A KID AGAIN

EVALUATION OF A COMMUNITY-BASED THERAPEUTIC RECREATION PROGRAM FOR CHILDREN WITH LIFE-THREATENING CONDITIONS

January 22, 2025

Prepared by:

Cynthia A. Gerhardt, Ph.D.

Director, Center for Biobehavioral Health

The Research Institute at Nationwide Children's Hospital

EXECUTIVE SUMMARY

Despite improvements in life expectancy, childhood chronic or life-threatening illnesses impose an immense burden on children, families, and society. In addition to financial costs, children with chronic or life-threatening illnesses and their families are at heightened risk for social, emotional, and behavioral difficulties.[1-3] To mitigate these potentially negative outcomes, the A Kid Again® organization fosters hope, happiness, and healing for families raising children with life-threatening illnesses. They do this through year-round, fun-filled adventures that allow children with life-threatening illnesses to feel like A Kid Again.

A Kid Again holds multiple fun and kid-friendly adventures for children with life-threatening illnesses and their families. Some of these adventures include major sporting events, zoos, science centers, gaming restaurants, outdoor recreational play centers, and holiday parties. Children are given an opportunity to "give illness a time out" and just be kids for a day. Parents are able to socialize, find affinity, and seek support from other parents who are in a similar situation. Most importantly, the family is given the opportunity to spend quality time together at an event, which may not have been possible without the help of A Kid Again.

Between 2012 and 2014, A Kid Again partnered with the Research Institute at Nationwide Children's Hospital to examine the impact of A Kid Again on children with life-threatening illnesses and their families. Overall, the evidence collected from this initial program evaluation suggested that families benefitted greatly from their experience with A Kid Again. In 2025, A Kid Again partnered again with the Research Institute at Nationwide Children's Hospital, this time including a much larger sample of participants in a national program evaluation. This report describes findings from the 2025 national program evaluation, which indicated benefits similar to those found in the 2012-2014 evaluation.

Notably, A Kid Again not only helped children who have life-threatening illnesses perceive psychosocial, physical, and quality of life benefits, but also caregivers and siblings. This indicates that A Kid Again is indeed accomplishing their mission "to foster hope, happiness, and healing for families raising kids with life-threatening illnesses." These outcomes have now been supported twice within the past 15 years. Our hope is that this data inform strategic priorities for A Kid Again and continued improvements in the quality and scope of their services.

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OVERVIEW

Community-based programs such as A Kid Again may promote better integration for children with chronic conditions and provide support, education, and respite for families. However, limited work to date has examined the impact of therapeutic recreation programs that provide multiple brief, but ongoing, opportunities for families of children with life-threatening illnesses. The goal of this program evaluation was to obtain current data regarding the impact of A Kid Again on family outcomes nationwide and to explore associations between program involvement and demographic, physical, psychosocial, and healthcare outcomes.

This work was a collaborative effort between A Kid Again and the Center for Biobehavioral Health at the Research Institute at Nationwide Children's Hospital. The Center for Biobehavioral Health, located in Columbus, Ohio, has extensive experience in developing strategies to assess and enhance the psychological, social, and physical health behaviors of children affected by a variety of severe and life-limiting illnesses. Dr. Cynthia Gerhardt and her research team conduct federally funded research, both nationally and internationally, regarding family adjustment to cancer and end-of-life care, in addition to other pediatric conditions (e.g., sickle cell disease, juvenile idiopathic arthritis, and traumatic brain injury). Additionally, Dr. Gerhardt and her research team conducted a similar program evaluation for a Kid Again from 2012 to 2014.

Methodology

This program evaluation was determined exempt by the Institutional Review Board at Nationwide Children's Hospital. Eligible families included those who had a child aged 20 or younger enrolled in A Kid Again, and who had attended at least one adventure in the past two years. Up to two caregivers were invited to participate, and the child with a health condition and one sibling closest in age to the child could provide self-report if aged 8 or older. A Kid Again provided the evaluation team with the email address of 9,821 primary caregivers registered with the organization who met these criteria. Primary caregivers were then emailed an invitation to participate in a voluntary national survey entitled '*A Kid Again: National Impact Survey.*' Of these caregivers, 3,661 chose to participate in the electronic survey, and 2,467 were from Chapter or Market areas (vs. National adventures at home).

Primary caregivers were invited to complete two surveys. The first survey assessed the sociodemographic characteristics of caregivers and children, such as age, race, ethnicity, and family income. It also assessed "dose" information, such as the number of adventures attended in 2024 and years involved in programming. The second survey (impact survey) assessed caregiver and child perceptions of impact on psychosocial and physical well-being, through a 30-item measure adapted from the Make-A-Wish Foundation. Several open ended items allowed families to provide additional information if they wished. At completion of the surveys, primary caregivers were able to provide contact information for a secondary caregiver to complete the

surveys and were asked whether their child with a health condition and/or a sibling would be able to complete the impact survey over the phone or through email.

If a phone number for additional family members was provided by the primary caregiver, a member of the study team called and attempted to complete the survey over the phone with the participating child, a sibling, or both. Families were contacted by phone up to 4 times before being considered lost to follow-up. If caregivers provided an email for the child or sibling electronic survey, a link was sent with up to four reminders delivered via email. Data collection occurred from June 2025 to September 2025, when the survey was closed. When completing the survey, families could indicate interest in being entered into a drawing for one of five $100 gift cards, fast passes to an amusement park, and a video game system. Data were analyzed and interpreted by the research team at Nationwide Children's Hospital.

RESULTS

Findings indicated that A Kid Again had a widespread positive impact on families and led to improvements in their psychosocial and physical well-being. By participating in the adventures, parents (i.e., primary caregiver and secondary caregiver), children, and siblings perceived improvements in their emotional well-being, social well-being, resilience and coping abilities, health choices, and some of their physical symptoms. Moreover, family members found the adventures deeply enriching, with upwards of 97% reporting that A Kid Again enriched their lives either 'some' or 'a lot.' Families consistently reported that they felt more joy, more hope, and a greater sense of family closeness and strength. They found adventures to be a welcome distraction from hospitals and medical care and, as one parent put it, "plain old fun."

Benefit-finding remained consistent across all groups, although some groups were more likely to report a positive impact than others. Those most likely to benefit from A Kid Again programming included families who: (1) attended more adventures, (2) attended in-person, (3) had lower income, (4) had a child with cancer, (5) were non-White, (6) were Hispanic, and (7) had a child who was younger. However, these differences were generally small- to medium-sized, which means that, while A Kid Again seemed to impact some groups more than others, there was still a widespread benefit for all types of participants.

Overall, families believed that the adventures fostered a positive, inclusive, and connective environment that truly empowered their child to be "a kid again." They also felt a sense of community and acceptance because of the program, and they were able to interact with other families facing similar situations as them. In sum, the data suggest that A Kid Again is indeed accomplishing their mission "to foster hope, happiness, and healing for families raising kids with life-threatening illnesses."

A more detailed overview of the results is discussed below. Supplemental information can be found in the Appendices.

Unless stated otherwise, results exclude families from the National group.

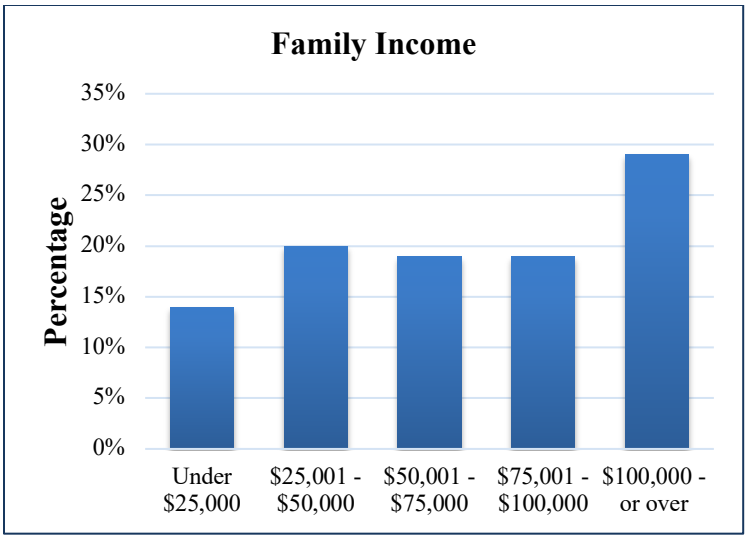
Demographic Characteristics and Patterns of Involvement

Primary and secondary caregivers completed a demographic survey which assessed their gender, age, race, ethnicity, relationship status, family income, and education level. The survey also included similar questions for the participating child and their sibling demographics and asked specifically for the participating child's diagnosis.

Primary Caregiver

A total of 2427 primary caregivers completed the demographic survey. The sample of primary caregivers had an average age of 41 years old. Almost all primary caregivers were female (*n* = 2322, 96%), and most of them were married (*n* = 1725, 72%). The sample was also predominantly White (*n* = 2025, 84%), with some Black/African American (*n* = 217, 9%) and Asian (*n* = 45, 2%) primary caregivers. There was a smaller proportion of Native American/Native Alaskan (*n* = 16, < 1%) primary caregivers, less than 1% of Native Hawaiian/Pacific Islander, and some who identified as 'Other' (*n* = 93, 4%). The sample consisted of mainly non-Hispanic/Latino primary caregivers (*n* = 2144, 90%), and most obtained an associate's degree or higher (*n* = 1678, 69%) level of education. Primary caregivers also reported their family income, which was fairly well distributed.

Demographics	Number	Percentage
Gender		
Female	2322	96%
Male	96	4%
Relationship Status		
Married	1725	72%
Other	684	18%
Race		
White	2025	84%
Black /African American	217	9%
Asian	45	2%
Native American/Native Alaskan	16	< 1%
Native Hawaiian/Pacific Islander	6	< 1%
Other	93	4%
Ethnicity		
Non-Hispanic	2144	90%
Hispanic/Latino	232	10%
Education		
High School	735	31%
Associate's Degree or Higher	1678	69%



Secondary Caregiver

A total of 349 secondary caregivers completed the demographic survey. The sample of secondary caregivers had an average age of 43 years old. Most secondary caregivers were male (*n* = 240, 69%), and most of them were married (*n* = 273, 78%). The sample was also predominantly White (*n* = 290, 84%), with some Black/African American (*n* = 32, 9%) and Asian (*n* = 7, 2%) primary caregivers. There was a small proportion of Native American/Native Alaskan (*n* = 3, < 1%) primary caregivers, and some who identified as 'Other' (*n* = 13, 4%). The sample consisted of mainly non-Hispanic/Latino primary caregivers (*n* = 310, 91%), and many of them obtained an associate's degree or higher (*n* = 224, 65%) level of education.

Demographics	Number	Percentage
Gender		
Female	106	31%
Male	240	69%
Relationship Status		
Married	273	78%
Other	76	22%
Race		
White	290	84%
Black /African American	32	9%
Asian	7	2%

Native American/Native Alaskan	3	< 1%
Other	13	4%
Ethnicity		
Non-Hispanic	310	91%
Hispanic/Latino	30	9%
Education		
High School	119	35%
Associate's Degree or higher	224	65%

Child with Health Condition

Caregivers of the 543 children who completed impact surveys also completed the demographic survey. The sample of children providing self-report had an average age of 12 years old, and more than half were male (n = 313, 58%). The sample was also predominantly White (n = 415, 77%), with some Black/African American (n = 65, 12%) and Asian (n = 7, 1%) children. There was a small proportion of Native American/Native Alaskan (n = 4, < 1%) children, and some who identified their children as 'Other' (n = 51, 9%). The sample consisted of mainly non-Hispanic/Latino children (n = 474, 88%). In addition, caregivers also reported that congenital/genetic health conditions (n = 174, 32%) were the most common diagnosis for participating children, followed by other health conditions (n = 145, 27%), neurological health conditions (n = 131, 24%), and cancer (n = 93, 17%).

Gender	**Number**	**Percentage**
Female	227	42%
Male	313	58%
Race		
White	415	77%
Black /African American	65	12%
Asian	7	1%
Native American/Native Alaskan	4	< 1%
Other	51	9%
Ethnicity		
Non-Hispanic	474	88%

Hispanic/Latino	65	12%
Child's Diagnosis		
Congenital/Genetic	174	32%
Other Health Condition	145	27%
Neurologic	131	24%
Cancer	93	17%

Sibling

Caregivers of the 475 siblings who completed impact surveys also completed the demographic survey. The sample of siblings had an average age of 13 years old, and about half were male (*n* = 248, 52%). The sample was also predominantly White (*n* = 380, 80%), with some Black/African American (*n* = 47, 10%) and Asian (*n* = 14, 3%) children. There was a small proportion of Native American/Native Alaskan (*n* = 2, < 1%) children, and some who identified their children as 'Other' (*n* = 32, 7%). The sample consisted of mainly non-Hispanic/Latino children (*n* = 427, 90%).

Gender	**Number**	**Percentage**
Female	226	48%
Male	248	52%
Race		
White	380	80%
Black /African American	47	10%
Asian	14	3%
Native American/Native Alaskan	2	< 1%
Other	32	7%
Ethnicity		
Non-Hispanic	427	90%
Hispanic/Latino	46	10%

Impact

Primary caregivers, secondary caregivers, children (ages 8-20), and siblings (ages 8-20) were invited to complete a 30-item questionnaire on the perceived impact of A Kid Again on their and their child's/sibling's psychosocial and physical well-being. These questions were rated on a 4-point scale (1 = no impact, 2 = a little impact, 3 = some impact, 4 = a lot of impact), where scores of 1 and 2 were later collapsed and considered "no impact," and scores of 3 and 4 were considered "impact." Full impact surveys and scoring information may be referenced in Appendix B.

Total Impact Scores

All four respondents (primary caregiver, secondary caregiver, child, sibling) reported high impact from A Kid Again. These reports were consistent and comparable to each other, suggesting that A Kid Again is succeeding in supporting the entire family. In all, 93% of primary caregivers, 94% of secondary caregivers, 94% of children, and 95% of siblings reported some or a lot of impact from the program.

	Primary Caregiver		Secondary Caregiver		Child		Sibling	
Impact	93%	3.1	94%	3.3	94%	3.2	95%	3.2

	1	No impact
	2	A little impact
Impact	**3**	Some impact
Impact	**4**	A lot of impact

No impact

Domain Impact Scores

All four respondents from the family (primary caregiver, secondary caregiver, child, sibling) reported high impact across the six measured domains as a result of involvement in A Kid Again programming. Although families experienced benefits in every domain, they reported greater benefit in the psychosocial domains (i.e., emotional well-being, enrichment, social well-being, resilience/coping ability) relative to the physical domains (i.e., health/physical condition and health choices).

	Primary Caregiver		Secondary Caregiver		Child		Sibling	
Emotional Well-Being	91%	3.2	94%	3.3	93%	3.3	92%	3.2
Enrichment	98%	3.6	97%	3.7	97%	3.6	98%	3.6
Social Well-Being	90%	3.3	93%	3.4	91%	3.3	94%	3.3
Resilience/Coping Ability	90%	3.3	93%	3.4	91%	3.3	92%	3.3
Health/Physical Condition	69%	2.7	73%	2.8	72%	2.8	72%	2.8
Health Choices	70%	2.8	79%	3.0	81%	3.0	84%	3.1

By Mission and Individual Items

Most family members reported a high impact on mission items (Item 1, 2, and 21; Happiness, Hope, and Healing), but fewer respondents indicated that AKA programming had a high impact on physical well-being (item 21).

Almost all respondents reported that AKA provided a chance to feel special (92-96%), something positive to look forward to (96% for all respondents), and an opportunity to be a kid again (93-96%). Family members also agreed that AKA programming provided a distraction or break from the clinic or hospital (84-89%), a better quality of life (82-87%), more compassion toward others (82-91%), and a sense that their family was closer (87-90%) and stronger (86-90%).

	Primary Caregiver		Secondary Caregiver		Child		Sibling	
1. More joy or happiness*	3.58	94%	3.71	95%	3.64	95%	3.64	96%
2. More hope*	3.26	84%	3.39	88%	3.33	84%	3.31	84%
3. Better self esteem	3.16	81%	3.32	86%	3.23	79%	3.08	75%
4. Less depression	3.13	79%	3.22	80%	3.19	79%	3.12	77%
5. Less fear or worry	2.95	72%	3.07	72%	3.01	73%	3.03	73%
6. A chance to feel special	3.76	96%	3.77	97%	3.73	95%	3.55	92%
7. A distraction or break from the clinic/hospital[a]	3.54	89%	3.52	89%	3.42	84%	3.52	87%
8. Something positive to look forward to	3.78	96%	3.79	96%	3.78	96%	3.76	96%
9. An opportunity to be a kid again	3.76	96%	3.75	95%	3.68	93%	3.64	93%
10. Better quality of life	3.41	88%	3.43	89%	3.35	85%	3.27	82%
11. More social support from others	3.30	82%	3.42	84%	3.20	76%	3.13	74%
12. More compassion toward others	3.32	83%	3.40	86%	3.31	82%	3.50	90%
13. Greater acceptance by others	3.37	85%	3.43	85%	3.32	82%	3.29	81%
14. A desire to give back/help others	3.20	78%	3.36	83%	3.34	83%	3.51	89%
15. A stronger connection with other kids like me/ them	3.25	79%	3.36	81%	3.30	80%	3.27	80%
16. A sense that our family is closer	3.45	88%	3.55	91%	3.47	87%	3.48	87%
17. A feeling that our family is stronger	3.43	87%	3.51	90%	3.48	88%	3.47	87%

18. Greater sense of empowerment or control in life	3.16	78%	3.29	82%	3.10	73%	3.06	73%
19. More self confidence	3.20	80%	3.34	84%	3.25	80%	3.10	74%
20. Greater ability to cope with their/my health condition, illness, or disability and/or situation[b]	3.20	79%	3.27	83%	3.16	76%	3.31	82%
21. Better physical well-being*	3.03	73%	3.09	74%	3.03	72%	3.01	71%
22. More energy	2.88	67%	3.06	73%	3.01	70%	2.99	70%
23. More physical strength	2.78	63%	2.90	68%	2.84	62%	2.87	66%
24. Fewer clinic or hospital visits[c]	2.28	43%	2.54	53%	2.43	47%	2.55	54%
25. Less pain or physical symptoms	2.33	45%	2.56	55%	2.49	50%	2.45	51%
26. A better attitude about his or her health condition, illness, or disability[d]	3.00	71%	3.18	77%	3.18	77%	3.39	86%
27. A positive turning point in treatment	2.64	56%	2.84	63%	2.77	59%	2.96	68%
28. A stronger desire to improve his or her health behaviors	2.75	61%	2.99	69%	3.02	69%	3.03	70%
29. Greater willingness to comply with treatment[e]	2.72	59%	2.96	68%	2.95	69%	3.00	69%

30. Improved health behaviors/choices	2.76	61%	3.02	70%	3.04	70%	3.03	72%

*Indicates mission item (hope, healing, and happiness)
[a]For sibling survey, a distraction or break from my sibling's health condition
[b]For sibling survey, greater ability to cope with my sibling's health condition, illness, and/or disability
[c]For sibling survey, fewer absences from school or other activities
[d]For sibling survey, a better attitude about my sibling's health condition, illness, disability and/or situation
[e]For sibling survey, greater willingness to go to my own doctor appointments

Diagnosis and Impact

Across diagnoses, all four respondents from the family (primary caregiver, secondary caregiver, child, sibling) reported high impact from involvement in the program. Particularly, families with children who had a cancer diagnosis reported a higher impact overall relative to families of children with other diagnoses.

	Primary Caregiver	Secondary Caregiver	Child	Sibling
Cancer	95%	96%	95%	98%
Neurological	91%	93%	95%	96%
Congenital/ Genetic	93%	96%	94%	94%
Other Health Condition	93%	92%	92%	94%

By Chapter, Market, National

In analyses that included all survey participants (i.e., including participants in National), families in Chapter and Market areas consistently reported greater perceived impact than families in National (i.e., adventures at home). Findings indicate that families in National still perceived benefits—just not as much as those in Chapter and Market.

	Primary Caregiver		Secondary Caregiver		Child		Sibling	
Chapter	93%	3.1	95%	3.3	94%	3.2	96%	3.2
Market	93%	3.2	93%	3.3	94%	3.3	94%	3.2
National	78%	2.7	79%	3.0	80%	2.9	93%	3.0

	Primary Caregiver		Secondary Caregiver		Child		Sibling	
Not National/In Person	93%	3.1	94%	3.3	94%	3.2	95%	3.2

National/At Home	78%	2.7	79%	3.0	80%	2.9	93%	3.0

Factors Associated with Impact

Results suggested that certain groups of children benefited the most from participating in the program. Children showed significantly higher perceived impact from participating in the program when they: (1) attended more adventures, (2) had more in-person programming, (3) came from a lower income family, (4) had a cancer diagnosis, (5) were non-White, (6) were Hispanic, or (7) were younger in age.

Comparison to 2012 Study

From 2012 to 2014, the research team at Nationwide Children's Hospital conducted a similar program evaluation with A Kid Again families. This program evaluation occurred in two phases and included only families served in Ohio. Seventy-nine families participated in the first phase and completed a home visit with a battery of measures assessing demographic, physical, psychosocial, and healthcare factors. Families (including children) also completed a semi-structured qualitative interview.

The second phase of the study occurred online and was similar to the present evaluation. The same impact survey was emailed to 1,431 caregivers and completed by 385 (27%). Caregivers reported on their children and their own experiences.

Because data from one caregiver was collected in the 2012 study, a comparison can only be drawn between 2012 impact survey results and survey results from primary caregivers who participated in 2025. Overall, both surveys yielded positive responses from caregivers, with some variation in the percentages of caregivers reporting impact on each item.

Differences in results may be a result of the size and composition of the sample. The present study included over 2000 families from A Kid Again programs nationwide that may be newer or have less opportunity than A Kid Again programs in Ohio. With more chapters and adventures, the type of experiences families may have varied more.

Emotional Well-Being

	2012 Study	2025 Study
More joy	95%	94%

More hope	85%	84%
Better self esteem	84%	81%
Less depression	83%	79%
Less fear/worry	75%	72%

Enrichment

	2012 Study	2025 Study
A chance to feel special	97%	96%
A distraction or break from clinic/ hospital	90%	89%
Something positive to look forward to	98%	96%
An opportunity to be a kid again	96%	96%
Better quality of life	89%	88%

Social Well-Being

	2012 Study	2025 Study
More social support	79%	82%
More compassion toward others	88%	83%
Greater acceptance by others	83%	85%
A desire to give back/help others	85%	78%
A stronger connection with other kids like them	80%	79%

Resilience/Coping Ability

	2012 Study	2025 Study
A sense that our family is closer	87%	88%
A feeling that our family is stronger	86%	87%
Greater sense of empowerment/control in life	75%	78%
More self confidence	78%	80%
Greater ability to cope with the illness/situation	81%	79%

Health/Physical Condition

	2012 Study	2025 Study

Better physical well-being	58%	73%
More energy	57%	67%
More physical strength	50%	63%
Fewer clinic/hospital visits	38%	43%
Less pain/physical symptoms	41%	45%

Health Choices

	2012 Study	2025 Study
A better attitude about their health condition	74%	71%
A positive turning point in their treatment	55%	56%
A stronger desire to improve their health behaviors	57%	61%
Greater willingness to comply with treatment	56%	59%
Improved health behaviors/choices	57%	61%

Comparison to Other Organizations

Make-A-Wish Foundation

Like A Kid Again, Make-A-Wish® conducted two surveys within the past 15 years, in which the second was an expansion and more in-depth version of the first.[4] Both organizations support children with life-threatening illnesses and their families through complementary services.[5,6] In the case of A Kid Again, children and their families are invited to participate in free "Adventures" where they can take a break from the routine of medical care, with the goals of fostering "hope, happiness, and healing."[5] Make-A-Wish, similarly, seeks to support children and their families through wish-granting, with the expectation that experiencing a wish coming true can help cultivate hope and courage.[6]

Despite similarities between the two organizations, a direct comparison has several limitations. First, while both organizations support children with life-threatening conditions and their families, they do so in different ways. As noted above, A Kid Again provides ongoing programming for the entire family.[5] In contrast, Make-A-Wish provides a one-time service in the form of a realized wish, with the primary emphasis on the child.[6]

Secondly, while the original 2010 Make-A-Wish Impact Survey[7] resembled the 2025 A Kid Again Impact Survey (the latter hereafter referred to as the "2025 survey"), the 2022 Make-A-

Wish Impact Survey (hereafter referred to as the "2022 survey") used a different format.[4] The surveys, then, asked different questions, and they asked them in different ways.

Finally, the 2025 and 2022 surveys asked different types of respondents. While they surveyed a similar number of participants—over 3,000 in each full sample—Make-A-Wish surveyed children, parents, and medical professionals,[4] and A Kid Again surveyed children, parents, and siblings. Moreover, the 2022 Make-A-Wish Impact Survey took a retrospective approach, meaning they asked **alumni** and **parents of alumni** of wishes (all ages ≥ 18) rather than people who were currently receiving wishes. Meanwhile, the 2025 survey assessed participants who were currently engaged in programming (ages of children and siblings ≥ 8 and ≤ 20).

In sum, A Kid Again and Make-A-Wish have similar missions but different approaches. While they both assessed the "impact" of their services over a similar timeframe, comparisons between these surveys will nevertheless be limited in terms of their validity and therefore utility. A general takeaway may be that **both services provide high-quality impact** rather than one being better or more effective than the other.

The tables below[4] do their best, given the limitations, to compare these two organizations.

Impact According to Caregiver/Parent

	A Kid Again (2025): primary caregiver, secondary caregiver	Make-A-Wish (2022): all caregivers/parents
Emotional Well-Being	91%, 94%	94%
Brought Family Closer Together	88%, 91%	95%
Overall Well-Being	93%, 94%	95%

More Joy	94%, 95%	97%
Better Physical Well-Being	73%, 74%	72%
Greater Connection with Community	90%, 93%	65%
Greater Willingness to Comply with Treatment	59%, 68%	51%

Impact According to Child

	A Kid Again (2025)	Make-A-Wish (2022)
Better Quality of Life	85%	91%
Brought Family Closer Together	87%	92%
Overall Well-Being	94%	95%
More Confidence	80%	90%

More Hope	84%	95%
More Joy	95%	99%
Better Physical Well-Being	72%	73%
Improved Health Behaviors/Choices	70%	73%
Greater Willingness to Comply with Treatment	69%	67%

SeriousFun

SeriousFun[SM] Children's Network is a collection of 30 camps and programs worldwide for children with serious illnesses and their families.[8] Like A Kid Again, their goal is to improve psychosocial functioning, physical functioning, and quality of life through therapeutic recreation, in which children can connect with others like them in a safe and active environment.[5,8,9]

In 2021, SeriousFun also conducted an impact survey with a large sample size (hereafter referred to as the "2021 survey"), assessing similar outcomes as A Kid Again.[10,11] However, as with the comparison to the 2022 Make-A-Wish Survey, several limitations should be noted.

First, A Kid Again and SeriousFun offer different kinds of programming. While A Kid Again Adventures are offered on an ongoing basis,[5] SeriousFun provides camp for families, which are short-term programs that the 2021 survey was designed to assess.[10] Second, most of the methodology used in the 2021 survey is not publicly available, so it is possible that questions were asked in different ways from the 2025 survey.[10] Lastly, the 2021 survey was retrospective (i.e., surveyed camp alumni, not those currently enrolled in camp) and assessed children only (ages of children ≥ 17 and ≤ 30). Meanwhile, A Kid Again surveyed children, siblings (ages of children and siblings ≥ 8 and ≤ 20), and their families who were currently enrolled in programming.

As above, despite limitations in the comparisons, a general takeaway may be that **both services provide high-quality impact** rather than one is better or more effective than the other.

The tables below[11] do their best, given the limitations discussed, to compare these two organizations.

Impact According to Child

	A Kid Again (2025)	SeriousFun (2021)
More Confidence	80%	85%
More Hope	84%	90%
More Compassion	82%	88%
A Stronger Connection with Other Kids Like Me	80%	82%

Qualitative Findings

In addition to 30 items on the questionnaire that assesses children and caregiver's perceived impact of A Kid Again, there was an open-ended prompt for caregivers to leave comments about their responses or the program in general. A rapid qualitative approach was used to characterize caregivers' responses.[12] Of all the responses, six themes were derived: (1) positive, (2) negative, (3) neutral, (4) ideas for improvement, (5) related to survey, (6) uncategorizable comments.

Theme	Description	Example
Positive	Positive comments/praise for the program	"Great to meet other families, not be stared at, try a water park in a safe environment, spend family time together"
Negative	Negative comments/criticism for the program	"Not enough events and families living this life are financially struggling. So to invite them to events and not include food and snacks is extremely stressful on families."
Neutral	Neutral comments about the program	"We love the program, just wish there were more opportunities to do things throughout the year."
Related to Survey	Comments for the survey rather than the program	"Some of these do not pertain to a child with a lifelong disability. Maybe add a 'not applicable' column for better data."
Ideas for Improvement	Suggestions or feedback for upcoming events	"Can the DMV area have an outing for Hershey Park instead of Kings Dominion? KD is really far away for some families. "
Uncategorizable	Comment unrelated to the program or survey	"My kiddo is past his cancer journey and has long term issues due to treatment, but does not get treatment. "

The positive comments were broken down further into smaller subthemes to accurately capture caregiver's thoughts about the program and the opportunities family gained by being involved with A Kid Again. The subthemes derived were: (1) Praise, (2) Family time, (3) Expanded opportunities, (4) Child and family happiness, (5) Improvement of condition, (6) Sense of community, (7) Relating with other children, (8) Gratitude, (9) Distraction/break from health condition.

Theme	Description	Example

Praise	Praised the program and/or staff & volunteers	"This is a great program. We are happy to be involved. The smiles on the volunteer/work[er's] face says it all. GREAT PROGRAM "
Family Time	Having opportunity to spend time together as a family	"Our family loves spending time together. A Kid Again creates more opportunity for that, and we are forever grateful!"
Expanded opportunities	Having opportunity to do things they couldn't due to finances or logistics	"We appreciate the chance to do extra activities that might be too crowded or expensive during typical circumstances."
Child and Family Happiness	Child and family looking forward to joy/healing from events/adventures	"My son loves that it gives him a safe space to get out of his comfort zone and experience new things without being scared [or] ridiculed"
Improvement of Condition	Involvement helped improve child's health condition.	"He has a better desire to stay healthy for the next adventure."

Theme	Description	Example
Sense of Community	Able to meet and connect with similar families	"Our family looks forward to AKA adventures as a means for connecting with others who are facing similar challenges and a fun family outing. "
Relating with Other Children	Child has opportunity to connect and relate to other children like them	"My daughter was able to meet another little girl with her rare disease, and this helped her see that the friend also has to take medicine before eating, which is very hard and embarrassing for my child. "
Gratitude	Express gratitude for involvement in the program	"We are thankful for a kid again and the opportunities they give not only the kid, but their family!"

Distraction/Break from Health Condition	Events/adventures serves as distraction from medical condition	"The annual Valley Fair day is something my kiddo and our family look forward to every year. It truly is so much fun to get away from the medical appointments for a change and just have some plain old fun. "

USE OF THIS INFORMATION

The goal of this program evaluation was to enhance services to promote resilience in children, siblings, and parents affected by life-threatening illnesses as A Kid Again continues to expand nationwide.

The results of this study are based on an impact survey that evaluates caregiver, child, and sibling perception of the impact that A Kid Again has on children involved in the program. The present data can be used to justify the impact of the organization for funding foundations, individuals, or corporate sponsors. The data represents aggregated results of an online survey and should be presented in that context. Percentages can be stated as presented, or in a relative context (e.g., “a very high percentage” rather than “90 percent”).

Parents’ highly positive responses about A Kid Again demonstrate the extent to which the organization is accomplishing its mission to “foster hope, happiness, and healing.” The open response at the end of the survey also provided some additional clarity into the experiences of families involved in a Kid Again. Overwhelmingly, caregivers expressed gratitude for the organization and noted that the adventures allowed them to spend time as a family doing something together that they otherwise would not be able to do. The adventures also provided a sense of community and opportunity for children with health conditions to meet and relate to other kids like them. While most feedback was positive, some caregivers did express the need for more opportunities in their area, which could be a potential area for growth.

This evaluation of A Kid Again characterizes the impact of the organization on children and families affected by life-threatening illnesses. The goal of this evaluation was to determine the impact the program following expansion into states outside of Ohio. The results of the present impact survey are similar to the survey conducted in 2012, indicating that A Kid Again continues to have a positive impact with their recent expansion.

FUTURE DIRECTIONS

This program evaluation was an important step in identifying the impact of A Kid Again on families across the United States and lays the groundwork for additional research. In general, families believed that the program had a significant, positive impact and helped to foster hope, happiness, and healing.

While impact was widespread, those most likely to benefit came from families who: (1) attended more adventures, (2) attended in-person, (3) had lower income, (4) had a child with cancer, (5) were not White, (6) were Hispanic, and (7) had a child who was younger.

We anticipate that the data collected in this study will help equip A Kid Again with the tools to more effectively tailor and promote their programming, thereby impacting a greater number of families. Future studies of A Kid Again may help us better understand its impact and the impact of therapeutic recreation more generally. Such studies might examine the impact of programming over time, rather than a single point in time; employ standardized scales to better situate A Kid Again among other therapeutic recreation programs; inquire into the possible causal mechanisms of "impact" and why some families perceive greater impact than other families.

As a whole, the data collected will help to ensure that the A Kid Again organization remains successful and faithful to their mission.

APPENDIX A

Demographics Survey - Primary Caregiver

BACKGROUND INFORMATION

We would like to ask you a few questions about yourself. Please answer all of the questions as completely as possible.

1. What is your gender?

____ Male (1)
____ Female (2)
____ Non-binary (3)
____ Other (4)
_____

2. Which of the following best describes your current status?

____ Single (1)
____ Married (2)
____ Divorced (3)
____ Separated (4)
____ Remarried (5)
____ Widowed (6)
____ Living with someone (7)

3. What was the highest level of school you have completed?

____ High School/GED (1)
____ Associates Degree (technical or trade school) (2)
____ College Degree (BS/BA) (3)
____ Graduate / Professional Degree (MA/MS, MD, PhD) (4)

4. What is your date of birth and age? Month _____ Day _____ Year _____ Age _____

5. Approximately what is your present annual family income?

_____ Under - $25,000 per year (1)
_____ $25,001 - $50,000 per year (2)
_____ $50,001 - $75,000 per year (3)
_____ $75,001 - $100,000 per year (4)
_____ $100,001 - or more per year (5)

6. If you have a spouse or partner, what was the highest grade of school s/he completed? (Circle one)

____ High School/GED (1)
____ Associates Degree (technical or trade school) (2)
____ College Degree (BS/BA) (3)

____ Graduate / Professional Degree (MA/MS, MD, PhD) (4)

7. How would you describe your race?

_____ White (1)
_____ Black or African American (2)
_____ Asian (3)
_____ Native American / Native Alaskan (4)
_____ Native Hawaiian / Pacific Islander (5)
_____ Other, please specify (6) _____

8. How would you describe your ethnicity?

_____ Hispanic or Latino (1)
_____ Not Hispanic (2)

9. Please indicate the number of children currently residing in your home. _____

10. What is your relationship to the ill child who is participating in A Kid Again?

_____ Biological Parent (1)
_____ Step Parent (2)
_____ Adoptive Parent (3)
_____ Foster Parent (4)
_____ Grandparent (5)
_____ Other, please specify (6)_____

11. What is your child's gender?

____ Male (1)
____ Female (2)
____ Non-binary (3)
____ Other (4)

12. How would you describe the race of your child participating in A Kid Again?

_____ White (1)
_____ Black or African American (2)
_____ Asian (3)
_____ Native American / Native Alaskan (4)
_____ Native Hawaiian / Pacific Islander (5)
_____ Other, please specify (6) _____

13. How would you describe the ethnicity of your child participating in A Kid Again?

_____ Hispanic or Latino (1) _____ Not Hispanic (2)

14. Please indicate the health condition of your child who is participating in A Kid Again.

_____ Cancer (1)
_____ Neurological (2)
_____ Congenital/Genetic (3)
_____ Other Health Condition (4)

15. What is the age of your child participating in A Kid Again? _____

16. How many years has your family been involved in A Kid Again? _____

17. How many A Kid Again adventures did your family attend in 2024? _____

18. Does your child have a sibling who has participated in A Kid Again events?

_____ No (1) _____ Yes (2)

19. If your child with a health condition and/or a sibling would be willing to answer similar questions via phone about their experience with A Kid Again, please include your phone number below and a member of our study team at Nationwide Children's Hospital will contact you.

Phone # _____

Best time to call? _____ Morning _____ Afternoon _____Evening

Demographics Survey - Secondary Caregiver

BACKGROUND INFORMATION

We would like to ask you a few questions about yourself. Please answer all of the questions as completely as possible.

1. What is your gender?

____ Male (1)
____ Female (2)

2. Which of the following best describes your current status?

____ Single (1) ____ Remarried (5)

____ Non-binary (3)
____ Other (4)
_____

____ Married (2)
____ Divorced (3)
____ Separated (4)

____ Widowed (6)
____ Living with someone (7)

3. What was the highest level of school you have completed?

____ High School/GED (1)
____ Associates Degree (technical or trade school) (2)
____ College Degree (BS/BA) (3)
____ Graduate / Professional Degree (MA/MS, MD, PhD) (4)

4. What is your date of birth and age? Month _____ Day _____ Year _____ Age _____
5. Approximately what is your present annual family income?

_____ Under - $25,000 per year (1)
_____ $25,001 - $50,000 per year (2)
_____ $50,001 - $75,000 per year (3)
_____ $75,001 - $100,000 per year (4)
_____ $100,001 - or more per year (5)

6. How would you describe your race?

_____ White (1)
_____ Black or African American (2)
_____ Asian (3)
_____ Native American / Native Alaskan (4)
_____ Native Hawaiian / Pacific Islander (5)
_____ Other, please specify (6) _____

7. How would you describe your ethnicity?

_____ Hispanic or Latino (1)
_____ Not Hispanic (2)

8. What is your relationship to the ill child who is participating in A Kid Again?

_____ Biological Parent (1)
_____ Foster Parent (4)

_____ Step Parent (2) _____ Grandparent (5)
_____ Adoptive Parent (3) _____ Other, please specify (6)_____

APPENDIX B

Impact Survey – Primary Caregiver/Secondary Caregiver

Because of our family's involvement in A Kid Again, MY CHILD has had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Emotional Well-Being	More joy or happiness				
	More hope				
	Better self-esteem				
	Less depression or sadness				
	Less fear or worry				
Enrichment	A chance to feel special				
	A distraction or break from the clinic/hospital				
	Something positive to look forward to				
	An opportunity to be a kid again				
	Better quality of life				
Social Well-Being	More social support from others				
	More compassion toward others				
	Greater acceptance by others				
	A desire to give back/help others				
	A stronger connection with other kids like them				
	A sense that our family is closer				

Because of our family's involvement in A Kid Again, MY CHILD has had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Resilience / Coping Ability	A feeling that our family is stronger				
	Greater sense of empowerment or control in life				
	More self confidence				
	Greater ability to cope with the illness and/or situation				
Health / Physical Condition	Better physical well-being				
	More energy				
	More physical strength				
	Fewer clinic or hospital visits				
	Less pain or physical symptoms				
Health Choices	A better attitude about his or her illness or condition				
	A positive turning point in treatment				
	A stronger desire to improve his or her health behaviors				
	Greater willingness to comply with treatment				
	Improved health behaviors/choices				

As a result of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Emotional Well-Being	More joy or happiness				
	More hope				
	More positive feelings about myself				
	Less depression or sadness				
	Less fear or worry				
Enrichment	Positive memories that will last forever				
	A distraction or break from the clinic/hospital				
	Something positive to look forward to				
	An opportunity to see my child be a kid again				
	An experience that was otherwise not possible				
Social Well-Being	More social support from others				
	More compassion toward others				
	Greater acceptance by others				
	A desire to give back/help others				
	A stronger connection with other parents or children like my child				
Resilience / Coping Ability	A sense that our family is closer				
	A feeling that our family is stronger				
	A greater sense of empowerment or control in life				
	More self-confidence as a parent				
	Greater ability to cope with the illness and situation				

Impact Survey – Child

Because of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Emotional Well-Being	More joy or happiness				
	More hope				
	Better self-esteem				
	Less depression or sadness				
	Less fear or worry				
Enrichment	A chance to feel special				
	A distraction or break from the clinic/hospital				
	Something positive to look forward to				
	An opportunity to be a kid again				
	Better quality of life				
Social Well-Being	More social support from others				
	More compassion toward others				
	Greater acceptance by others				
	A desire to give back/help others				
	A stronger connection with other kids like me				
Resilience / Coping Ability	A sense that our family is closer				
	A feeling that our family is stronger				
	Greater sense of empowerment or control in life				
	More self confidence				
	Greater ability to cope with the illness and/or situation				

Because of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Health / Physical Condition	Better physical well-being				
	More energy				
	More physical strength				
	Fewer clinic or hospital visits				
	Less pain or physical symptoms				
Health Choices	A better attitude about my illness or condition				
	A positive turning point in treatment				
	A stronger desire to improve my health behaviors				
	Greater willingness to take my treatments				
	Improved health behaviors/choices				

Impact Survey – Sibling

Because of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
Emotional Well-Being	More joy or happiness				
	More hope				
	Better self-esteem				
	Less depression or sadness				
	Less fear or worry				
Enrichment	A chance to feel special				
	A distraction or break from my sibling's illness or condition (such as the clinic/hospital)				
	Something positive to look forward to				

Because of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
	An opportunity to be a kid again				
	Better quality of life				
Social Well-Being	More social support from others				
	More compassion toward others				
	Greater acceptance by others				
	A desire to give back/help others				
	A stronger connection with other siblings like me				
Resilience / Coping Ability	A sense that our family is closer				
	A feeling that our family is stronger				
	Greater sense of empowerment or control in life				
	More self confidence				
	Greater ability to cope with my sibling's illness and/or situation				
Health / Physical Condition	Better physical well-being				
	More energy				
	More physical strength				
	Fewer absences from school or other activities				
	Less pain or physical symptoms				
Health Choices	A better attitude about my sibling's illness or condition				
	A positive turning point in their treatment				
	A stronger desire to improve my own health behaviors				
	Greater willingness to go to my own doctor appointments and take treatments when needed				

Because of our family's involvement in A Kid Again, I have had….		Not At All (1)	A Little (2)	Some (3)	A Lot (4)
	Improved health behaviors/choices				

Scoring Key

	1	No impact
	2	A little impact
Impact	**3**	Some impact
	4	A lot of impact

No impact

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