetes day camp. The college students administered the American Camp Association Camper Learning Scale, a retrospective, generalized measure of camp-related improvement. The scale has high reliability coefficients (a > 0.90). College students also added questions to include program quality, examine campers' comfort level when discussing their diagnosis with others outside their family, number of friends made at camp, likelihood to return,

and diabetes knowledge learned. Finally, college students surveyed the parents with similar questions (e.g., diabetes knowledge learned). Percentages of campers who *learned a little or a lot* about the outcomes, descriptive statistics, and direct content analysis were performed using Excel.

Results

The college class surveyed all 17 campers about their family diabetes camp experience. The average age of campers was nine years old, 71% of campers felt they *felt they learned a little or a lot* about the outcomes (e.g., friendship). Campers, on average, reported making three new friends and feeling *somewhat comfortable* discussing diabetes with others. Campers scored a nine (with 10 = loved it) on program enjoyment with a majority of respondents who expressed intention to return next year. Campers reported rock climbing, soccer, and tennis as their top three camp activities. Campers identified *being with others who have T1D* as the most important camp outcome. Finally, nutrition was the prevalent theme of new information learned.

As part of their class, college students also surveyed 11 parents (one per family). The average age was 40 years old, 100% identified as Caucasian, with an average income of \$85,277. Parents on average met 2.8 new friends. Parents reported a 9.5 (with 10 = highest) on program enjoyment and 100% reported they will return for the next event. When asked about their child's level of comfort talking about T1D, parents reported a 3.1 (on a 1–5 Likert type scale with 5 being high), similar to the youth responses. Parents reported meeting other parents facing similar challenges as their favorite part of camp. When asked about the most valuable new information learned, diabetes technology emerged as the overarching theme. These data were presented at the end of semester final class project.

Discussion and Implications

The impetus for this project was to use a HIP with an undergraduate recreation class to create a new family diabetes adventure day camp. Research supports positive student gains because of participation in HIPs (American Association of Colleges and Universities, 2023; Goff et al., 2020). Specifically, service-learning and undergraduate research provide learning in a real-world setting, creating a connection with class content that further reinforces evidencebased practice regarding societal challenges (e.g., T1D). This new diabetes camp met two needs. First, it provided college students an opportunity to connect theory to practice through service-learning and participation in undergraduate research, both core HIPs (e.g., Hill et al., 2023). What also emerged was a strengthened Community of Practice (CoP) between college students, medical practitioners (e.g., diabetes educators, endocrinologist), volunteers (e.g., service club focused on T1D), and university faculty. A CoP includes a group(s) focused on a shared concern/passion, interest in improving or "doing" better to address concern/passion, and regular interaction (Wenger-Trayner & Wenger-Trayner, 2015). The interaction and supports between the myriad partners involved in the T1D camp strengthened the CoP. Second, this new camp program served families who currently do not have access to such recreation services. Data from the current program evaluation supports that both youth and parents gained improved outcomes, learned new diabetes knowledge, made new friends, and intend to return for future events.

Continuous program evaluation is an important quality assessment component for family diabetes camps by providing valuable insight for improvement (Allen et al., 2021). Bridging the HIPs of service-learning and undergraduate research, sustainable diabetes camps can be created to effectively target a societal need (Hill et al., 2022). The use of HIPs may also be a mechanism to scale programs by introducing partners through CoP. As with most reach, there are limitations. The Camper Learner scale is a retrospective self-report. Due to possible biases in a retrospective instrument additional mechanisms should be explored to determine the benefit of youth involvement in a T1D camp. A second limitation of this study is the direct measure of

HIP efficacy. While anecdotal information suggests the college students learned more from the approach than a traditional lecture course, direct measures are needed. Future research should explore the HIP process, learning outcomes for college students, and opportunities to further engage the CoP.

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