

Providing Mental Health Care with Funeral Service Professionals

A guide to helping funeral service professionals and other death care professionals with their mental health.

Funeral Professionals Peer Support







We have heard the call for help. We are here to answer the call.

We are a peer-led organization established in 2018 across Canada, after a tremendous response from our first group in Ottawa. We are elevating mental wellness worldwide as of 2021.

We have received tremendous support from the media, including CTV, CBC, Maclean's Magazine. People are talking about us. We want you to be a part of that talk.

We would like to change the way we look at mental health in our industry. We want it to be a positive experience for any individual requesting our help so we can keep good people in the industry.

OUR VALUES

Funeral Professionals Peer Support Group is committed to providing support, healing, education and knowledge to funeral professionals. Support is the key to recovery.

VISION

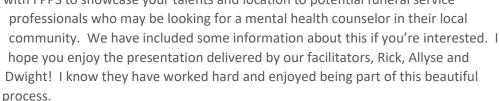
Funeral Professionals Peer Support Group promotes wholeness and wellness by uniting funeral industry professionals through a nationwide network of regional organizations offering support, information and resources within their community.

MISSION

Our Mission is to be the leader in providing resources for the wellness of funeral professionals; to share our personal experiences, educate and advocate; and to foster a network of peer support groups across the country.

WELCOME!

We are happy to have you with us today! Thank you for taking the time to come and be with us as we provide this free pilot training to mental health providers who have expressed an interest in working with funeral service and other allied death care professionals. FPPS is a not-for-profit service that is expanding its reach to include an ongoing dialogue not only with funeral directors and other funeral service professionals, but with those that provide mental health treatment. We hope this starts a significant and beautiful journey together. We want to point our service users to the right resources, but we feel those resources should know how to work with funeral directors. Because we are still an underrepresented demographic within the social research purview of impacts on mental health, not many mental health counsellors are prepared to understand the varied nuances of our profession. This to our knowledge, is the first attempt to make this connection – so we are happy you're here, because your part of history in the making. As a gift to your professional development (we hope anyway), we ask that you complete the feedback for our pilot training today. We also hope that you might consider partnering with FPPS to showcase your talents and location to potential funeral service



Michael Dixon, Executive Director, Funeral Professionals Peer Support.

Our facilitators:



Allyse R. Worland, CFSP in

Allyse is a licensed funeral director and embalmer in the states of Indiana and Kentucky. She was born and raised in Greensburg, Indiana and is proud to be a first-generation funeral service professional. She is dedicated to the enrichment of funeral service and to the presentation of continuing education requirements to her fellow funeral directors. Allyse holds a bachelor's degree in Funeral Service Management, is an Insight Certified Celebrant, and holds a certificate in Thanatology for End-of-Life Professionals. Allyse is a 2019 & 2021 Professional Women's Conference Scholarship

Recipient, has been featured in The Director Magazine, was previously selected by the NFDA to participate in the 2022-2023 National Emerging Leaders Program and was a part of the 2023 Meet The Mentors Program. Allyse is on several committees within funeral service, including The Membership Advisory Committee for CANA, The Scholarship Review Committee for The Funeral Service Foundation, the National Board Exam Committee, the Leadership Development Committee for NFDA, and a member of the NFDA Spokesperson Team. She is also the past Vice President and Past President of Marion County Funeral Directors Association. She is past Treasurer for Vermillion County Funeral Directors Association, as well as being their current President. Finally, she is a trustee with the board of the Academy of Professional Funeral Service Practice. Allyse presented at the 2023 NFDA National Convention & Expo in Las Vegas and travels to numerous funeral service events throughout the year. Her greatest joy is being a part of funeral service and devoting her time to contributing to the advancement of the profession. Allyse is a member of the management team with Funeral Professionals Peer Support.



Rick Bilcowski, CFSP in

Rick joined the Canadian College of Funeral Service in 2010, after graduating with honors in 2008 and earning his funeral director and embalmer's license in Manitoba. Before obtaining his license, he earned his Adult Education and Marketing Diploma and taught marketing at Assiniboine College. After becoming licensed, he managed Minnedosa Funeral Service. Rick's commitment to excellence is reflected in his CFSP designation and his role as Grief Recovery Specialist. Rick empowers students by teaching funeral service courses and plays a crucial role in developing online professional development courses.

Rick is a member of the Management Team with Funeral Professionals Peer Support.



Dwight EA Thompson, MSW RSW RMFT-S in

Dwight is a registered Social Worker in Ontario and Nova Scotia. He is also a registered Marriage and Family Therapist, with a specialization in clinical supervision for other marriage and family therapists. He mainly works in the areas of Trauma (PTSD), Loss and Attachment issues. He sees primarily individuals and couples as part of his practice. Dwight provides clinical supervision to health care professionals wanting to develop their competencies in working with couples and families. He facilitates the course Grief in Couple and Family Therapy through the University of Guelph's Advanced Certificate in

Couple and Family Therapy program. Dwight was formerly licensed as a Funeral Director in the provinces of Nova Scotia and Ontario. He currently oversees the Veteran's program with Ottawa Psychotherapy Services and is beginning to develop the mental health program at OPS for Funeral Service Professionals.

Our Presentation:

Our presentation today is really a dialogue between three professionals, two of whom are licensed Funeral Directors and Embalmers in Canada, and the US, and another who was formerly licensed but gravitated into the world of social work (largely influenced by his previous career as a Funeral Director). We are going to be talking about what funeral directors do, and how the stressors of the job are hidden behind the scenes the public may not see. Our profession has a history of being overlooked when it comes to our mental health. Today is the first step towards enabling our profession to be seen, heard and understood when it comes to the impacts of our work on our mental health.

Our presentation will be about 1.5 hours long. We will be around afterwards to answer questions or take any feedback, comments or concerns.

Acknowledgements:



Bereavement Authority of Ontario

The competencies and overview of what funeral directors do, was taken from the Bereavement Authority of Ontario's document entitled <u>"Funeral Sector Professional Competency Profiles – Second Edition!"</u> This document guides our conversation today.



Ottawa Psychotherapy Services

Excellence & Experience







Ottawa Psychotherapy Services is a team of skilled and experienced psychotherapists, marriage and family therapists, clinical supervisors, mentors, educators and trainers. OPS offers in person and virtual access to psychotherapy, which includes individual, couple and family therapy. OPS is developing a program specifically for death care professionals and funeral directors and embalmers. We currently provide virtual services across Canada. Ottawa Psychotherapy Services is hosting our event today, and we'd like to thank them for their continued support in the advancement of mental health with the funeral services profession. You can read more about OPS and keep up to date with our mental health program for FSP's here: Ottawa Psychotherapy Services

FSP: Funeral Services Professional

DCP: Death Care Professional

The Language of the FSP:

The funeral profession possesses a unique lexicon, a language forged in the delicate balance between clinical precision and compassionate care. For mental health professionals working with funeral directors, understanding this language is crucial for effective communication and empathy. Here are some common terms you may find helpful to know in advanced of meeting your FSP client.

Common Roles and Responsibilities of Funeral Directors and Staff:

The roles within a funeral home vary, but some common positions include:

- Funeral Director/Embalmer: Oversees all aspects of funeral arrangements, conducts embalming and restorative art, and provides grief support.
- **Funeral Service Assistants:** Assist with funeral services, transport remains and provide general support to the funeral director and bereaved families.
- Pre-Need Counselors: Guide individuals in pre-planning funeral arrangements.
- Administrative Staff: Handle paperwork, manage records, and provide customer service.
- Cremation Operators: people who run and manage a cremation or memorial service/facility. Usually,
 the focus of burial is on cremation.
- **Cemetery Staff:** Maintenance staff and/or cemetery counsellors who manage/coordinate the opening and closing of graves, niches or mausoleum spaces.
- Funeral and Memorial Celebrants: Most often a member of the funeral home staff, a celebrant is a
 person trained to conduct a funeral service becoming increasingly popular with those who have nor
 formal religious affiliations.
- Removal and Transfer Workers: The staff who respond to a death scene (could be the funeral director) to carefully transfer the deceased back to the funeral home. May also occur at the scene of a traumatic death. Many times, they work with the coroner's office, usually most of these calls are violent, accidental, self injury, suspicious or a health concern in some way.
- Death Doulas: A death doula, also known as an end-of-life doula or death midwife, provides holistic support to individuals and families during the dying process, much like a birth doula supports during childbirth. They offer emotional, physical, spiritual, and practical assistance to help individuals and

families navigate the complexities of end-of-life care, including planning, decision-making, and grief support. We are starting to see more of these professionals connected to the funeral home.

Professional Funeral Home Terms:

Decedent: A formal term for the deceased person. This term is frequently used in legal and administrative contexts.

(Human) Remains: A clinical term used to refer to the body of the deceased. Most FSP's do not use this term around families, they refer to the deceased as someone's "loved one!"

Disposition: The final placement of the deceased, whether through burial or cremation.

Embalming: The process of preserving a body by introducing chemical solutions to delay decomposition.

Visitation/Viewing: A time for family and friends to pay their respects to the deceased.

Funeral Service: A ceremony honoring the deceased, often involving religious or cultural rituals.

Cremation: The process of reducing a body to ashes through intense heat.

Inurnment: The placement of cremated remains in an urn.

Interment: The burial of the deceased in a grave.

Mausoleum: A building that houses crypts for entombment.

Columbarium: A structure with niches for inurnment of cremated remains.

Nuances and Language Around the Deceased:

The language used to describe the deceased carries significant weight. Funeral professionals strive to balance respect and clinical accuracy.

- Terms like "passed away" or "transitioned" are often used to soften the directness of "died."
- Referring to the deceased by their name is considered respectful and personal.
- When discussing the body, terms like "remains" or "the deceased" might be preferred, or some funeral directors use "loved one" ask your FSP client what terms they use so you can also mirror that same lexicon with them.

Language Around Grieving Family Members:

Sensitivity is paramount when communicating with grieving families.

- "Bereaved" is used to describe those who have experienced a loss.
- Funeral professionals use empathetic language, acknowledging the family's pain and offering support.
- Phrases like "I'm sorry for your loss" and "Please accept my condolences" are common expressions of sympathy.
- It is important to remember that people grieve differently, and that there is no correct way to grieve.

Restorative Procedures in the Embalming Room:

The embalming process involves specific procedures and terminology.

- Arterial embalming involves injecting embalming fluid into the arterial system.
- Cavity embalming addresses the internal organs.
- Casketing the deceased, is a way of saying "putting the body into the casket, and arranging the body for viewing or identification.
- Restorative art refers to the techniques used to restore a natural appearance to the deceased.
- It is important to understand that this room is often referred to as a preparation room, and not an
 operating room.

Cemetery and Crematory Operations:

Cemetery and crematory operations involve specific terminology related to burial and cremation.

- "Grave" refers to the excavated space for burial.
- "Crypt" refers to a space in a mausoleum.
- "Niche" refers to a space in a columbarium.
- "Cremains" is a term used to describe cremated remains.
- "Scattering" is the act of dispersing cremated remains.

The Importance of Understanding:

For mental health professionals, understanding this specialized language is essential for:

- Accurate communication with funeral service professionals.
- Developing empathy and rapport.
- Recognizing the potential for emotional distress associated with exposure to this language.
- Understanding the specific stressors that funeral service professionals face.

By familiarizing themselves with the language of death, mental health professionals can provide more effective and compassionate support to those who navigate this challenging field.

Slides





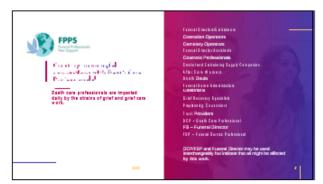




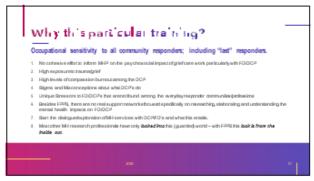












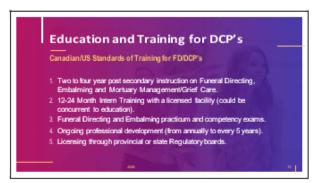














































Presentation Summary: Providing Mental Health Care with Funeral Service Professionals

Executive Summary:

This briefing document outlines the key themes and important ideas presented in our conversation today. This is a summary of the presentation by Funeral Professional Peer Support (FPPS) aimed at educating mental health professionals about the unique occupational stressors and mental health challenges faced by Death Care Professionals (DCPs), which includes Funeral Directors (FDs), Embalmers, Cremation Operators, and other related roles. The document emphasizes the high exposure to trauma and grief, the emotional labor involved, the lack of tailored support, and the need for mental health professionals to develop competency in understanding this profession to provide effective care.

Main Themes and Important Ideas:

1. The Nature and Scope of the Death Care Profession (DCP):

- Broad Definition: The term DCP encompasses a wide range of professionals involved in the death and
 dying process, including Funeral Directors, Embalmers, Cremation Operators, Cemetery Operators,
 Funeral Director Assistants, Cosmetic Professionals, Casket and Embalming Supply Companies, After
 Care Workers, Death Doulas, Funeral Home Administrators, Celebrants, Grief Recovery Specialists,
 Preplanning Counselors, and Trust Providers. The document clarifies that "DCP and Funeral Director may
 be used interchangeably but indicate that all might be affected by this work."
- Daily Exposure to Grief and Grief Care: DCPs are "impacted daily by the strains of grief and grief care
 work." This constant exposure to bereaved individuals and the details surrounding death forms the core
 of their occupational experience.
- **24/7 Availability:** Funeral homes and most death care facilities operate on a "24-7" basis, contributing to the potential for constant stress and lack of personal time for many DCPs.
- Regulatory Requirements: The profession involves significant regulatory oversight through provincial, state, and federal licensing, accreditation, and professional oversight bodies (e.g., Bereavement Authority of Ontario BAO).
- Required Education and Training: Becoming a DCP involves a rigorous process including "Two to four year post secondary instruction on Funeral Directing, Embalming and Mortuary Management/Grief Care," followed by a "12-24 Month Intern Training," practical exams, ongoing professional development, and licensing.

2. The Unique Stressors and Occupational Hazards Faced by DCPs:

- High Exposure to Trauma and Grief: The presentation highlights the "High exposure to trauma/grief" as
 a significant factor impacting DCPs' mental health. This includes exposure to "Violent Deaths,"
 "Decomposition," and "Child Deaths." They also experience "Witnessing Grief" firsthand.
- Emotional Labor and Occupational Grief Injuries: The work involves significant "Emotional Labor: The Cost of Grief Work." DCPs are constantly engaged in providing emotional support to grieving families, which can lead to "occupational grief injuries."

- Compassion Fatigue and Secondary Traumatic Stress: The summary mentions "High levels of compassion burnout among the DCP" and lists "Post Traumatic Stress Disorder," "Compassion Fatigue/Secondary Stress Disorder," "Burnout," "Depression," "Anxiety," "Substance Use Disorder," "Vicarious Traumatization," "Sleep Disorders," "Acute Stress Disorder," and "Adjustment Disorders" as "Specific Mental Health Issues for the DC Professional."
- Unique Stressors Beyond Everyday Responders: The document emphasizes that FD/DCPs face "Unique Stressors...that are not found among the everyday responder communities/professions."
- **Stigma and Misconceptions:** There are "Stigma and Misconceptions about what DCP's do," which can lead to social isolation and a lack of understanding from those outside the profession.
- Professional Dilemmas: DCPs often face "Professional Dilemmas (balancing the wishes of the family, such as restorative procedures, versus the actual limits of the embalming process)."
- Physical Demands and Exposure: The profession involves "Physical Demands: Lifting and exposure to chemicals (formaldehyde) and other treatment compounds." The outline also notes that DCPs may be "Ignoring Health Checks."
- Constant "On Call" Mentality: The nature of the work often leads to a constant state of being "On Call," blurring the lines between professional and personal life.
- Maintaining a Professional Persona: DCPs are expected to consistently maintain a professional demeanor, even in the face of intense emotional situations, which can be emotionally taxing.
- Social Isolation and Community Scrutiny: The profession can lead to "Social Isolation" and exposure to "Community Scrutiny."

3. The Role of FPPS and the Need for Mental Health Professionals' Understanding:

- Lack of Cohesive Support: The document points out that there is "No cohesive effort to inform MHP on the psychosocial impact of grief care work particularly with FD/DCP." It also states that "Besides FPPS, there are no real support networks focused specifically on researching, elaborating and understanding the mental health impacts on FD/DCP."
- **Inside-Out Perspective:** FPPS offers an "inside out" perspective on the mental health challenges of DCPs, contrasting with external research.
- **Objective of the Training:** The training aims to:
- Increase "Awareness of the role and competencies expected of the DCP."
- Give "mental health professionals professional competency when it comes to working with DCP."
- Provide "Knowledge expansion on the depth of professional responsibilities expected of the DCP."
- Explore "Various ways of understanding how this type of emotional labour occupational grief injuries affect the DCP."
- Starting the Dialogue: The training seeks to "Start the dialogue/exploration of MH services with DCP/FD's and what this entails."

• Occupational Sensitivity: The initiative emphasizes "Occupational sensitivity to all community responders; including 'last' responders."

4. Challenges for New Professionals:

- **Steep Learning Curve:** New hires face a "steep learning curve" as the "realities of what the job demands widen with what the educational preparation provides."
- Lack of Emotional Support and Encouragement of Detachment: New professionals often "are not met with emotional support, but instead actively encouraged to detach from their emotional responses to death and its impacts among the bereaved."
- **Feeling Unsupported:** "Most new hires report feeling unsupported with these normal responses to challenging situations."
- **Organizational Culture:** "Organizational culture encourages emotional avoidance with grieving family members/systems."
- High Demands: New professionals "struggle with very high demands in this profession."

5. Core Competencies of Funeral Professionals (as outlined by the BAO):

The document lists the core competencies, providing insight into the multifaceted responsibilities of DCPs:

- Communication and Responsiveness: This includes conducting arrangement conferences with sensitivity, assessing emotional needs, providing information about disposition options, and managing financial and contractual obligations.
- Care of the Deceased: This involves respectfully and safely handling the deceased, ensuring their security, arranging transfers, verifying preparation instructions (including embalming), and completing restoration processes.
- Disposition, Funeral Services, and Visitation: This includes finalizing arrangements, preparing the
 environment for identification and services, organizing processions, directing services with sensitivity,
 and coordinating all disposition details.
- Business Practices: This encompasses supporting business operations, sound management, customer service, financial record keeping, using technology, maintaining facilities, teamwork, and personnel management.
- **Professionalism:** This includes implementing professional abilities, engaging in ongoing development, and actively pursuing personal physical, emotional, and mental health and work-life balance.

Key Quotes:

- "Death care professionals are impacted daily by the strains of grief and grief care work."
- "High exposure to trauma/grief" is a significant stressor for DCPs.
- "High levels of compassion burnout among the DCP."
- "Stigma and Misconceptions about what DCP's do" contribute to their challenges.

- "Unique Stressors to FD/DCP's that are not found among the everyday responder communities/professions."
- "Besides FPPS, there are no real support networks focused specifically on researching, elaborating and understanding the mental health impacts on FD/DCP."
- "Occupational sensitivity to all community responders; including 'last' responders."
- New hires are often "actively encouraged to detach from their emotional responses to death."
- "Organizational culture encourages emotional avoidance with grieving family members/systems."

Implications for Mental Health Professionals:

This outline underscores the critical need for mental health professionals to:

- Develop a deeper understanding of the daily realities, responsibilities, and unique stressors faced by Death Care Professionals.
- Recognize the potential for occupational grief injuries, compassion fatigue, burnout, and other mental health challenges within this population.
- Be aware of the lack of tailored support systems for DCPs beyond initiatives like FPPS.
- Approach DCP clients with sensitivity to the specific demands and cultural norms of their profession.
- Consider incorporating information about the death care profession into their professional development to enhance their competency in serving this often-overlooked group.

By understanding the "inside out" perspective of DCPs, mental health professionals can provide more effective and relevant support to those who consistently care for individuals and families during times of profound loss.

Psychosocial Research with Funeral Directors/Mortuary Workers

The following is a list of the most recent research done within the last 5-20 years regarding the mental health of funeral directors/mortuary workers across Canada, the United States and Europe. As you can see there is a dearth of information regarding the psychosocial impacts of mental health on funeral service professionals. Other issues that impact the research findings:

- ▶ The findings are complicated by lack of generalizability and small sample sizes.
- A failure to recognize how the culture of certain demographics of mortuary workers impacts their resilience on mental health.
- ► The lack of wider impacts on the relationships both within and outside the funeral home or other death care facility.
- ► The lack of involvement of funeral service professionals in the research process.
- ► The lack of mixed methods; combining qualitative and quantitative approaches to research with funeral directors.

If we want to grow our ability to impact change in the mental health sector with FSP's, a collaboration with social research is highly encouraged. Without properly vetted evidence, and well anchored research, a part of the puzzle to mental health with FSP's is missing.

This research/literature review is still ongoing. For now, here is a list of all the articles I could find, that includes searching through academic databases for peer reviewed, available online articles. Databases included:

ProQuest

Scholars Portal

EBSCO Academic Premier

Literature Review Results:

1995	Kroshus, J., & Swarthout, D. (1995). Critical incident stress among funeral directors: Identifying factors relevant for mental health. <i>Journal of Mental Health Counseling</i> , 17(4), 441		
2001	Goldenhar, L. M., Gershon, R., Mueller, C., Karkashian, C., & Swanson, N. G. (2001). Psychosocial work stress in female funeral service practitioners. <i>Equal Opportunities International</i> , 20(1), 17-38		
2007	Brysiewicz, P. (2007). The lived experience of working in a mortuary in KwaZulu-Natal. <i>Accident and Emergency Nursing</i> , 15(2), 88–93. https://doi.org/10.1016/j.aaen.2007.03.001		
2009	Harrawood, L. K., White, L. J., & Benshoff, J. J. (2009). Death anxiety in a national sample of United States funeral directors and its relationship with death exposure, age, and sex. <i>Omega: Journal of Death and Dying</i> , 58(2), 129-146. doi: 10.2190/OM.58.2.c		
2009	Ward, D. (2009, March 17). Life among the dead. Vancouver Sun		
2010	Bailey, T. (2010). When commerce meets care: Emotion management in UK funeral directing. <i>Mortality</i> , 15(3), 205–222. https://doi.org/10.1080/13576275.2010.496613		
2013	Caswell, G. (2013). A family affair: Managing death in the twenty-first century. In M. Walter, T. Sofios, & C.ώςκς (Eds.), <i>The management of death in late modernity</i> (pp. 213-234). Open University Press.		
2014	Flynn, B. W., McCarroll, J. E., & Biggs, Q. M. (2014). Stress and Resilience in Military Mortuary Workers: Care of the Dead From Battlefield to Home. <i>Death Studies</i> , <i>39</i> (10), 607-615		
2014	Thieleman, K., & Cacciatore, J. (2014). Witness to suffering: Mindfulness and compassion fatigue among traumatic bereavement volunteers and professionals. <i>Social Work</i> , 59(1), 34-41		
2014	Thieleman, K., & Cacciatore, J. (2014). Witness to Suffering: Mindfulness and Compassion Satisfaction among Traumatic Bereavement Volunteers and Professionals. <i>Social Work</i> , <i>59</i> (1), 34–41.		
2016	Chism, S. (2016). Compassion Fatigue in Funeral Directors [Master's thesis, Dublin Business School]		
2016	Hayes, J. (2016). <i>Taking the Burdens: The Strategic Role of the American Funeral Director</i> [Unpublished manuscript]. Massachusetts Institute of Technology.		
2019	Aoun, S. M., Lowe, J., Christian, K. M., & Rumbold, B. (2019). Is there a role for the funeral service provider in bereavement support within the context of compassionate communities? <i>Death Studies</i> , 43(10), 619–628. https://doi.org/10.1080/07481187.2018.1506835		
2019	Bailey, M. E. (2019). How funeral directors experience burn-out: A phenomenological study [Doctoral dissertation, Grand Canyon University]. ProQuest.		
2019	Colombo, L., Emanuel, F., & Zito, M. (2019). Secondary Traumatic Stress: Relationship With Symptoms, Exhaustion, and Emotions Among Cemetery Workers. <i>Frontiers in Psychology</i> , <i>10</i> , 633.		
2019	Cotrim, T., Gomes, J. R., poвку, M. B., & Dias, A. (2019). How socio-demographic and psychosocial factors are related to work ability among cemetery workers. <i>Work</i> , <i>63</i> (1), 115–120. https://doi.org/10.3233/WOR-192910		
2019	McClanahan, J. (2019). Posttraumatic stress among mortuary workers: Prevalence, risk, and resilience (Master's thesis, Harvard Extension School). Retrieved from https://nrs.harvard.edu/URN-3:HUL.INSTREPOS:37365094 on March 28, 2025.		
2019	Rumbold, B., Lowe, J., & Aoun, S. M. (2019). Funerals, memorials and bereavement care. Bereavement Care, 38(2-3), 62–67. https://doi.org/10.1080/02682621.2019.1681637		
2019	Ryan, M. (2019). <i>Dying Professions: Exploring Emotion Management among Doctors and Funeral Directors</i> . The Journal for Undergraduate Ethnography, Volume 9, Issue 1, Dalhousie University		
2020	Cegelka, D., Wagner-Greene, V. R., & Newquist, J. (2020). Health Behaviors of Funeral Directors in the US: A Needs Assessment. <i>American Journal of Health Behavior</i> , 44(6), 864-875. doi:10.5993/AJHB.44.6.10 on March 28, 2025		

2020	Charles (2000) The Mark of the Francisco Charles Specific Alberta (2000)	
2020	Cho, C. J. (2020). The Work of the Funeral Director: Emotional Labor, Family and Friends (Master's	
	thesis). University of Central Oklahoma, Edmond, Oklahoma	
2021	Bi, D., & Hammonds, K. A. (2021). Listening to Funeral Directors in Rural Oklahoma Funeral Homes:	
	Social Construction of Roles, Goals, and Strategies. Southern Communication Journal, 86(4), 375—	
	386. https://doi.org/10.1080/1041794X.2021.1941222	
2021	Guidetti, G., Grandi, A., Converso, D., Bosco, N., Fantinelli, S., Zito, M., & Colombo, L. (2021).	
	Funeral and Mortuary Operators: The Role of Stigma, Incivility, Work Meaningfulness and Work-	
	Family Relation to Explain Occupational Burnout. International Journal of Environmental Research	
	and Public Health, 18(13), 6691. https://doi.org/10.3390/ijerph18136691	
2021	ProQuest. (2021, November 7). Funeral director worries about bereaved. Canadian Newsstream	
2021	Van den Eynde, M., Van Laeken, D., Vandenhoeck, A., Beirens, K., & Van Roosbroeck, S. (2021).	
	Funeral directors during and after the first wave of COVID-19: a cross-sectional study on well-	
	being. Journal of Public Health, 43(3), 530-537.	
2022	Guidetti, G., Grandi, A., Converso, D., & Colombo, L. (2022). Exposure to Death and Bereavement:	
	An Analysis of the Occupational and Psychological Wellbeing of Funeral and Mortuary Operators.	
	OMEGA—Journal of Death and Dying, 0(0), 1–15. https://doi.org/10.1177/00302228221130611	
2022	Hanna, J. R., McCaughan, E., & Semple, C. J. (2022). Immediate bereavement experiences when a	
	parent of dependent children has died of cancer: Funeral directors' perspectives. Death Studies,	
	46(4), 969–978. https://doi.org/10.1080/07481187.2020.1793433	
2023	Curtis, K. A., Dagnall, N., Drinkwater, K., & Denovan, A. (2023). Facing Death Anxiety: Effects of	
	Professional Exposure in the Funeral Industry. OMEGA - Journal of Death and Dying, 88(1), 119-	
	139.	
2023	Grandi, A., Rizzo, M., & Colombo, L. (2023). Secondary traumatic stress and work ability in death	
	care workers: The moderating role of vicarious posttraumatic growth. PLoS ONE, 18(7), e0289180	
2025	Braun, J., Novik, N., & Apesland, A. (2025). Canadian Funeral Professionals' Experiences Working	
	with Medical Assistance in Dying (MAID). Journal of Loss and Trauma. Advance online publication.	
	https://doi.org/10.1080/15325024.2025.2459779	
2025	Ng'ang'a, Petite Mukami, Vincent Musungu, and Felix Mutua. 2025. "Mental Health Challenges	
	and Coping Mechanisms Among Mortuary Workers in Murang'a County, Kenya". Asian Journal of	
	Advanced Research and Reports 19 (4):206-12. https://doi.org/10.9734/ajarr/2025/v19i4975	
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Assessment Notes: Helpful things to consider when conducting an assessment with the FSP/DCP.

By Dwight EA Thompson MSW RSW RMFT-S

Dwight is able to provide further training and clinical consultation in the areas of working with individuals and families who are psychosocially impacted through the work as funeral services professionals. Dwight is currently writing a more detailed publication on mental health assessment and treatment for funeral service professionals. This excerpt is from his developing material. If you would like further information or clinical support regarding mental health care for funeral service professionals, please contact him at dwight@ottawapsychotherapyservices.ca

The foundation of effective therapy lies in establishing a strong therapeutic alliance built on trust and mutual understanding. For mental health professionals working with funeral service professionals, this process requires particular sensitivity and awareness. Here are some helpful ways to guide your assessment process with funeral service professionals. The therapeutic journey with a funeral service professional begins with the delicate art of assessment, a process far more nuanced than simply administering an intake interview or a standardized measurement. This requires a shift from routine clinical interviews to a contextual exploration, delving into the intricacies of their daily lives.

Therefore, a good assessment with funeral service professionals must ask about on-call schedules, exposure to traumatic grief, the emotional labor of comforting bereaved families, and the existential weight of constant confrontation with death, dying and grief work with bereaved individuals, families and communities. With the funeral home employee, we talk about the pace and stress of work life, being especially cognizant of their context, if they work in a rural funeral home or an urban funeral home or other death care facility. Mental health professionals are encouraged to learn about the profession from credible sources of information, and not just a Hollywood or popular social media based interpretation designed to go "viral" of the profession. Historically, FSP's have been criticized for taking advantage of the bereaved through consumer practices that target vulnerable grieving family members. The impact of this experience has collectively influenced a private code of conduct and manner when with the public. These could also influence how they (the FSP) shows up in therapy.

General issues to be aware of when working with the FSP:

Your questions will have to reflect the right context of their working environment and location. For example, a worker in the city funeral home, may have more adequate access to mental health supports, less challenges with being on call or doing removals at night. Funeral homes in the city tend to see a lot more traumatic death

scenes, rural operators tend to see a lot of car accidents but the chances of being related or connected to the individual involved is greater. A funeral service employee in rural parts, may be doing all of the aspects of the funeral home, including working in a 24-7 environment. Many funeral directors have different gendered and diverse backgrounds, such as being Jewish, African American, Female, part of the LGBTQ community and so forth. Your assessment should be culturally and socially sensitive to their backgrounds, and you should expect that their approach to working in the funeral services profession may reflect that cultural influence, including their personal experiences with death and dying.

Most, if not all funeral professionals have one family or death call, they can remember well. You can ask, "Is there a particular family or removal, or call that left an impact on you? If so, can you share that with me?" I believe this is an important question, as its likely a great starting place to examine how the FSP deals with the emotional impact of their job. Consider integrating that question into your assessment, this can be a helpful place to start assessing how their work impacts them. Perhaps in some ways, when you invite them to talk about their work experience and how they feel so connected to it, you will show a strong understanding in the "purpose of the calling" behind their choice to go into this specific career. This can powerfully set the stage for rapport, helping them understand that they are impacted by the work they do. Being a part of this profession demands a lot of emotional availability, and it is hard to do this work without being impacted by it at least some of the time.

In a recent survey conducted by Funeral Professionals Peer Support (that is still in progress) with over 80 funeral service professionals from around the world, 90% of our respondents to date, have informed us that their closest intimate and family relationships were impacted by the work they do. Your assessment should not miss following up on how the FSP's social support system might be impacted by the expectations of the organization or funeral home, cemetery or other death care facility they work within. There could be an important role for couple and/or family therapy with your client in that regard. Couple intimacy may be impacted by the prioritizing of grief labour by the FSP. Often issues related to the work and nature of the funeral home, perhaps more so with smaller rural funeral homes, is the time that is absorbed by the demands of grief labor. These issues may be felt as detachment, seen or experienced as increasing arguments or even emotional and physical affairs in an attempt to create some emotional contact with the work focused partner. An affair in this context might be a partner's best way to adapt and send a message to the absent partner about their emotional needs.

Standardized assessments, while useful, must be seen as supplementary tools, not replacements for open-ended inquiries that allow for the unfolding of their lived experience. We might ask, "Can you walk me through a typical week?" or "What are the most emotionally draining aspects of your work?" or "How do you perceive the impact of your profession on your personal life?" These questions invite stories, not just data points, and allow

for a deeper understanding of the individual behind the professional role. When your exploratory questions are specific to the nuances of the working FSP; you will foster a greater rapport with your FSP client.

The communication styles of funeral service professionals often reflect the demands of their work. They may present as stoic, having learned to compartmentalize emotions to navigate intense situations. They might prioritize practical solutions, a reflection of the logistical demands of their profession. They could also be charming and engaging, being professional and easy to talk to. You may think, there are "no" problems here. However, in my experience, articulate funeral directors have moments where they feel distress in the funeral home. Being knowledgeable about what the funeral director does will help you know what to look for when assessing the impact of their work on their mental health. Directness and efficiency in communication may be preferred, as time is often a critical factor in their daily routines. Recognizing these nuances is crucial for building rapport. We must adapt our therapeutic approach, balancing empathy with clarity, respecting their emotional reserve while creating space for vulnerability. Avoidance of jargon and clinical language is advised, favoring instead a conversational tone that acknowledges the gravity of their experiences without adding to their emotional burden.

Creating a safe and non-judgmental therapeutic environment is the cornerstone of trust. For funeral service professionals, who often bear witness to the rawest forms of grief and trauma, this space must be a sanctuary. Validation is paramount. We must acknowledge the unique stressors they face, the secondary trauma, the compassion fatigue, and the existential strain. We might say, "It's understandable that you feel overwhelmed, given the nature of your work," or "Your experiences are valid, and it's okay to acknowledge the emotional toll." Empathy must be genuine, reflecting a deep understanding of their world. Confidentiality is non-negotiable, communicated clearly and consistently. The therapeutic space must be private and secure, free from judgment or intrusion. Patience is essential. Building trust takes time, especially for those accustomed to maintaining a professional identity at all times. We must be willing to sit with silence, to allow for the gradual unfolding of their stories.

Addressing the stigma surrounding mental health care can be a significant hurdle with some funeral service professionals. Funeral service professionals may view seeking therapy as a sign of weakness, a perception reinforced by societal expectations of stoicism and detachment expected from within the profession.

Traditionally the expression of emotion while serving families is seriously frowned upon and a professional detachment is encouraged. While it can be necessary to make space between oneself and a family they serve, traditional views in funeral services have leaned towards stoicism. Outward displays of emotion are avoided. Therefore, when working with the emotions of a funeral service professional, normalizing the experience is crucial. We can frame therapy as a tool for enhancing resilience, a proactive step towards self-care, rather than

a reaction to crisis. Educating them about the physiological and psychological effects of secondary trauma and burnout can demystify their experiences, showing that their struggles are not unique or signs of personal failure. Reassurances of confidentiality are vital, addressing concerns about professional repercussions. Highlighting the strengths they bring to their work—compassion, empathy, resilience—can reframe therapy as a means of amplifying these qualities, not diminishing them.

The therapeutic relationship with a funeral service professional requires an informed approach, one that recognizes the unique demands of their profession and the emotional toll it takes. It's about crafting a dialogue that fosters understanding, building rapport that acknowledges their experiences, and establishing trust that allows for vulnerability. By prioritizing these elements, we create a space for healing, empowering them to navigate their challenges and cultivate resilience.

Furthermore, it is critical to address the potential for moral injury. Many funeral service professionals grapple with ethical dilemmas, such as balancing the needs of grieving families with financial constraints or navigating cultural sensitivities surrounding death rituals. Exploring these moral conflicts in therapy can provide a space for processing and finding ethical clarity. Funeral directors may have had to perform their jobs at times conflicting with how they wished to serve families or the bereaved. At times the expectations of a corporate working environment can collide with the values and integrity of the funeral service professional. Therapists should also consider the impact of organizational culture in that regard.

Finally, therapists should be prepared to address the potential for existential distress disguised as anxiety or depression or constant worry through perfectionistic thinking. Constant exposure to death can lead to profound questions about meaning, purpose, and mortality. Exploring these questions in a safe and supportive environment can help funeral service professionals find a sense of peace and acceptance. Incorporating mindfulness and self-compassion practices can also be beneficial, helping them cultivate emotional regulation and self-care.

By expanding our understanding of their unique world, by crafting a therapeutic dialogue that resonates with their experiences, and by prioritizing ethical considerations, we can create a space for healing and growth.

Assessment is about building a bridge to understanding, a bridge that allows funeral service professionals to find acceptance, understanding and support from a mental health professional that understands their unique occupation and professional calling. Here are some more helpful ways to broaden your assessment interview with a funeral service professional:

Assessment Guide for Mental Health Professionals Working with Death Care Professionals (DCPs)

Introduction:

Here are some possible assessment questions designed to guide your clinical interview with a FSP. It is crucial to recognize the diverse roles within the death care industry and the specific stressors associated with this work. This assessment aims to promote occupational sensitivity and facilitate effective support for DCPs. Be sure to tailor the questions into your unique tone and style of building rapport with the FSP. I encourage a conversational style to assessment that builds on a current understanding of the topics listed below.

I. DCP Identity and Scope of Work

Understanding the DCP's Role:

- "Can you describe your specific role within your funeral home, organization, cemetery or other death care facility (e.g., funeral director, embalmer, cremation operator)?"
- What led to your particular calling as a DCP?
- "How does your role influence your daily experiences and interactions, your families you serve and the community you live and work within?"
- o What are some of the primary tasks associated with your role in the funeral home?

Perception of the Profession:

- o "To what extent do you feel the community, friends or family accurately understand and can reflect the range of your responsibilities and challenges?"
- "Are there other terms or descriptions you use in describing your role that make you feel more comfortable as I get to know you during this assessment?

Impact of Grief Work:

- "In what ways do you perceive that the strains of grief and grief care work impact your well-being on a daily basis?"
- o "Can you provide examples of how you experience this impact?"
- Do you often think about the families you've served who have been impacted by traumatic grief or other stress bereavement experiences?

II. Demands and Core Competencies

Work Schedule and Demands:

- "Please describe your typical work schedule. How often are you on-call or working outside of regular hours?"
- "How does the 24/7 nature of funeral service work affect your personal life, sleep patterns, and overall well-being?"
- "What strategies do you use to manage the unpredictable and demanding nature of your work?"

Core Competencies and Responsibilities:

- "Can you describe the emotional expectations your organization has on you to be a caring funeral service provider?" Does your organization encourage an open dialogue around these issues?
- "What parts of your job do you find most challenging, and why?"
- "How do you manage the emotional aspects of communication and responsiveness, such as during arrangement conferences with grieving families?"
- o If you embalm, or have done removals in your career, have you ever encountered a situation where you found it challenging to cope with what you've seen or witnessed?
- Have you ever heard your colleagues talk about things they've witnessed or have been exposed to that has been difficult to hear or absorb?
- "How do you balance the business aspects of the funeral home (e.g. financial arrangements) with the emotional needs of the families you serve?"

Education and Training:

- "What education, training, and/or licensing is required for your position?"
- "How well did your education and training prepare you for the emotional and psychological demands of the profession?"
- "What ongoing professional development or training do you engage in that helps you cope better with your mental health as a funeral service professional?"

III. Emotional Labor and Mental Health Impacts

Exposure to Trauma and Grief:

- "How frequently are you exposed to traumatic death, grieving families, and emotionally charged situations?"
- "How do you process and cope with this constant exposure?"
- Have you ever witnessed, or had to deal with a particularly violent or escalated situation because of your role and its expectations? For example, have you ever had to deal with a violent person during a visitation or funeral/memorial service? If so, how prepared were you for this?

Mental Health Symptoms:

- "Have you ever experienced symptoms of PTSD, compassion fatigue, burnout, depression, anxiety, substance use, vicarious traumatization, or sleep disorders?" It may be helpful to introduce some standardized self assessment tools such as the PCL-5, PHQ-9, GAD-7 or others. Funeral Directors may not know what they symptoms of PTSD, burnout, depression, etc., are in order to provide you with a list of symptoms.
- "If so, can you describe the symptoms and how they affected your work or personal life?"

Emotional Exhaustion and Grief Work:

- "How do you manage the emotional exhaustion associated with grief work, such as dealing with secondary traumatic stress and setting boundaries with grieving individuals/families?"
- "To what degree do you identify with the stressors of being a DCP, such as the constant 'on-call' mentality or the need to maintain a professional persona?"

Stressors and Coping Mechanisms:

- "What are the primary stressors in your work that contribute to your emotional well-being?"
- "How do you cope with these stressors? Are your coping mechanisms effective?"
- "Do you feel socially isolated because of your profession? If so, how do you address this?"
- "Can you describe any situations where you've experienced vicarious traumatization or felt unsupported in dealing with challenging situations?"

Organizational Culture and Support:

- "Describe the organizational culture at your workplace. Does it promote open communication about emotional challenges and mental health?"
- "What support systems are in place within your organization to help employees deal with the emotional demands of the work?"
- "Are there any organizational practices that may unintentionally contribute to emotional avoidance or a lack of support for staff?"
- "How do you navigate the 'steep learning curve' when you encounter a new or challenging situation?"

IV. Loved One Preservation and Disposition

Preservation and Restoration:

- "If your role involves preservation or restoration (e.g., embalming), how does the pressure to achieve a 'pleasant memory picture' of the deceased loved one impact you emotionally and mentally?" Have you ever been criticized by a family for your embalming work when you believed it was acceptable and difficult to complete (given the variables of decomposition, state of the deceased remains, etc.).
- "How do you cope with the emotional challenges of working with human remains that have been affected by traumatic injury, decomposition, or other difficult circumstances?"

Disposition:

- "How do you manage the emotional aspects of the disposition process, including direct burial, cremation, and identification/viewing?"
- "Have you ever experienced secondary traumatic stress from witnessing intense grief, such as when a family insists on seeing the loved one in a state of significant trauma?"

Professional Dilemmas:

 "How do you navigate professional dilemmas, such as balancing the family's wishes with the realities and limitations of what can be done in a particular case?"

Physical Demands and Well-being:

"How do the physical demands of the job, such as lifting, exposure to chemicals, and long hours, affect your overall well-being?"

- "How often, if ever, do you find yourself ignoring your own health needs due to the demands of your work?"
- "Can you describe any instances where you have felt 'constant exhaustion' within the preparation room or other work areas?"

V. Support Systems and Resources

Availability of Support:

- o "What support networks are available to you, both within and outside of your workplace?"
- "How satisfied are you with the support networks available to you, including Funeral Professional Peer
 Support (FPPS) or other resources?"
- "What barriers, if any, prevent you from accessing mental health support when needed?"
- How would your spouse, partner or family member perceive the impact of your work on your mental health?

Preferred Support and Resources:

- "What kind of support or resources would you find most beneficial for your mental health in relation to your work? (e.g., individual therapy, group counseling, peer support groups, mindfulness training)
- "What specific recommendations do you have for improving mental health support and resources for DCPs?"

VI. Dialogue Assessment Questions:

- "Can you describe a typical workday for you?"
- Do you do any of the following: perform removals for medical examiners or have witnessed traumatic death scenes, do you arrange families and conduct funeral or memorial services often? Do you manage a team of directors, or do you work solo?
- "What are some of the most challenging aspects of your job?"
- "How do you manage the emotional toll of your work?" How do you know when you're at your limit emotionally in your work?
- o How do you think society or the community you live in perceives you as a funeral home employee?

- (If the FSP has family or other close/intimate relationships) Does your family support you? Can they
 understand why the work you do is a calling?
- "What kind of support do you receive from your colleagues or supervisors?"
- "How does your work impact your personal life and relationships?"
- "Are there any specific experiences that have been particularly difficult for you?"
- o "How do you manage your own grief, while dealing with the grief of others?"

Unique Communication Styles and Needs of Funeral Service Professionals:

Funeral service professionals often develop specific communication styles as a result of their work.

- **Emotional Reserve:** They may present as stoic or emotionally reserved, due to the need to maintain composure in emotionally charged situations.
- Practical Focus: They may prioritize practical solutions and logistical details, reflecting the nature of their work.
- Direct Communication: Due to the time sensitive nature of their work, they may prefer direct and concise communication.
- **Sensitivity to Language:** They are highly attuned to the nuances of language, particularly when it comes to discussions of death and grief.

Mental health professionals must adapt their communication style to meet these needs, balancing empathy with directness and respecting their emotional reserve.

Creating a Safe and Non-Judgmental Therapeutic Environment:

Establishing a safe and non-judgmental environment is crucial for building trust.

- Validation of Experiences: Acknowledge the unique challenges and stressors faced by funeral service professionals.
- Empathy and Compassion: Demonstrate genuine empathy and compassion for their experiences.
- Confidentiality and Privacy: Clearly communicate the limits of confidentiality and ensure a private and secure therapeutic space.
- Patience and Understanding: Recognize that it may take time for funeral service professionals to open up and share their experiences.

• Neutrality: Maintain a neutral stance towards any religious or cultural beliefs that the client holds.

Addressing Potential Stigma and Resistance to Therapy:

Funeral service professionals may face stigma associated with seeking mental health support.

- Normalization: Normalize the experience of seeking therapy and emphasize its value in promoting wellbeing.
- Education: Provide education about the effects of secondary trauma, compassion fatigue, and burnout.
- **Confidentiality Assurance:** Reiterate the importance of confidentiality and address concerns about professional repercussions.
- Highlighting Strengths: Frame therapy as a tool for enhancing resilience and coping skills, rather than a sign of weakness.
- Addressing Concerns: Directly address any concerns or resistance to therapy, acknowledging their validity.

Notes

Presentation Feedback:

Please take a moment and give us feedback – you can do this by clicking here: <u>April 18</u> Event Feedback

If you want to connect with us you can email info@funeralspeersupport.com – or you can reach out to Dwight directly by emailing: dwight@ottawapsychotherapyservices.ca

Stronger Together Podcast

Stronger Together Podcast with



Click here to listen to the FPPS Podcast: Stronger Together

Anne and Michael

Become part of the FPPS Network:

Are you interested in being included in the FPPS Directory of Mental Health Professionals Supporting Funeral Service Professionals

Thank you for your interest in being included in this directory, which aims to connect Funeral Service Professionals (FSPs) and other death care professionals with mental health support that understands their unique experiences. This directory is being developed with a commitment to ensuring FSPs have access to qualified therapists who are dedicated to their well-being. Listing yourself is free of charge, however we do ask that you obtain a minimum one hour of ongoing education directly related to caring for FSPs on an annual basis through FPPS. This may be a charge of \$25-75\$, given the type of presentation to cover costs associated with preparing the CE opportunity. This could also be a synchronous or asynchronous event depending on the presentation. These costs go directly back into the operational budget needs of FPPS. Please note that this free training counts as your first year of learning as well as other free events we may offer. When it comes time to renew your yearly application, we ask that you consider your support to our service as an investment for more opportunities.

Please complete the following information to be considered for inclusion in our directory:

Section 1: Contact Information

- Full Name:
- **Professional Title:** (e.g., Registered Psychotherapist, Licensed Clinical Social Worker, Psychologist)
- Primary Practice Address:
- Secondary Practice Address (if applicable):
- Phone Number (for professional contact):
- Email Address (for professional contact):
- Website (if applicable):

Section 2: Professional Credentials & Registration

- Highest Relevant Degree(s) Obtained: (Please specify degree, granting institution, and year of graduation)
 **
- Province/State of Professional Registration/Licensure: (Please list all applicable)
 - o Province/State:
 - Registration/License Type:
 - Registration/License Number:
 - Expiry Date:
 - o Province/State:
 - Registration/License Type:
 - Registration/License Number:
 - Expiry Date:
 - (Add more fields as needed)

•	Are you currently in good standing with all relevant regulatory bodies?
	○ □ Yes
	○ □ No (If no, please provide details)
•	Do you agree to participating yearly in FPPS's ongoing educational requirement increasing capacity for
	MH Providers to work with Funeral Service Professionals?
	○ Yes
	o No
•	Do you carry professional liability insurance?
	○ □ Yes
	○ □ No
Sect	tion 3: Specialized Training & Experience
•	Please describe any specific training or continuing education you have completed that is relevant to the mental health support of Funeral Service Professionals and other death care professionals. Please also let us know if you're able to respond to a CISM request from a funeral home or employee of a FSP Facility. (e.g., grief and bereavement, trauma-informed care, occupational stress, compassion fatigue, understanding of the funeral service profession). Course/Workshop Name: Provider: Completion Date: Completion Date: Add more fields as needed)
•	Do you have experience working with individuals in high-stress or emotionally demanding professions?
	○ □ Yes
	○ □ No
	 If yes, please briefly describe the types of professions you have worked with:
•	Do you have specific experience working with Funeral Service Professionals or other death care
	professionals?
	○ □ Yes
	○ □ No
	 If yes, please briefly describe your experience:
•	What are your primary areas of clinical focus? (e.g., grief, trauma, anxiety, depression, burnout)
Soci	tion 4: Approach to Thorany & Understanding of the Profession

Section 4: Approach to Therapy & Understanding of the Profession

- Briefly describe your therapeutic approach(es). (e.g., CBT, EMDR, Psychodynamic, Humanistic)
- What aspects of the Funeral Service Professional's work do you believe contribute most significantly to their mental health challenges?
- How do you tailor your therapeutic approach to address the unique stressors and experiences of FSPs?

Section 5: Commitment to Equitable Access

Understanding that Funeral Service Professionals come from diverse socio-economic backgrounds, please describe your commitment to ensuring equitable access to your services by completing the following:

•	Do	Do you currently offer a sliding scale fee option?		
	0	☐ Yes (Please briefly describe the range)		
	0	□ No		
•	Are you willing to consider a sliding scale fee arrangement for Funeral Service Professionals who			
	dei	monstrate financial need?		
	0	□Yes		
	0	□ No		
•	Do	you accept direct billing to insurance providers?		
	0	\square Yes (Please list the major providers you work with)		
	0	□ No		
•		e there any other ways you ensure your services are accessible to individuals from various socio- onomic backgrounds?		

Section 6: Additional Information

• Is there any other information you would like to share that you feel is relevant to your inclusion in this directory?

Section 7: Agreement & Consent

By submitting this application, I confirm that the information provided is accurate and complete to the best of my knowledge. I understand that the information provided in this application may be used for the purpose of creating a public directory for Funeral Service Professionals seeking mental health support. I also understand that inclusion in this directory is not guaranteed and is subject to review.

- Name (Typed):
- Date:

Please submit this completed form to info@funeralspeersupport.com

Once approved we will post your name on our FPPS site Mental Health Therapist Directory.

SAVE THE DATE:

Lifting the Burden 2026

May 14th and 15th, 2026

Funeral Professionals Peer Support in conjunction with Ottawa
Psychotherapy Services is planning the first Mental Health Summit for Funeral Service Professionals and other allied death care professionals. We are also inviting mental health providers to be part of this conference. The event will be online, and we aim to make the event free for anyone interested.

To join our mailing list to receive updates on this exciting event, please click here:

Lifting the Burden Mailing List

As more information becomes available we will keep you informed.

Developing Topics:

Mental Health and Funeral Service Management

Critical Incident Stress Debriefing for the FSP

Celebrant Mental Health

Relationships, Mental Health and The Funeral Home

Innovation in Mental Health & the Funeral Service Professional

And more great speakers, panels and workshops for FSP's and other allied death care professionals.

A Virtual Summit for Mental Health and Funeral Service & Allied

Death Care Professionals

Hosted by Funeral Professionals Peer Support and Ottawa Psychotherapy Services!

May 14 and 15th, 2026

10 am to 6 pm EST

Save the date and share the space!







OTTAWA PSYCHOTHERAPY SERVICES

Certificate of Participation:



This is to certify that:

Has completed a mental health sensitivity training seminar focused on working with death care professionals/funeral directors & other professionals with Funeral Professionals Peer Support on April 18, 2025.

GIVEN THIS 18TH DAY OF APRIL 2025 IN OTTAWA, ONTARIO (CANADA).

The presentation included the following learning objectives:

Awareness of the role and competencies expected of the DEATH CARE PROFESSIONAL
Give mental health professionals professional competency
when it comes to working with DEATH CARE PROFESSIONAL
Knowledge expansion on the depth of professional
responsibilities expected of the DEATH CARE PROFESSIONAL
Various ways of understanding how this type of
emotional labour affects the DEATH CARE PROFESSIONAL

Continuing Education Credit: 1.5 hours

TRAINERS:

Rick Bilcowski, FD, CFSP, Grief Recovery Specialist

Allyse Worland, FD, CFSP

Dwight EA Thompson MSW RSW CBT RMFT-S

Additional Credits and Acknowledgements:

Photo Credits:

Slide 13:

Tubman Funeral Homes, Ottawa, ON and Kelly Funeral Homes, Ottawa, ON

https://www.tubmanfuneralhomes.com/

https://www.arbormemorial.ca/en/kelly-

somerset.html?utm_source=google&utm_medium=organic&utm_campaign=7540_kelly-somerset_google-my-business

Slide 14:

Chapel Photo: Tubman Funeral Homes, Ottawa ON https://www.tubmanfuneralhomes.com/

Casket Selection Room: O'Connor Mortuary, Laguna Hills

https://www.mercurynews.com/2019/09/30/nearly-third-of-california-funeral-homes-sidestep-law-on-price-disclosure-consumers-groups-claim/

Vistation Parlour: Needham Funeral Services, Dignity Memorial

https://www.dignitymemorial.com/en-ca/funeral-homes/ontario/london/needham-funeral-service/3190

Embalming Room: Lynch Supply Co.

https://www.lynchsupply.com/

Arrangement Office: Cremation Society of New Hampshire

https://csnh.com/cremation-society/cremation-service-locations/manchester-location/

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Helpful Links:

Organization/Service	Information and Link
Bereavement Authority of	The Bereavement Authority of Ontario (BAO) is a government delegated
Ontario	authority and not-for-profit corporation administering provisions of
	the Funeral, Burial and Cremation Services Act, 2002 (FBCSA). Accountable to
	the Minister of Public and Business Service Delivery and Procurement and the
	government, the BAO is responsible for the protection of the public interest.
	https://thebao.ca/
National Funeral Directors	The National Funeral Directors Association is the world's leading, largest and
Association (NFDA, USA)	most trusted association to support funeral professionals. We provide our
	members with critical information, innovative tools, resources and the
	professional community they need to serve families, run sustainable
	businesses and become pillars in their communities.
	https://nfda.org/
International Cemetery,	The International Cemetery, Cremation and Funeral Association (ICCFA) is the
Cremation and Funeral	only international trade association representing all segments of the
Association (ICCFA)	cemetery, funeral service, cremation and memorialization profession. The
	association is comprised of more than 10,000 members in the cemetery,
	funeral home and crematory industries, as well as supplier and related
	businesses worldwide. It serves and supports these members through a host
	of benefits designed to increase their management proficiency and improve
	their businesses–from regular updates on government and legal issues, to
	educational meetings, to a variety of services and products tailored to meet
	their needs.
	https://iccfa.com/
Ontario Association of	Formerly known as the Ontario Association of Cemeteries, the association was
Cemetery and Funeral	initially created as a service for Ontario's cemeteries to exchange ideas and
Professionals (OACFP)	information to support high ethical practices within the sector.
	In 2003, the Ontario Government responded to changing consumer demand
	and took steps to replace The Cemeteries Act and The Funeral Director
	Establishments Act. In its place, they introduced the Funeral, Burial and
	Cremation Services Act 2002. This was designed to introduce new levels of
	consumer choice, combined with strengthened consumer protection.
	https://oacfp.com/index.html
Canadian College of Funeral	The Canadian College of Funeral Service is Canada's foremost institution for
Service	funeral service education. With over 40 years of history, our college, initially
	founded in Manitoba as the Western School of Funeral Service, continues to
	be the only school dedicated solely to fostering a new generation of skilled
	funeral service professionals across Canada.
	https://ccfs.ca/



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OTTAWA PSYCHOTHERAPY SERVICES

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