



32nd Meeting of the International Work Group on Death, Dying & Bereavement

1 – 6 October 2023

**The Westin Nova Scotian
Halifax – Nova Scotia, Canada**



The International Work Group on Death, Dying & Bereavement

MISSION STATEMENT

The IWG, a non-profit organization, supports leaders in the field of death, dying and bereavement in their efforts to stimulate and enhance innovative ideas, research, and practice.

VISION STATEMENT

A world where dying, death, and bereavement are an open part of all cultures.

VALUES

The defining value required to qualify for membership in the IWG is a capacity for leadership in some aspect of the field of Death, Dying & Bereavement.

This may reflect leadership in the ideas and theories that guide us, leadership in the research that provides justification for these ideas and the practices that follow, innovation reflecting the application of these ideas, communication of the ideas to others, and/or organisation of services based upon them.

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Welcome from the Chair



Dear IWG colleagues and friends,

Welcome to Halifax, Nova Scotia for our 32nd IWG meeting.

It has been seventeen months since we last met at Losby Gods in Finstadjordet, Norway. During those months we have moved our financial accounts and legal documentation from Australia where our former secretary/treasurer, the incomparable Chris Hall resides, to Houston, Texas, the home of our current indefatigable secretary-treasurer, Jim Monahan. The multi-talented Amy Chow, former Chair of the Board of Directors has shared her many talents with Inge Corless, your current Board Chair, for which Inge is most grateful. The current Board of Directors includes Regina Szylit, Vice-Chair; Stephen Connor, Chair of the Fellowship Committee, Kathleen Gilbert, Darcy Harris, Donna Schuurman, Rana Limbo, Liaison to the Halifax Host Committee, and Andy Ho and Ruthmarijke Smeding, Membership Co-Chairs. Irene Renzenbrink serves as our Newsletter Editor. My profound appreciation to all of these IWG leaders.

I know that these esteemed leaders join me in expressing our appreciation to the Host Committee chaired by Mary Ellen Macdonald, with members Susan Cadell, Phil Carverhill, and Betty Davies, for their hard work in developing the next IWG meeting as well as

the pre-meeting conference.

Kudos to the members of the Board, our IWG News Editor, and the Host Committee for your commitment of time, energy, and creativity in these endeavors.

We are meeting at a time that we hope is characterized by the absence of COVID-19 restrictions. As the scientists we are, we also know that there are continuing cases of Covid in many parts of the world. Thus, when you received the protocol for maintaining everyone's health and well-being, know that it was developed given that most of us are travelling various distances during which we may inadvertently have contact with the few people who are infectious. Those guidelines sent to you in September was when we had a better idea as to the epidemiologic rates current at that time. Thank you for contributing to the safety of all of your colleagues at the IWG meeting by adhering to the guidelines.

And most of all, thank you for coming to Halifax 2023 where we will greet long-term friends and make new ones. And I know, I look forward to seeing each one of you.

Dr. Inge Corless
Chair - International Work Group on Death, Dying & Bereavement

Welcome from the Planning Committee

Pjila'si, Bienvenue, Welcome!

The 32nd Meeting of the International Work Group on Death, Dying, and Bereavement is about to begin in historic Halifax. Halifax is also known by the Mi'kmaw word, Kjiptuk, which means Great Harbour – the city has grown around one of the largest natural ports in the world. Kjiptuk is located in Mi'kma'ki, the ancestral and traditional lands of the Mi'kmaw Nation. In coming together in this place, we honour Mi'kmaw ancestors, peoples, and this land by acknowledging the Peace & Friendship Treaties that recognize that we are all treaty people.

Our Meeting venue is in the storied building where now sits The Westin Nova Scotian hotel. Built in 1928 by the Canadian National Railway, this hotel – originally The Nova Scotia Hotel – has housed royalty, dignitaries, and celebrities. This venue is centrally located in the south-end of the city, in a pedestrian-friendly tourist district, and alongside the Halifax Harbour where upwards of 200 cruise ships dock per year.

While you are in Nova Scotia, we hope that you can take some time to explore the province, fondly called Canada's Ocean Playground. Nova Scotia has 13,000 km of coastline along four major bodies of water and thus a wonderful fresh seafood-based cuisine. Tourism is a major industry in the province, with 'Bluenosers' warm and eager to share local lore and customs.

Our Meeting has been designed to showcase both old and new elements of the Canadian death and grief landscape. Our plenaries will include a panel discussion of Medical Assistance in Dying (MAiD), a medical practice legalized in 2016. Our panel will be especially attentive to locations of grief in and around this ever-evolving practice. Another plenary will focus on the emergence, out of the COVID-19 pandemic,

of an urgent national strategy for advancing grief support across our vast country. Our Farewell Dinner will take us back into the past, located in the Canadian Museum of Immigration at Pier 21. Nearly one million immigrants landed at Pier 21 from 1928 to 1971. Our Farewell evening will feature a special guest: Mr. Tareq Hadhad, the founder and CEO of Peace by Chocolate, was a refugee from the Syrian war, arriving in Nova Scotia in 2015. Since then – in barely 8 years – he has created a chocolate business that has put Nova Scotia on international maps, winning awards too long to list here. You will be able to buy Peace by Chocolate products on the Halifax Waterfront, see their artifacts in the Pier 21 museum, and hear Mr. Hadhad speak about his experience leaving his beloved Damascus and family behind.

In closing, we wish to express our deep gratitude to the local supporters of our Meeting and the Pre-Meeting Conference: Discover Halifax, J & W Murphy Foundation, QEII Foundation, Hospice Halifax, and Dalhousie University. We also wish to honour Mr. Jeffrey Turner from Discover Halifax, whose sudden death still rattles us. Jeffrey was the first Haligonian to jump on board our planning process. His enthusiasm, kindness, and acumen stood us in great stead prior to his recent retirement in July. He had even offered to attend our Meeting as a volunteer. His spirit will be with us!

We are excited to see you shortly for the IWG Halifax Meeting. We have put heart and soul into designing a Meeting that we hope will foster rich learning and deep engagement for all things death, dying, and bereavement.

Mary Ellen Macdonald, Susan Cadell, Phil Carverhill, and Betty Davies
Board Liaison: Rana Limbo

32nd Meeting Planning Committee.

An aerial photograph showing a rocky riverbank on the left, a narrow stream flowing through a lush green forest on the right, and a dense forest covering the right side of the image. The riverbank is composed of numerous grey and brown rocks of various sizes. The forest is a mix of green trees and shrubs, with some areas appearing more dense than others. The overall scene is a natural, undisturbed landscape.

IWG History

The International Work Group on Death, Dying, and Bereavement:

Early History, Recorded by John E. Fryer, M.D.

IWG grew out of an international convocation of workers in this field held at the Urban Life Center at Columbia, Maryland from November 14-19, 1974.

A few of the important events giving rise to the meeting included: Dr. Cicely Saunders's interest in care of the terminally ill starting in the 1940s culminating in the opening of St. Christopher's Hospice in 1967; Dr. Herman Feifel's 1956 symposium on death and dying at the American Psychological Association; Dr. John Hinton's work starting in 1958 that led to his book *Dying* (1966); Dr. Elisabeth Kübler-Ross's interviews with dying patients reported in *On Death and Dying* (1969) that resulted in great interest by the lay public; Dr. Colin Murray Parkes's interest in London widows and the publication of *Bereavement* (1972); a meeting in 1965 among Kübler-Ross,

Saunders, and Parkes; conferences organized by Dr. Robert Fulton in Minnesota (1967) and Dr. Robert Kastenbaum in Detroit (1969), and a pivotal meeting in Berkeley, California.

The 1974 International Convocation, bringing together hospice care, research, death education, and concern with death and dying, was organized and funded by Ars Moriendi, a Philadelphia based organization devoted to the study of the professional response to death, dying, and bereavement. Ars Moriendi was a sub-task force of the Health Care and Human Values Task Force founded by Ken Spilman in 1968. Ars Moriendi sponsored several teaching conferences and seminars and was the hub of much activity in the area of death, dying and bereavement in the Philadelphia area between 1972 and 1976.

A history of IWG Meetings

Meeting	Date	Location	Organiser(s)
I	Nov 14-19, 1974	Columbia, Maryland, USA	John Fryer
II	Jun 08-12, 1976	New Haven, Connecticut, USA	John Fryer
III	Jan 02-06, 1979	Asilomar, Monterey, California, USA	John Fryer
IV	Jun 21-25, 1979	Cantracon, Québec, Canada	Balfour Mount
V	Jan 02-06, 1981	Asilomar, Monterey, California, USA	John Fryer
VI	Jun 20-24, 1982	Rosenon, Dalara, Sweden	Loma Feigenberg
VII	Feb 24-26, 1984	Banff, Alberta, Canada	William Lamers
VIII	Aug 07-23, 1985	Wuhan, China, and Tokyo, Japan	Paul & Ida Martinson
IX	Jun 15-20, 1986	London, Ontario, Canada	John Morgan
X	Jun 15-18, 1987	London, England	Thelma Bates
XI	Jan 02-07, 1989	Asilomar, Monterey, California, USA	William Lamers
XII	Jun 14-19, 1990	Oslo, Norway	Ulla Qvarnstrom
XIII	Mar 15-20, 1992	Albufeira/Montechoro, Portugal	John Morgan
XIV	May 11-16, 1993	London, Ontario, Canada	John Morgan
XV	Jun 25-30, 1995	Oxford, England	John Morgan
XVI	Oct 29-Nov 04, 1996	Delphi, Greece	Danai Papadatou
XVII	Jul 19-24, 1998	Sydney, Australia	Michael Stevens
XVIII	Sep 25-30, 1999	Boulder, Colorado, USA	Marcia Latanzi-Licht
XIX	Jun 10-15, 2001	Maastricht, Netherlands	Herman van der Kloot Meijburg & Ruthmarijke Smeding

IWG History

Meeting	Date	Location	Organiser(s)
XX	Sep 24–30, 2002	Oslo/Bergen, Norway	Britt Hysing-Dahl
XXI	Mar 28–Apr 02, 2004	Tucson, Arizona, USA	Bob & Marcy Wrenn
XXII	Dec 04–09, 2005	Hong Kong, China	Cecilia Chan
XXIII	Jun 17–22, 2007	Sao Paulo, Brazil	Maria-Helena Franco
XXIV	Sep 21–26, 2008	Provincetown, Massachusetts, USA	Carol Wogrin
XXV	May 09–14, 2010	Bergisch Gladbach, Germany	Fritz Roth
XXVI	Oct 23–28, 2011	Melbourne, Australia	Christopher Hall
XXVII	Apr 28–May 03, 2013	Victoria, British Columbia, Canada	Betty Davies & Tom Attia
XXVIII	Feb 1–6, 2015	Taipei, Taiwan	Chun-Kai Fang
XXIX	November 6–11, 2016	Dunblane, Scotland	John Birrell
XXX	June 24–29, 2018	London, Ontario, Canada	Darcy Harris, Phil Carverhill, & Susan Cadell
XXXI	May 22–27, 2022	Finstadjordet - Oslo, Norway	Astrid Rønsen & Ruthmarijke Smeding
XXXII	October 1–6, 2023	Halifax, Nova Scotia (Canada)	Mary Ellen Macdonald, Susan Cadell, Phil Carverhill & Betty Davies

Handwritten mark: A large, stylized signature or mark, possibly "S.M.", is written in black ink over the bottom right corner of the meeting table.

IWG Board Chairs: 1974 – 2022 (elected at IWG meetings)

1974–1979	Dr. John Fryer (Columbia, USA; New Haven, USA; Asilomar, USA)
1979–1980	Dr. Michael A. Simpson (Asilomar, USA)
1980–1981	Mr. Henry Wald (Quebec, Canada; Asilomar, USA)
1981–1984	Dr. William Lamers, Jr. (Asilomar, USA; Rosenon, Sweden; Banff, Canada)
1984–1985	Dr. Jeanne Quint Benoliel (Banff, Canada; Wuhan, China & Tokyo, Japan)
1985–1989	Dr. Thelma Bates (Wuhan, China & Tokyo, Japan; London, Canada; London, UK; Asilomar, USA)
1989–1993	Dr. Charles Corr (Asilomar, USA; Oslo, Norway; Albufeira/Montechoro, Portugal; London, Canada)
1993–1995	Mr. David Adams (London, Canada; Oxford, UK)
1995–1998	Dr. Ken Doka (Oxford, UK; Delphi, Greece; Sydney, Australia)
1998–2002	Dr. Danai Papadatou (Sydney, Australia; Boulder, USA; Oslo/Bergen, Norway)
2002–2005	Dr. Robert Neimeyer (Oslo/Bergen, Norway; Tucson, USA; Hong Kong, China)
2005–2008	Dr. Betty Davies (Hong Kong, China; Sao Paulo, Brazil; Provincetown, USA)
2008–2010	Dr. Stephen Connor (Provincetown, USA; Bergisch Gladbach, Germany)
2010–2013	Mr. Christopher Hall (Bergisch Gladbach, Germany; Melbourne, Australia; Victoria, Canada)
2013–2016	Dr. Philip Carverhill (Victoria, Canada; Taipei, Taiwan; Dunblane, Scotland)
2016–2022	Dr. Amy Chow (Dunblane, Scotland; London, Canada; Oslo, Norway)
2022–2023	Dr. Inge Corless (Oslo, Norway; Halifax, Canada)

IWG History

IWG Secretariat: 1987

1986–1997	Dr. John Morgan (Canada)
1997–2005	Dr. Robert Bendiksen (USA)
2005–2006	Dr. Gerry Cox (Interim) (USA)
2006–2013	Dr. Stephen Fleming (Canada)
2013–2022	Mr. Christopher Hall (Australia)
2022–2023	Mr. Jim Monahan (USA)

IWG Board 2023

Chair	Dr. Inge Corless	Boston, USA	icorless@mgihp.edu
Vice-Chair	Dr. Regina Szylit	Sao Paulo, Brazil	rszylit@gmail.com
Secretary/ Treasurer	Mr. Jim Monahan	Houston, USA	j.monahan@outlook.com
Membership Co-Chair	Dr. Ruthmarijke Smeding	Switzerland	rmsm1@posteo.net
Membership Co-Chair	Dr. Andy Ho	Singapore, Singapore	andyho@gmail.com
	Dr. Stephen Connor	Fairfax Station, USA	sconnor@thewhpca.org
	Dr. Kathy Gilbert	Bloomington, USA	gilbertk@indiana.edu
	Dr. Darcy Harris	London, Canada	darcy.harris@uwo.ca
	Dr. Rana Limbo	La Crosse, USA	rklimbo1027@yahoo.com
	Dr. Donna Schuurman	Portland, USA	donna@dougy.org

Note: 2nd terms ending at the conclusion of the Halifax Meeting for Board Members Schuurman and Smeding; terms ending at the conclusion of the Halifax Meeting for Board Members Corless and Ho; and early departures for Board Members Connor and Szylit.

The Herman Feifel Award for Achievement in Thanatology

Statement of Purpose

The Feifel Award recognizes exceptional achievement in thanatology on the part of individuals (as opposed to organizations) who have made distinctive contributions to the field, usually of a longstanding nature.

Criteria for such recognition of merit encompass all forms of achievement in the field, whether clinical, organizational or scholarly, in keeping with the spirit of our organization.

Herman Feifel Award Recipients

2004	IWG Tucson, USA	Jeanne Quint Benoliel
2005	IWG Hong Kong, China	Florence Wald
2007	IWG Sao Paulo, Brazil	Robert Fulton
2008	IWG Provincetown, USA	Balfour Mount
2010	IWG Bergisch Gladbach, Germany	William Worden
2011	IWG Melbourne, Australia	William Lamers, Colin Murray Parkes
2013	IWG Victoria, Canada	Sandra Bertman, Phyllis Silverman
2015	IWG Taipei, Taiwan	Ida Martinson
2016	IWG Dunblane, Scotland	Charles Corr
2018	IWG London, Canada	Ken Doka, Mary Vachon
2022	IWG Finstadjordet, Norway	Danai Papadatou, Betty Davies

Program



Program

Saturday, September 30, 2023

09:00 – 17:00	Pre-Meeting Conference Grief Literacy: From Theory to Action Dalhousie University - Collaborative Health Education Building 5793 University Avenue, Halifax, NS
08:30	Dalhousie is a 20-minute walk uphill from the Westin hotel. It is a 4-minute car ride; you can request taxis at the front desk. Bus information is available. https://www.halifax.ca/transportation/halifax-transit
18:30 – 21:30	IWG Board Meeting, Private Dinner Meet in Lobby

Sunday, October 1, 2023

09:00 – 15:30	IWG Board Meeting Boardroom
14:00 – 17:00	Registration of participants In front of coat check
16:00 – 17:00	Orientation for Member Candidates and Invited Guests Chaired by IWG Board Maritime
16:00 – 17:00	Orientation for Accompanying Others Chaired by Irene Murphy Bedford
17:15 – 17:45	Opening Ceremony Land Acknowledgment - Susan Cadell William Brewer, Crier for Olde Town Halifax Welcome Video - Senator Wanda Thomas Bernard Welcome Message - Deputy Mayor Sam Austin Planning Committee Welcome - Mary Ellen Macdonald Atlantic Ballroom
18:00 – 20:00	Dinner Please note: all meals served buffet style outside the Atlantic Ballroom Atlantic Ballroom
20:00 – 21:30	Workgroup determination and allocation All IWG Members, Candidates, and Invited Guests to attend Atlantic Ballroom
21:30 - 23:00	Social time

Monday, October 2, 2023

06:30 – 08:30	Breakfast Atlantic Ballroom
07:00 – 08:00	Morning Meditation (Optional) Led by Mary Vachon The Elements
09:00 – 10:30	Work group session 1 (All participants attend their chosen group, locations to be assigned on-site)
10:30 – 11:00	Morning break and refreshments Atlantic Ballroom
11:00 – 12:30	Plenary 1 #GriefKind: Bringing grief literacy to the UK public Bianca Neumann Atlantic Ballroom. Refer to pages 26-27.
12:30 – 13:30	Lunch Atlantic Ballroom
14:00 – 15:30	Work group session 2
15:30 – 16:00	Afternoon refreshments Atlantic Ballroom
16:00 – 17:30	Work group session 3
17:45 – 18:15	A Time to Remember – An opportunity to remember IWG members who have died since we last met. Atlantic Ballroom
18:30 – 19:30	Dinner Atlantic Ballroom
19:30 – 21:00	Survey Findings and Member Discussion Facilitated by the IWG Board Atlantic Ballroom
21:00 – 23:00	Social time

Program

Tuesday, October 3, 2023

06:30 – 08:30	Breakfast Atlantic Ballroom
07:00 – 08:00	Morning Meditation (Optional) Led by Mary Vachon The Elements
09:00 – 10:30	Work group session 4
10:30 – 11:00	Morning break and refreshments Atlantic Ballroom
10:30 – 11:00	IWG Membership Candidates Meet with IWG Board Maritime
11:00 – 12:30	Plenary 2 Medical Assistance in Dying (MAID) in Canada: Panel Discussion about Innovations and Challenges. Panelists: Lori Weber, Andrea Warnick, Dr. David Kenneth Wright Moderator: Louisa Horne Atlantic Ballroom. Refer to pages 28-29.
12:30 – 13:30	Lunch Atlantic Ballroom
14:00 – 15:30	Work group session 5
15:30 – 16:00	Afternoon refreshments Atlantic Ballroom
16:00 – 17:30	Work group session 6
18:00 – 19:15	Dinner Atlantic Ballroom
19:15 – 20:45	Works in Progress (see pages 36-47 for detailed descriptions) Posters in Coat Check Area Room 1 Lunenburg Room 2 Maritime Room 3 Northumberland

Wednesday, October 4, 2023

06:30 – 08:30	Breakfast Atlantic Ballroom
07:30 – 08:45	IWG Board Meeting Boardroom
07:00 – 08:00	Morning Meditation (Optional) Led by Mary Vachon The Elements
09:00 – 10:30	Work group Session 7
10:30 – 11:00	Morning break and refreshments Atlantic Ballroom
11:00 – 12:30	Plenary 3 #MakeGriefAPriority: How the Canadian Grief Alliance is Advancing Grief Literacy in Canada Speakers: Shelly Cory, Paul Adams Atlantic Ballroom. Refer to pages 30-31.
12:30 – 13:30	Lunch Atlantic Ballroom
14:00 - 20:00	Afternoon excursions A. Cemetary tour Meet in Lobby B. Hospice tour Arranged taxis will arrive in front of hotel C. Boat tour J. Farwell Sailing Co. Inc., 1597 Lower Water St., Halifax (8 min walk or 3 min cab ride) D. Art Gallery tour Art Gallery of Nova Scotia, 1723 Hollis St., Halifax (15 min walk or 5 min cab ride) E. The Canadian Museum of Immigration at Pier 21 guided tour Meet at lower level back door of hotel Dinner on your own

Program

Thursday, October 5, 2023

06:30 – 08:30	Breakfast Atlantic Ballroom
07:00 – 08:00	Morning Meditation (Optional) Led by Mary Vachon The Elements
09:00 – 10:30	Work group session 8
11:00 – 11:30	Morning break and refreshments Atlantic Ballroom
11:00 – 12:30	Work group session 9
12:30 – 13:30	Lunch Atlantic Ballroom
13:30 – 14:00	Group photo Park across the street or mezzanine depending on the weather
14:00 – 15:30	Work group session 10
15:45 – 16:45	IWG Business Meeting Atlantic Ballroom
16:45 – 17:30	The Herman Feifel Award for Achievement in Thanatology Coffee ice cream Atlantic ballroom
17:30 – 18:00	Free time
18:00	The Samba Nova band will lead us on a Walk to the Farewell to Nova Scotia Dinner at The Canadian Museum of Immigration at Pier 21 Meet in lobby
18:15 - 19:30	Farewell to Nova Scotia Reception Pier 21
19:00 - 19:30	Halifax Newcomer Choir, Directed by Rachel Lutz Pier 21 Lobby
19:30 - 23:00	Farewell to Nova Scotia Dinner Pier 21 Keynote speaker, Mr. Tareq Hadhad, Founder and CEO, Peace by Chocolate Presentation of IWG Fellow pins and certificates

Friday, October 6, 2023

06:30 – 08:30	Breakfast Atlantic Ballroom
09:00 – 10:30	Work group session 11
10:30 – 11:00	Morning break and refreshments Atlantic Ballroom
	Final Plenary
11:00 – 13:00	Reports from workgroups Closing ceremony and adjournment of meeting Facilitated by IWG Board Atlantic Ballroom
13:00 – 14:00	Lunch Atlantic Ballroom (boxed lunch provided)

Plenary Presentations

Monday, October 2, 2023 | Plenary 1

#GriefKind:

Bringing grief literacy to the UK public



Speaker:
Bianca
Neumann

GriefKind is a campaign to promote grief literacy across the UK. This presentation will cover the history of this campaign, including its development, roll out, successes and challenges. The GriefKind campaign helped Sue Ryder (UK palliative care and bereavement charity) develop their service and product offers as they got more exposure in media and the public. This led to more feedback, more people wanting to use their services and that in turn brought more attention to the needs people have. The evidence has allowed them to grow the service offers, the organisation and the resources.

Bianca Neumann is Head of Bereavement at the Sue Ryder Palliative, Neurological and Bereavement Support organization in London, UK. She is an experienced psychologist and hypnotherapist, with a demonstrated history of working in the hospice, hospital, and healthcare industry. She is a member of the East of England's NHS Clinical Senate and National Bereavement Alliance special interest group, Bereavement Evaluation Forum. She has presented internationally on grief and loss service pathways and interventions. She has completed a WHO International Fellowship in Palliative Care and is now undertaking a PhD in palliative care.

Plenary Presentations

Tuesday, October 3, 2022 | Plenary 2

Medical Assistance in Dying (MAID) in Canada: Panel Discussion about Innovations and Challenges.



Panelists:
Lori Weber,
Andrea Warnick,
Dr. David Kenneth Wright

Moderator:
Louisa Horne

MAID was legalized in Canada in 2016. Since then, a number of modifications have already been made to the original legislation, and discussions continue on where it should go next. With this new end-of-life technology comes new ways of living, dying, and grieving. This plenary will be delivered by a panel of experts who have personal, clinical, and academic experience with MAID. Together they will cover: the history and current context of MAID in Canada; the social context in which patients and griever experience MAID and its aftermath; and how to talk to children and youth about MAID. It will also include a video about the Toronto facility, MAiDHouse.

Lori Weber is the author of eleven books for young readers, including 2023 Red Maple Award nominee, *The Ribbon Leaf*. She has an M.A. in English from Acadia University and a Diploma in Education from McGill University. A native Montrealer, Lori taught English and Creative Writing at John Abbott College in Sainte-Anne-de-Bellevue, Quebec, for 27 years, until retiring in 2020. Following her husband's death by MAID in 2022, she moved to Dartmouth, NS, where her daughter and son-in-law live. She continues to write and heal, hoping to share her experiences of MAID with others. Two examples of her writing that she will refer to in this talk are *The Last Soup* (<https://www.dyingwithdignity.ca/blog/the-last-soup/>) and *My MAID 'grief sisters' hold me up when no one else knows what to say* (<https://www.theglobeandmail.com/life/first-person/article-my-maid-grief-sisters-hold-me-up-when-no-one-else-knows-what-to-say/>)

In this panel, Lori will share her experiences going through the MAID process with Ron, her husband of 35 years. Grateful for the inclusion of Track Two in Bill C-7 in March 2021, Ron began the process to access MAID. The road was not smooth, but he obtained the provision in July 2022. MAID affects the whole family – before, during, and after. A grief support group organized by Bridge C-14 helped Lori cope throughout the process, and her 'grief sisters' continue to be a crucial part of her recovery today.



Andrea Warnick is a Registered Psychotherapist and Registered Nurse whose passion lies in helping individuals, families and communities support people of all ages who are grieving an illness or death in their lives. With years of nursing and counselling experience both in Canada and abroad, and a Masters degree in Thanatology, Andrea brings to her work a rare mixture of medical and psychosocial expertise. Andrea developed and teaches the 5 Day Certificate Program in Children's Grief and Bereavement at SickKids Centre for Community Mental Health. She was also the lead content developer for KidsGrief.ca and hosts a free monthly forum through Canadian Virtual Hospice, KidsGrief Q&A, where she responds to questions from families and professionals from anywhere in the world about supporting grieving children and youth. Andrea lives in Guelph Ontario, from where she runs Andrea Warnick Consulting, a group practice of over 35 therapists who provide grief therapy across Ontario and grief consultation and education internationally. In this panel, she will focus on supporting children when someone they care about is eligible for MAiD



David Kenneth Wright, PhD, RN, CHPCN(C) is a registered nurse, educator, and researcher. He is an Associate Professor at the University of Ottawa, and academic lead for Palliative Care and Nursing Ethics within its Centre for Research on Health and Nursing. In 2021 he co-founded the Canadian Palliative Care Nursing Association. In his clinical practice, he has cared for dying patients and their families, in both hospital and in residential hospice. He is passionate about the stories people tell about their lives, and how such stories strengthen our empathy for – and commitments to – one another. In this panel, he will speak about his MAID grief research.



Louisa Horne (moderator) – End-of-life Doula, Green Burial Specialist and Celebrant

Louisa is the founder of Halifax-based Epilog Transition Services, a Community Interest Company, meaning that 60% of excess profit is returned to the community. Epilog supports seniors in a variety of transitions – from downsizing and moving, to advance planning and end-of-life care, M.A.I.D. support, celebrant support and coordination of natural burial.

Louisa has completed training in advance planning and community death care and has earned an end-of-life doula certificate from Douglas College. She is also a Celebrant for funerals and celebrations of life and has studied Grief and Bereavement at AST – and she is passionate about green burial and was the first person in Canada to complete the Green Burial Practitioner certificate from the Green Burial Council. She is a successful entrepreneur and her career has included small business consulting, executive coaching, and serving as an educator and trainer. She is a lifelong learner, currently engaged in doctoral studies, and is an active community volunteer and regional leader within Rotary International. Louisa grew up just outside Halifax and currently lives near Sambro where she treasures walks with her three grandchildren and two spaniels.

Plenary Presentations

Wednesday, October 4, 2023 | Plenary 3

#MakeGriefAPriority: How the Canadian Grief Alliance is Advancing Grief Literacy in Canada



Speakers:
Shelly Cory,
Paul Adams

The volume and complexity of grief resulting from the COVID-19 pandemic was a wake-up call for many Canadians. This plenary will describe The Canadian Grief Alliance – a national coalition of over 160 leaders and organizations – which grew out of the pandemic. CGA has been lobbying the Government of Canada to bolster how grief services can meet the growing needs of our diverse populations. Have a look at <https://www.canadiangriefalliance.ca/> and come to this plenary to hear from Shelly Cory, the Executive Director of the Canadian Virtual Hospice who convened the CGA and Paul Adams, CGA co-chair. They will tell the story of CGA, and the challenges and important successes in how grief is being acknowledge and supported in Canada.

Shelly Cory is a social innovator in digital health, Executive Director of the Canadian Virtual Hospice (CVH) and she convened the Canadian Grief Alliance. Under her leadership, CVH has grown into the world's most comprehensive online resource on palliative care, loss and grief. She and her team have won 7 national and international awards for their innovation and teamwork, including a national innovation award for MyGrief.ca the first online psychosocial resource of its kind in the world for grief. A suite of online grief support tools for the bereaved and healthcare providers who support them has followed. In 2017, Digital Health Canada named Shelly one of the top 10 women leaders in digital health in the country. She is the recipient of the Queen's Jubilee Medal for her work in palliative care. She has co-authored chapters for the Oxford Textbook on Psycho-oncology and for Dr. Robert Neimeyer's recent book Techniques in Grief Therapy. She shares her whole home office and life with Paul, her son Aidan, and beasties Chase and The Bean.



Paul Adams is a former professor of journalism at Carleton University and a veteran of CBC and the Globe and Mail. He was the primary caregiver to his wife, Suzanne Szukits, a Canadian diplomat, who was diagnosed with breast cancer in 2012 at the age of 52. She died of the complications of metastatic breast cancer in September 2016. Since Suzanne's death, Adams has written about palliative care in publications such as The Walrus, The Ottawa Citizen, Policy Options and Healthy Debate. He has served as a family representative on numerous advisory bodies on palliative and end-of-life issues. He is currently co-chair of the Canadian Grief Alliance.

Thursday, October 5, 2023 | Plenary 4

Keynote Address



Speaker:
Tareq Hadhad

Tareq Hadhad is telling his story. He was a Syrian refugee and now living his new life with his entrepreneurial family in Canada's east coast. He is the founder and CEO of Peace by Chocolate, the recipient of the EY Entrepreneur of The Year 2021 for Atlantic, named one of the Top 25 Immigrants in The Maritimes, selected by Google as the National Hero Case, and was awarded RBC's top Immigrant Award and Entrepreneur of the Year in 2020 and Queen Elizabeth II's Platinum Jubilee Medal. All of this has happened since Tareq's arrival on Canada's East Coast in December 2015 as a Syrian-Canadian newcomer.

In 2012 the Hadhad's home and factory that housed the family chocolate-making business were destroyed which forced them to seek safety in other countries. A former medical student at Damascus University and long-time peacekeeping advocate, Tareq joined medical relief efforts after arriving in Lebanon. A new life began when Tareq and his family were welcomed to Canada on a community-based sponsorship.

Passionate about peace and entrepreneurship, his family relaunched the family business to recreate the chocolates they once exported across the Middle East and their story turned into an international inspiring phenomenon.

Tareq and his family have a focus on job creation, utilizing a network of local community members and refugees from across Nova Scotia and Canada to help support the local economy. Now that their chocolates are distributed across Canada, they look to offer more employment opportunities as their business grows.

In January 2020, Tareq received his official Canadian Citizenship which garnered international attention and has become one of the greatest accomplishments of his life. He has had the privilege to meet former President of the United States, Barack Obama, Canadian Prime Ministers, and has had conversations with many World Leaders. Author, Jon Tattrie wrote a book about the Hadhad's story which has become a best seller. A feature film, Peace by Chocolate, also based on the family's story premiered at the Tribeca Film Festival and launched in Cineplex theaters across Canada in the spring of 2022. The film won several film festivals awards and accolades.

Tareq has spoken at the Summit of The Americas, Amnesty International's Human Rights Conference, TEDx events, and Chambers of Commerce Dinners. He delivered keynote presentations in Jamaica, London England, Paris, and Copenhagen, spoke to several corporate and government organizations both in person and virtually, and has done over 500 interviews with different news teams across the globe. Tareq speaks on the compelling story of his family, the positive impact of newcomers, and the spirit of resiliency, entrepreneurship and giving back.

He was recently awarded Atlantic Business Magazine's 30 under 30 Innovators.

Works in Progress



Room 1: Lunenberg Facilitator: Rose Steele

Diagnosis Cancer – Creating my new Place in Life

An Onco-Art-Project

Dr. Sylvia BRATHUHN with Dr. Sabine ZWIERLEIN-ROCKENFELLER

Womens' Self-help Cancer Organization, Rhineland-palatinate/Saarland.

Background:

Hearing "You have cancer" changes everything in the life of women diagnosed with cancer. What was previously familiar and usual loses its holding force; the new and the unknown is alien and uncertainty shimmers through: "I lost my familiar place." Distressing questions result: "How can I find a new place in life?" "How will I now design my life?" "Who can help me?" In honor of our organization's 44th anniversary, our project enabled women with cancer to explore answers to these questions via an art project that facilitates expression of inner feelings when words fail.

Method:

Women (N=44) with cancer and their relatives (N=3) volunteered for this sponsor-supported creative-active (creative-active) 3-stage project. First, in an online workshop, women exchanged initial thoughts and delved deeper into the topic: "I've lost my place." Initial design ideas were collected. Second, women met in person in a former factory with industrial halls where participants received a wooden chair to paint and design as they wished. A wide range of materials and a variety of tools were available to design their chair (their new place). When finished, the women wrote a small text about their chair. In the final stage, the resulting works of onco-art were exhibited to the public in a festive atmosphere where discussion ensued about living with cancer.

Conclusions: It was clear that every woman went her own individual way. The chairs facilitated dialogue between the women themselves and with the public, simultaneously softening existing taboos about cancer. We plan to exhibit the chairs in clinics in Rhineland-Palatinate to stimulate increased attention among clinic staff.

During my presentation, I will show photos of the process and the designed chairs.

Experiences of Volunteers Supporting Dying People in Hospital: The ILIVE Project Volunteer Study

Anne GOOSSENSEN et al.*

University of Humanistic Studies, Netherlands

Background:

Volunteers have for some time been active in supporting people at the end of life (and their families) in the home situation, in hospices, and in inpatient elderly care in several countries. The use of volunteers in palliative care in an acute care hospital, was as yet, new. How this would be perceived by various stakeholders was unknown. One of the work packages of the EU-funded iLIVE project aimed to build a hospital volunteer service as a pilot in five countries: the Netherlands, Norway, Slovenia, Spain and the UK. Volunteers were selected, training took place, and volunteers became active in various departments caring for seriously ill and dying patients.

Purpose:

The overall aim of this study is to examine the perspectives of volunteers and health care professionals (HCP) towards a newly established hospital end-of-life care volunteer service, in five countries.

Methods:

We conducted 10 focus group interviews in each of the five countries, with separate groups for volunteers and HCP. Audio recordings were transcribed verbatim and processed with qualitative framework analysis. This method enables us to analyze the individual perspectives and experiences while staying in touch with the whole story as well as with the accounts of other respondents.

Conclusions:

Despite differences between countries in how the service was set up, both volunteers and HCP reported positive experiences with the volunteer service. In this presentation, we discuss expectations, experiences, and impact from perspectives of volunteers and HCP within the general analysis of the data from the five countries. We then focus on the Dutch context and describe the service, experienced barriers to the service, and areas for improvement.

Understanding the Impact and Reality of Covid-19 on Community-based End-of-life Care: A Study to Inform Care of Future Patients, Families, and Carers in an NHS Scotland Area

Catriona MACPHERSON | Fife Specialist Palliative Care, Fife, Scotland

Background:

Radical service changes within an NHS specialist palliative care service were implemented during the COVID-19 pandemic. One hospice unit was closed; 'service practitioners' were redeployed to provide intensive end-of-life care at home.

Purpose:

This practitioner-conducted study aimed to better understand the impact of COVID-19 on community-based end-of-life care provision, and patient and family lived experience in order to inform future policy directions and to enhance practice.

Methods:

In-depth interviews were conducted with 24 individuals from 20 families: 9 patients or their family carers living with advanced cancer and/or non-cancer illness in Fife, and 11 bereaved members or carers of patients who died during the COVID-19 pandemic. A narrative approach was adopted and training staff in research methods was integral.

Initial Findings:

Narratives highlighted the sense of the heavy burden, uncertainty, and emotional overwhelm in the context of negotiating a wide array of patient and family relationships with service practitioners. The day-to-day experiences of caring became increasingly taxing, as carers managed anticipatory grief in the context of their overwhelming fatigue, narrowing of their everyday life, and witnessing suffering. Equally, patients were engaged in emotional labour attempting to minimize their demands upon their caring relative. The question of 'who is the health worker?' is at the heart of the interaction between the experiences of both patients and carers and service practitioners. Consistent, predictable, and 'joined-up' services were key but at times a source of tension. The impact of COVID-19 included the lack of face-to-face encounters, fear of infection, and curtailment of access to wider family members depriving patients and carers (as well as family members) of much needed interaction.

* with Tamsin McGlinchey¹, Stephen R Mason¹, Ruthmarijke Smeding¹, Inmaculada Ruiz-Torreras³, Grether Skorpen Iversen⁴, Dagny Faksvåg Haugen^{4,5}, Miša Bakan⁶ and John E Ellershaw¹, Berivan Yildiz⁷, Claudia Fischer⁸, Judit Simon⁸, Agnes van der Heide⁷ on behalf of the iLIVE Consortium.

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Works in Progress

Room 2: Maritime Facilitator: Leslie Balmer

Impact of Funerals on the Grieving, Bereaved, and Society

Carl Becker | Kyoto University School of Medicine

Background:

Bereavement imposes financial as well as emotional costs on society because bereaved people produce less but depend on medical and social services more. Traditionally, funerals assuaged grief by giving it approval, ritual expression, and social support, yet little research examines how funerals affect bereavement's productivity costs or medical complications. Today, Japan has the oldest population in the world—meaning that a greater percent of Japanese die naturally every year, so a greater percentage of Japanese become bereaved.

Purpose:

We wanted to know what types of bereaved people were most likely to need what kinds of medical or social support, and how funerals or other rituals affect their grief.

Methods:

With support from the Japan Ministry of Education and Science and the All-Japan Funeral Co-operation®, our year-long national survey of thousands of recently

bereaved Japanese explored these issues.

Findings:

We found intriguing statistical correlations between grief and use of medical and social services. Our statistical correlations did not prove funeral satisfaction buffers grief, but rather that funeral dissatisfaction aggravates psychological and somatic symptoms of grief, producing greater reliance on public medical and pharmaceutical services—especially among middle-aged atheists and those abbreviating funerals. The research team hypothesized that people with low or declining incomes would find funerals more burdensome, but the people expressing greater dissatisfaction were those who abbreviated funerals—those who later showed more physical and psychological problems! Funeral directors are typically the first professionals to have quality time with the bereaved, freshly wounded by their loss of a loved one - their first impressions and interactions can strengthen or scar them for years thereafter. Our results confirm that funerals and rituals affect the bereavement trajectory and suggest what funerals do right and what might be improved.

Spirituality Definition Revisited

Tatsuya KONISHI | Musashino University

Background:

Regarding the definition of spirituality, the Consensus Project's definition is well-known and solid, but we need to continue to search for a more comprehensive definition for future revisions.

Purpose:

To examine the importance and expression of the idea of "self-transcendent process of searching, discovering, and realizing a new 'way of life,'" derived from Sheldrake's ideas about common usage of the word of "spirituality," and the following discussion of Secular Spirituality and Mystical Spirituality.

Method:

There are mainly two types of spirituality that are valid where "personalization of spirituality" is the mainstream: a) "Secular Spirituality," which does not assume the existence of the "Transcendent/Absolute," and b) "Mystical Spirituality," which is based on the direct relationship with the Transcendent/Absolute.

The self-transcendent process of searching, discovering, and realizing a new "way of life" of secular spirituality can be clarified by observing and examining care recipients' process of discovering 'way of life' in a difficult reality which chaplains frequently witness in their spiritual care practice from the perspective of a secular worldview.

Funeral Rituals in Uganda: The BaGanda People

Janet McCORD | Professor of Thanatology

Director: Master of Science in Thanatology, Edgewood College

Background:

There are over 3,000 ethnic groups in Sub-Saharan Africa. The largest ethnic group in Uganda are the BaGanda, comprising 16.7% of the population.

The BaGanda are distinctive in that they have retained the traditional art of making bark cloth, used traditionally for special occasions and as burial shrouds. Bark cloth making is traced to the 14th Century, a time when the use of bark cloth was limited to royalty – the Kabaka, or King, of the BaGanda and his family. Today, the use of bark cloth has been expanded and every Ganda can be shrouded in bark cloth. Bark cloth makers, many of them in their 10th generation, and allies are working to retain the art of bark cloth making through training youth in the craft, and planting mutuba trees from which the bark is harvested.

Purpose:

To offer insight into BaGanda cultural aspects of burial and mourning practices, specifically, the centrality of bark cloth

making and using, and burial customs that involve bark cloth, as well as insight into some of the cultural changes imposed by colonialists.

Methods:

In this presentation, I will 1) describe the process of making bark cloth and discuss its importance in BaGanda burial ceremonies; 2) describe the cultural customs among the BaGanda in the 21st Century regarding what happens after a person dies: burial, mourning, last funeral rites; and, 3) discuss the blending of traditions: BaGanda traditional approaches mixed with cultures brought by colonial presence, Christianity and Islam, and how these factors shifted both the production of bark cloth and how funerals are conducted.

The presentation includes short videos that demonstrate how a body is wrapped in bark cloth prior to burial.

Room 3: Northumberland Facilitator: Tom Attig

N.O.K-Next of Kin: Grief in the Aftermath of War

Inbal ABERGIL | Pace University, New York City

Background:

As visual artist and educator, my research focuses on the aftermath of war and the human cost of conflict, using still and moving images along with testimony to examine loss, grief, and healing.

My background has led me to this cross-cultural work. I am an immigrant to the US, a mother, and a veteran, where I served as a photographer. I am the daughter of displaced Moroccan Jewish parents; I grew up as an ethnic minority (Sephardic or Mizrahi) in Israel. My complex experience of culture and growing up in a country that always at war has led me toward an interest in witnessing the lived experiences and traumas that result from religious & ethnic conflict.

Purpose:

N.O.K: Next of Kin shows the effects of war on American Gold Star families. A two-volume monograph of this work (Daylight Publication) presents photographs & transcriptions of my interviews with 18 Gold Star families who lost loved ones in World War II, Vietnam, Afghanistan, and Iraq. I have met the mother of the most-deployed soldier in American history, who was killed in action in Iraq on his 14th tour of duty, and the wife of the first same-sex military spouse killed in combat. These interviews represent the authenticity and intimacy of mourning and indicate the enormous void at the center of survivors' lives.

Method:

Since 2014 I have traveled throughout the U.S. to meet Gold Star families and document the ways they cope with the loss of their loved ones by preserving their personal effects. Through photographs and testimonials, my work honors the dead and shares the voices of survivor's communities who keep memories alive as they strive to rebuild their lives in the aftermath of loss.

Conclusions:

Learning others' remote losses, a space for peace and healing can be possible.

Grieving the Loss of our Environment

Darcy HARRIS

Department of Thanatology, King's University College

Background:

Environmental grief, also known as ecological or climate grief, refers to the sense of loss that arises from awareness of the profound destruction and loss of ecosystems by natural and human-induced events. While individuals experience this sense of loss and grief individually, there are many layers of this grief that stem from political levels, such as through governmental policies/lack of policies and action/inaction. Thus, environmental grief is viewed as an extension of political grief.

Aim/findings, and implications:

This presentation will review the current literature on the construct of environmental grief, explore the impact of this type of grief on individuals, and discuss the larger implications of environmental loss and grief from a systemic/structural perspective.

Do Recruitment Strategies Impact Bereavement-related Data? Results from Investigating the Impact of Rituals on Grief Processes in Belgium

Emmanuelle ZECH | Research in Psychological Sciences, Univisty of Louvain (Belgium)

with Camille Boever, University of Louvain (Belgium), Jacques Cherblanc and Chantal Verson, Université du Québec à Chicoutimi (Canada)

Background:

The recruitment strategies that are used to collect bereavement data usually involve self-selected sampling methods or reaching out potential participants through bereavement support channels. As a consequence, most of the data collected in the field of bereavement are on middle-class non-minority women. This may lead many models of adjustment to bereavement as well as the results that are published about grief reactions and processes to be biased.

Purpose:

The aim of this study was to test two different recruitment methods and their impact on bereavement data collected. In this presentation, our goal is to present the two methods used as well as their impact on the characteristics of bereaved sample that can be reached and on the collected grief reactions and processes imposed by colonialists.

Methods:

Two recruitment strategies were used to collect data, i.e., with or without solicitation from the research team, on predictors (e.g., the performed rituals), mediators (e.g., coping strategies) of health outcomes (e.g., grief reactions, post-traumatic growth) reported by 549 bereaved people. Participants could answer using a paper or online version of the questionnaire 1-28 months after the death of a significant person and again a year later.

Results:

Significant differences were observed on the sample characteristics as well as on the results found, e.g., on the probable prevalence of prolonged grief disorder.

Conclusions:

The findings of this research project call for paying careful attention to and reporting of the precise research methods that are used to recruit bereaved participants because they lead to potential bias in the data collected and to the non-representativity of the bereaved in comparison to the general population as

Posters Coat Check area

Grief Counselling: Specialized Training in the Portuguese Context

Chrtina Felizardo | CIDTFF, Research Centre on Didactics and Technology in the Education of Trainers University of Aveiro, Department of Education and Psychology (Portugal)

With Paula Santos, Research Centre on Didactics and Technology in the Education of Trainers University of Aveiro, Department of Education and Psychology (Portugal) and Margarida Cerqueira, Research Centre for Health Services and Technologies, School of Health Sciences of the University of Aveiro, (Portugal)

Background:

Grief is a natural and universal phenomenon, as every human being will experience it. However, the bereaved one's response to the loss of a loved one is individual and subjective. So how do we support a bereaved person?

Purpose:

The research proposes to design a specialized training curriculum in Grief Counseling, adapted to the Portuguese context. Tasks will be carried out that allow: the characterization of Grief Counseling Training Curriculum in the international context; mapping the training needs of Portuguese professionals who intervene with the bereaved; and the critical analysis of both contexts for the design of a curriculum for Grief Counseling Training, in the Portuguese context.

Method:

The methodology adopted for this investigation is predominantly qualitative, with the Educational Design Research (EDR) method, as we aim at the dual purpose of solving a problem in a real context (the need to train professionals who work with grief processes); and

generating sustainable knowledge (the curriculum design). Techniques for data collection and analysis are inquiry and observation, combined with different instruments - interview, questionnaire, observer diary, and focus group.

Conclusions:

The research is in phase 3 of the project, which corresponds to the mapping of the training needs of Portuguese professionals. For this purpose, the seminar Grief Counseling in Portugal 2023 - SALP was held, with a call for abstracts addressed to professionals in the fields of education, psychology, health, and social work. The abstract should relate a professional experience of intervention with individuals, families, and/or communities in bereavement, the difficulties encountered, and the needs for better intervention. The abstracts will be collected in the SALP23 Abstracts Book for later content analysis and mapping of the training needs of these professionals. In the next phase, we propose to co-create a specialized training curriculum in bereavement counseling for the Portuguese context.

Empathetic Reflections by Themselves are Not Effective: Meta-analysis and Qualitative Synthesis

Dale Larson, Santa Clara University (with R.Elliott, University of Strathclyde (UK), A. Bohart, Santa Clara University (US), Peter Muntigi, University of Ghent (Belgium) & O. Smoliak, University of Guelph (Canada)

Background:

Therapist *empathic reflections*, used to communicate understanding of client communications/experiences. Originally associated with person-centered and experiential psychotherapies, they have been adopted by psychotherapists from a range of approaches. However, there is almost no research on the skillful or unskillful delivery of empathic reflections per se. have been adopted by psychotherapists from a range of approaches. However, almost no research exists on skillful/unskillful delivery of empathic reflections per se.

Purpose:

Our research question: What associations exist between presence or rate of empathic reflections and measures of their effectiveness?

Method:

We carried out an original meta-analysis of available research relating therapist empathic reflections to measures of their effectiveness. Beginning with definitions and subtypes of empathic reflection, we distinguish between the response mode empathic reflection, reviewed here, and the relational quality of empathy (reviewed in previous meta-analyses). We look at how empathic reflections are assessed, with an example of a successful empathic reflection, also providing a framework of criteria used to assess their effectiveness.

Results:

Meta-analysis revealed virtually no relation between empathic reflection and effectiveness, both overall and separately within-session, post-session, and post-treatment. Although not statistically significant, we found weak support for reflections of change talk and summary reflections. We argue for research looking more carefully at the quality of empathy sequences in which empathic reflections are ideally calibrated in response to empathic opportunities offered by clients and sensitively adjusted in response to client confirmation/disconfirmation. We conclude with training implications and recommend therapeutic practices.

Posters Coat Check area

The Experience in School after the Loss of a Parent: Children, Adolescents and Young Adults

Ronit Shalev (with Peleg Ora and Adar Efrat)

Max Stern Academic College of Emek Yezreel, Departments of School Counseling

Objectives:

The death of a parent during childhood is often a traumatic experience. The school environment can be a significant source of support for children and adolescents at such a time. However, there is evidence that teachers have difficulty providing appropriate support and helping these children who are at high risk for loneliness, depression, and low academic achievements. There is scarce research on the experience in school of children and adolescents from their own point of view. The current qualitative phenomenological-exploratory study looks to fill this gap by identifying and understanding the subjective experiences in school of children, adolescents, and young adults who have lost a parent during their time in school. The main research question was: What is/was their experience in school after the loss of their parent?

Methods:

The participants were 20 children and adolescents (aged

9–18) and 13 young adults (aged 21 – 32). Participants were interviewed via Zoom; interviews were recorded and transcribed verbatim. A phenomenological data analytic method was used.

Results:

Findings indicated the importance of the presence of at least one meaningful person (adult) in school. In addition, participants asked to receive considerate and sensitive responses to their unique needs but not to be pitied. Academically, about half of the participants experienced difficulties; socially, the main experience was one of feeling different than other students.

Conclusion:

It is recommended that school personnel be more informed about how to deal with loss among students and receive appropriate training to help them in the long term.

Using Ludic Strategies to Enhance Death Education for Children

Regina Szylit (with I.N. Silva, M.R. Dos Santos, L.T.P. Da Silva, F.M. Silva-Rodrigues, & V. Cimino)
University of Sao Paulo, Brazil.

Background:

Ludic strategies are intentional, calculated actions or plans, employed in games or playful contexts, that aim to achieve specific goals. They play a crucial role in children's learning by fostering their creative imagination and facilitating indirect learning. We found storytelling activities to be effective for initiating conversations about death and dying, engaging both adults and children.

Aim:

Our primary objective was to explore how the use of Ludic strategies can contribute to death education for children.

Methods:

We conducted interpretive qualitative research. Expert researchers in storytelling facilitated virtual workshops with children aged 7-10 years, using an illustrated card game adapted with death-related drawings. Following the game, children were encouraged to discuss their

emotions and thoughts surrounding death and dying as depicted in the story. Video and audio recordings of the virtual workshops were transcribed for thematic data analysis. Both verbal and non-verbal communication were included in analysis.

Results:

The study yielded three themes: (1) Capturing death visual representation: Portrayals of death in the media and arts effectively enable children to engage in conversations about death; (2) Learning through play: Children expressed their doubts, opinions, and emotions related to death, regardless of personal experiences; and (3) Intrapersonal and interpersonal dialogues: Virtual interactions among children allowed for sharing and expressing concepts and emotions related to death and dying situations, beyond verbal communication.

Conclusions:

Using Ludic strategies that enabled children to effectively communicate their perceptions about death, the study revealed that children's fantasies reflect their understanding of death and grief, thus facilitating comprehension of their feelings, behaviors, and symptoms associated with the bereavement process. Therefore, by embracing Ludic strategies, pediatric healthcare providers can more effectively engage in conversations with children about loss, death, dying, and bereavement, thus facilitating death education.

Posters Coat Check area

People “See” Dead People: Investigating How to Support After Death Communication Experiences In Healthcare

Mark Shelvock | Faculty of Health Sciences, Western University

Background:

People have anomalous experiences with the deceased, and the literature refers to these apparent sensory experiences as ‘after death communications’ (ADCs). Estimates of having an ADC range from 47% to 82% across numerous research studies; ADCs occur across all cultures, regardless of gender, socioeconomic status, ethnicity, sexual orientation, and religious affiliation. Interestingly, most ADC encounters are qualitatively described as being benign or therapeutic. However, within healthcare, clinicians are prone to pathologizing or disenfranchising ADCs, thereby creating psychologically unsafe clinical encounters that harm patients. ADC experiencers are often hesitant in sharing their experiences due to fear of ridicule, being perceived as mentally ill, and wanting to avoid negative personal implications.

Objective:

Develop evidence-based and anti-oppressive clinical recommendations to better support ADC experiencers across healthcare settings.

Study Design:

A multi-stage participatory co-designed research trial. The project will: (i) complete a comprehensive literature review of clinical recommendations of ADCs across health disciplines; (ii) facilitate public consultations around recommendations by surveying ADC experiencers and interdisciplinary healthcare clinicians; (iii) create case vignettes from public data and the literature as to test recommendations, then randomly divide clinicians into two groups to review these cases – one group educated on guidelines, another control group with no guidelines provided; (iv) survey to review/rate clinician responses by ADC experiencers.

Significance:

This research will empower clinicians to act in the best interests of their patients, as recommendations will be evidence-based and can impact policy across disciplines. Results have the potential to improve health outcomes of patients, foster greater trust in the health care system from the public particularly across diverse groups, and reduce psychological harms, experiences of oppression, in addition to therapeutic ruptures for patients.

List of Attendees

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Dan Shalev
Israel

Itay Shalev
Israel

Noem Shalev
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Didier Thevenard
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Svetlana Van Wielink
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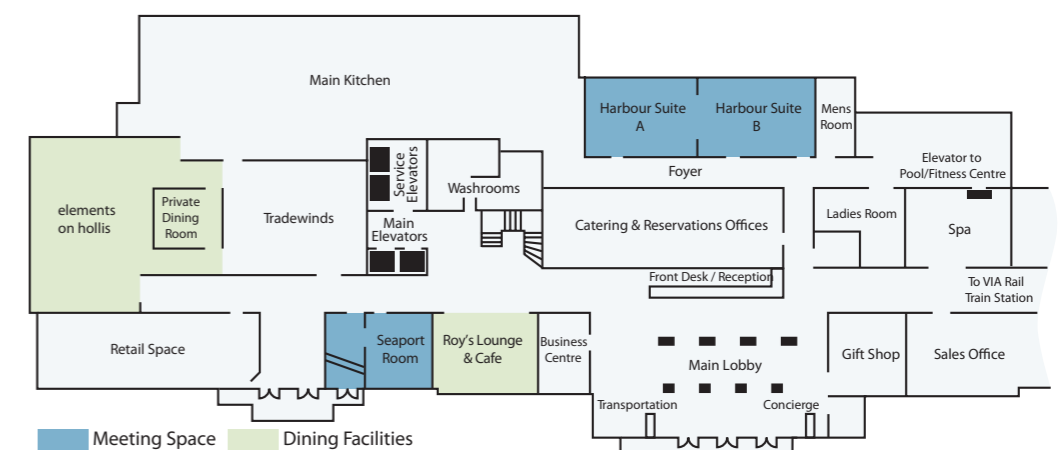
Gabriele Wittkowski
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Map

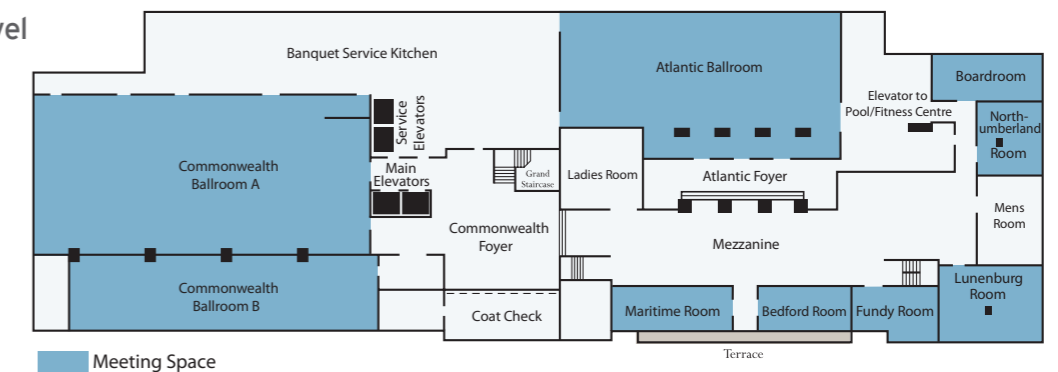
westin nova scotian property floorplans



lobby level
ground floor



conference level
first floor



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32nd Meeting of the International Work Group on Death, Dying & Bereavement

1 - 6 October 2023

**The Westin Nova Scotian
Halifax – Nova Scotia, Canada**