

# **ICAN**

## **STANDARDS FOR GRIEF AND MOURNING**

### **PROFESSIONALS**

#### **I. GRIEF THERAPIST**

##### **REQUIREMENTS:**

**Degree:** MA, MS, MSW, EdD, PsyD, MD, RN, Ph.D., and MDiv.

**License:** MFCC, LCSW, Registered Licensed Nurse, Credentialed School Counselor, Credentialed School Psychologist, Licensed Educational Psychologist, Psychologist, Psychiatrist.

**Background:** No legal convictions/problems or medical/psychological conditions that would interfere with performance of duties.

**Experience:** One year of counseling or equivalent experience in death-related area; Direct service to individuals or groups involved in dying and bereavement. Example: leading grief support groups for one year, working in an organization that provides service to the bereaved for one year.

Children and Family Grief Therapy:

It is important to have sufficient experience with each specific age level in order to be qualified to treat that age level (e.g. minimum of 5 people). Suggested age levels are: birth to three, four to six, six to nine, nine to twelve; twelve to fifteen, fifteen to eighteen, and eighteen to twenty-one.

Ability to provide *family therapy* for bereavement issues.

Working knowledge of *family violence* issues.

**Ethics:** Agree to follow professional code of ethics.

##### **DESIRABLE QUALIFICATIONS:**

**Education:** in grief related topics. Examples may include: death and dying, as bereavement/loss counseling, practical applications of bereavement counseling, child development, counseling and psychotherapy theory and technique, assessment and therapy with children, family therapy, cultural issues, differential diagnosis, assessment and treatment of depression and post-traumatic stress disorder, crises intervention, suicide intervention.

**Continuing Education:** yearly attendance at “grief” related programs.

**Specific Areas of Competence:**

**Cultural:** general knowledge of cultural issues including familiarity with various cultural and religious concepts of death and bereavement.

**Referral Resources:** knowledge of community resources and when a referral is indicated.

**Literature:** familiarity with bereavement literature, both professional and for use with clients of different ages.

**Level of Care :** knowledge of appropriate level of care for people including immediacy, duration and modality of treatment, family involvement, perpetrator and jail system, and follow-up.

**Funeral and Cemetery** experience and familiarity.

**Membership** in recognized grief association; professional organization.

**Certification** in grief counseling (e.g., Association for Death Education and Counseling).

## **II. PARAPROFESSIONAL GRIEF FACILITATOR**

### **REQUIREMENTS:**

**Degree:** Minimum High School Diploma; College preferred.

**Background:** No legal convictions/problems or medical/psychological conditions that would interfere with performance of duties.

**License:** Not required. Facilitators providing counseling services should have a licensed professional (Grief Therapist) available for consultation and case review for crises or other problems as needed. People should be carefully assigned/matched to appropriate paraprofessionals.

With paraprofessional grief counseling services should have a licensed professional (Grief Therapist) available for consultation and case review for crises or other problems as needed. People should be carefully assigned/matched to appropriate paraprofessionals.

**Training:** Minimum of two years **supervised experience** working with bereavement people/groups.

**Specific training:** to screen major psychological problems (e.g., suicidality, depression, post-traumatic stress, psychotic states).

Familiarity of professional and community resources, ability to determine when a referral is indicated, and knowledge of referral procedures.

Working knowledge of **family violence** issues.

An understanding of reasonable **ethical standards** as outlined by professional mental health associations.

**Experience:** Two years of counseling or equivalent experience in death and bereavement; direct services to individuals (minimum of 10 people) and/or groups. Example: leading grief groups for two years, working in an organization that provides services to the bereaved for two years.

**Children and Family Therapy:** It is important to have sufficient experience with each specific age level in order to be qualified to treat that age level (e.g., minimum of five people).

Suggested age levels are: birth to three, four to six, six to nine, nine to twelve, twelve to fifteen, fifteen to eighteen, and eighteen to twenty one.

Ability to provide *family therapy* for bereavement issues.

In some instances, there may be a balancing of requirements; for example, if not credentialed, there needs to be significant experience in treating the bereaved, etc.

## **DESIRABLE QUALIFICATIONS:**

**Membership** in recognized grief association (e.g., Association for Death Education and Counseling, or American Association of Grief Counselors).

**Certification** in grief counseling (e.g., Association for Death Education and Counseling).

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**Education** in grief related topics. Examples include: death and dying, bereavement/loss counseling, practical applications of bereavement counseling, child development, counseling and psychotherapy theory and techniques, assessment and therapy with children, family therapy, cultural issues, differential diagnosis, assessment and treatment of depression and post-traumatic stress disorder, crisis intervention, suicide intervention.

**Continuing Education:** Five hours yearly attendance at “grief related Programs”.

**Specific Areas of Competence:**

**Cultural:** general knowledge of cultural issues including familiarity with various cultural and religious concepts of death and bereavement.

**Literature:** familiarity with bereavement literature, both professional and for use with clients of different ages.

**Level of Care:** knowledge of appropriate level of care for people including immediacy, duration and modality of treatment, family involvement, perpetrator and jail system, and follow-up.

Assistance in preparation of **two funerals**.

Attendance at **cemetery on 5 occasions** related to bereavement issues.

**GUIDELINES FOR INTERVENTION WITH SURVIVORS OF  
FATAL/SEVERE FAMILY VIOLENCE**

Death or permanent injury of a family member is not just another psychological issue. Psychotherapy, funerals, grave visitation, memory books, family gatherings, and rituals for anniversaries must all be considered. Infants and toddlers and “uninvolved” siblings have issues. “Grief intervention” is more than brief psychotherapy. The best intervention for some children and families may involve support for rituals and no therapy or vice versa.

1. Locate protocols and programs in your agency now, before you need them.
2. Read about this process. Try bookstores or special bibliographies.
3. Mourning is a natural process not necessarily an illness to be fixed.
4. An overwhelmed survivor is not automatically mentally ill.
5. Take your lead from the survivors. Listen for nonverbal cues.
6. The developmental stage of the child is critical. (Know human development)
7. Consider the entire “family.” (i.e. friends, neighbors and line staff)
8. Respect the culture and religion of the child and family.
9. Don’t censure pain with reassurance; respect the sense of loss.
10. Provide simple, honest explanations when asked.
11. Ask for help with your own pain. Don’t hide it don’t impose it.
12. Let the child and family contact you in the future. Consider calling or writing them.