

NEXT STEPS ACTION PLAN:

# A Strategic Approach to Grief Literacy and Grief Support in Canada

May 30th, 2025



# Acknowledgements

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We are incredibly grateful to the 3874 people who participated in our national public consultation survey and shared so openly about their grief experiences.

We would like to thank the eight reviewers who read drafts of this report and provided feedback.

"I became a little emotional reading some parts of the report and I truly believe part of that stems from being SEEN as a griever. What important work that is being done by everyone!"

"I want to start with commending you on a beautiful piece of work! It really is exciting to see such a comprehensive document."

We are grateful to everyone who gave of their time and wisdom to chart a course for the future of grief in Canada.





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## Table of Contents

Acknowledgements	ii
Executive Summary	
Introduction	2
The Canadian Grief Alliance	
Advancing Grief Literacy in Canada: First Steps Action Plan	
Process and engagement	
Our goal	
What is Grief?	5
Principles	5
International Exemplars	6
Public health model	6
Central coordinating body	7
Current State	
Canada is in a state of grief illiteracy	
The volume and complexity of grief	
Service delivery and resource challenges	
Service gaps and other barriers to support	
Health and social care systems	
Right services at the right time	
Preparing professionals to support grief	
Grief is not homogenous	
Indigenous Peoples	
Black and Racialized Communities	
Cultural and Linguistic Minorities	
Children and Youth	
Two-Spirit and LGBTQ+ Men	
Rural and Remote Communities	
Provider grief	
Incarcerated individuals	
Those experiencing non-death loss	

iii

Grief and mental health: Understanding the dichotomy	
Implications of unsupported grief	
Research	
Federal policy agenda	
Recommendations	19
In Conclusion	21
References	
Appendix – Organizations Consulted	

## **Executive Summary**

Canada is currently facing a significant challenge in its approach to grief, characterized by widespread grief illiteracy, an increasing volume and complexity of grief experiences, and substantial service delivery and resource challenges. Grief is a natural and universal response to loss, impacting individuals in myriad ways across emotional, physical, cognitive, and behavioral dimensions. However, Canadian society often struggles to recognize and respond to grief, leading to feelings of isolation and unsupported experiences for those grieving. The Covid-19 pandemic further exacerbated these deficiencies, highlighting Canada's lack of preparedness for widespread grief and the economic impact of unsupported grief in the workplace.

In April 2023, the Canadian Grief Alliance (CGA), a coalition of over 170 organizations and professionals, received funding from Health Canada to take the first steps to advance grief literacy. This led to the development of foundational knowledge tools, including the bilingual website AboutGrief.ca | LeDeuil.ca, which offers evidence-informed content, videos, resources, program and services listings, and an Al-powered Grief Assistant. The CGA also hosted webinars, developed new resources to fill gaps, established a National Grief Network, and consulted with more than 4000 diverse voices and experiences to inform the Next Steps Action Plan (NSAP).

Canada can look to international exemplars such as the UK, Ireland, and Australia that have implemented comprehensive national models for grief support, often based on a public health approach like the Irish Adult Bereavement Care Pyramid, which aligns support needs to appropriate services. Grief Australia serves as an instructive example of a national coordinating body for grief policy, services, and public awareness.

The NSAP proposes a strategic approach to improving grief literacy and support in Canada, moving towards a public health model that acknowledges grief as a social issue requiring collective and sustained efforts from all levels of government, organizations, and communities. Key challenges identified include insufficient and fragmented services, unstable funding for grief support programs, workforce shortages, lack of grief literacy, lack of professional training, and, a dearth of supports tailored for underserved populations such as Indigenous Peoples, Black and racialized communities, children and youth, 2SLGBTQ+ individuals, men, and those in rural and remote areas. The grief experienced by people working in healthcare, first responders and others with adjacencies to grief and non-death losses are also often overlooked.

This report puts forth several recommendations necessary to develop a national strategy for grief:

- 1. Improve grief literacy through targeted public awareness campaigns and community engagement;
- 2. Adopt a public health approach to provide accessible and tailored grief services, particularly for underserved populations, that includes approaches and responses to grief developed by and for Indigenous, Black and racialized communities;
- 3. Enhance support for grief professionals and volunteers through expanded training and education;
- 4. Foster a deeper understanding of grief in Canada through national data collection and dedicated research funding; and,
- 5. Establish a Canadian Centre for Grief to coordinate national policy, program support, and emergency responses.

These steps are crucial to building a more compassionate and supportive nation for grieving Canadians.

# Introduction

Grief literacy is the competence and knowledge in grief required by both the grieving person, and those supporting them (Bensoussan, 2019) to enable the general public and professionals to identify grief more readily, to seek out relevant information, to adopt appropriate supports and to improve our ability to support the grieving process in a compassionate way (Breen et al., 2022; Clark, 2003).

In 2023, the Canadian Grief Alliance received funding from Health Canada to take the first foundational steps to address grief literacy in Canada. The Covid-19 pandemic starkly demonstrated how Canada's deficiencies in grief policies and programs impacted individuals, families, communities, society and the economy. The CGA's May 2020 warning, "Canada's fragmented, under-resourced and inadequate grief services will be guickly overwhelmed by the volume of grieving Canadians whose common form of support - personal connection - has been severed," was prescient. Similarly, the CGA's prediction that increased complexity of grief due to unique pandemic factors has been confirmed: research has shown that those who experienced a death during Covid are experiencing increased risk of mental health outcomes related to their grief (Adiukwu et al., 2022). Canada's scant, patchwork of grief services that were insufficient pre-Covid were overwhelmed during the pandemic and continue to struggle under the volume of need and the downstream implications of unsupported complex grief that continue to emerge. In the U.S. workplace grief is estimated to cost about \$225.8 billion yearly (Douglas, 2023). In Canada in 2021, it was estimated 4.2% of workers had their productivity compromised as a result of grief, costing up to \$684 million (Maria Vassiliou, 2022). Increased absenteeism, illness and decreased productivity are just some of the ways grief can impact the workplace and by extension the economy.

Furthermore, other national tragedies have illustrated the widespread impacts on grief across the country and Canada's lack of preparedness to respond constructively and meaningfully. The findings of the Truth and Reconciliation Commission, the Missing and Murdered Indigenous Women and Girls Inquiry and the unmarked graves associated with residential schools, emphasized the tremendous grief experienced by Indigenous Peoples in Canada, alongside anti-Indigenous racism that contributed to the deaths of Brian Sinclair and Joyce Echequan. Tragedies like the Lapu Lapu festival deaths in Vancouver, Humboldt Broncos' bus crash, the Portapique shootings, devastating wildfires affecting many provinces and territories, the impacts of climate change, a diminishing sense of security, and world events contribute to our quantum of grief. Navigating future national tragedies will require a higher level of grief literacy than Canada currently possesses.

The CGA's *Next Steps Action Plan* provides a roadmap for engagement by governments, organizations, and communities to improve grief literacy and expand supports and services to bring Canada in line with other countries in implementing a holistic, sustained approach to supporting grieving Canadians. We are advocating for a Canada where grief is acknowledged, met with understanding, and effectively supported.



## The Canadian Grief Alliance

The Canadian Grief Alliance (CGA) is a coalition of more than 170 leading health and grief-related and -adjacent organizations, as well as professionals, and members of the public from across Canada. The CGA was convened by the Canadian Virtual Hospice (CVH) in the early weeks of the Covid-19 pandemic to advocate for a proactive, national approach to support grieving Canadians in anticipation of the surge of complex grief from Covidrelated and affected deaths. Since May 2020, the CGA has engaged the public, stakeholders, policy and decision makers and the media to #MakeGriefAPriority. This leadership in policy and awareness raising has generated more than 300 media stories and invitations to present to four Parliamentary Committees. CGA's advocacy led to inclusion of grief education in the federal Budget 2021; increased profile for grief in the media and with the public; and investment by Health Canada in CGA's Advancing Grief Literacy in Canada: First Steps Action Plan initiative, a series of national knowledge products to support grief literacy, including this report.

### Advancing Grief Literacy in Canada: First Steps Action Plan

A two-year contribution agreement with Health Canada enabled the CGA to undertake a series of initiatives, to enhance grief literacy and Canada's response to grief. Given the dearth of resources and funding limits, the knowledge tools were to be directed to the general public. The following outcomes have been achieved:

- A bilingual, national website <u>AboutGrief.ca</u> | <u>LeDeuil.ca</u> aggregates trusted, evidence-informed content including:
  - Articles to assist those grieving or supporting someone who is grieving to better understand and respond constructively to grief.
  - More than 1,000 videos sharing diverse personal stories and professional guidance.
  - Searchable database of 394 local, provincial and territorial, and national programs and services.
  - Searchable database of 427 recommended resources including podcasts, infographics, books, articles, and more.
  - Repository of grief innovations.
  - The Grief Assistant that harnesses AI technology and the evidence-informed content of CGA and CVH to respond to visitors' questions and assist them to navigate to tailored content.
- A series of 30 webinars attended by 2,492 participants in which grief specialists responded to questions.
   Six of the webinars were offered in French. Tailored webinars were also offered to people working in healthcare and adjacent fields, as well as on specific topics including men and grief, pet loss, MAiD, culture

and grief, relationship loss, anticipatory grief, as well as navigating grief and the holidays.

- Establishment of a National Grief Network of people working in grief and grief-adjacent fields, through which to share knowledge, promote activities, and peer support.
- A series of grief awareness campaigns reaching over 400,000 people.
- The Next Steps Action Plan (NSAP).

#### **Process and engagement**

To achieve the outcomes, engagement of those with diverse professional and lived experience from across Canada was paramount. All initiatives, including the development of the NSAP were informed by: a knowledge synthesis of academic and grey literature and international exemplars; an environmental scan; a national online survey of almost 4000 respondents from across Canada; meetings with people who have experienced death and non-death losses; consultations with 302 individuals working in grief and adjacent professions in all provinces and territories, as well as 46 grief-related organizations; the expertise and opinion of the 26 devoted members of our National Consultation Committee; the input of CGA members; and "The Great Big Grief Focus Group" - 500 people engaged as a result of the national survey who provided feedback to a spectrum of content and design matters. The NSAP was also informed by: Forever Changed Conversation Cafés - a series of community dialogues with people bereaved by different kinds of losses hosted by the Nightingale Centre in southern Ontario; The Collaborative Action Plan for accessible, appropriate and equitable grief and

*bereavement support in British Columbia* (2023) by the BC Centre for Palliative Care; the Grief Matters festival in Nova Scotia in 2023, the Good Mourning Festival in Toronto in 2024.

#### Our goal

This document does not purport to specify every action that could be taken to enhance grief literacy or Canada's response to grief. Rather, it proposes a strategic approach to grief literacy and grief support that uses a more robust set of public policy instruments to respond to specific Canadian needs while leveraging successful models from comparable countries. Improving grief support requires the combined and sustained efforts and commitment of the federal, provincial and territorial and local governments, organizations, professional associations, businesses and corporations, communities and the public. This plan provides opportunities for governments, organizations, communities and individuals to #MakeGriefAPriority and improve Canada's response to grief into the future.

### **Canadian Grief Alliance**

National Public Consultation on Grief Executive Summary

#### The survey

From November through December 2023, **3**,**874** people from every province and territory in Canada answered the call from the Canadian Grief Alliance to share their experiences of grief and loss. We heard from people who had experienced the death of someone close to them, as well as a variety of other losses including divorce, declines in health, family estrangement, employment and financial losses, pet loss, among others. This overwhelming response speaks to what the survey data confirms – people want to talk about their grief.

#### **Key takeaways**



# What is Grief?

Grief is a natural universal response to a death or other loss. It is a multidimensional human experience which affects all of us. And while we know that grief is universal, some communities, such as Black, Indigenous, and racialized people are disproportionately impacted by loss and grief.

While commonly associated with death, grief is a response to any significant loss, including loss of health and functioning, divorce and other relationship loss, financial and job losses, loss of hopes and dreams, loss of sense of security, and ecological loss, to name a few. For some, grief may be present in anticipation of the loss. People who are grieving often struggle to understand the emotional, physical, cognitive and behavioural effects of grief. Although sadness is an emotion commonly associated with grief, people may experience anger, despair, irritation, loneliness, anxiety, guilt or relief and emotions may shift suddenly. People who are grieving may feel confused and struggle with concentration, attention or memory. They may experience a range of physical symptoms, including sleeplessness, fatigue,

pain, breathlessness and weight gain or loss. They may notice disruption to social connections, and spiritual or existential challenges. Two people experiencing the same loss may have very different responses. Grief varies in intensity based on many factors such as the circumstances of the loss, impact of the loss, and if the loss was a death, the nature of the relationship. Approaches that are helpful to one person may not work for another, what works with one grief experience may not work with another loss, and what works at one point in time, may not work at another.

Like physical pain, loss is what you say it is and grief is how you experience it.

#### **Principles**

This report embodies a set of principles for addressing grief based on existing research, the clinical experience of practitioners in this field, and our consultations with experts and Canadians who had experienced loss in their lives:

- 1. **Grief is Natural –** Loss and grief are part of the human condition. The suffering we experience is not a mental illness but an expression of what it is to be human. What or who we lose and how connected we are to them influences our experience of grief and how we express it. The intensity of grief will ebb and flow over the course of our lives. Grief may never go away completely, but will become part of our life story.
- 2. **Grief is Disruptive** Serious loss is often accompanied by unwanted or unplanned change. Grief may affect daily routines and social activities. It may affect our engagement with family members, friends and our work. Some people may find themselves questioning their prior beliefs and assumptions about the world and their identity. Dealing with such disruption can be challenging and unsettling.
- 3. **Grief is Social** The family, culture and communities we come from shape how we understand, express and adapt to loss and grief. Most people cope with grief better if they have support from people who can listen and understand without judgement.
- 4. **Grief is Personal –** Grief is shaped by our individual personalities, preferences, and life experiences. How we express grief--and how we learn to live with it--is influenced by our different circumstances and resources. It is important that we learn to navigate grief in ways that align with who we are and what we need as individuals rather than trying to conform to external expectations.

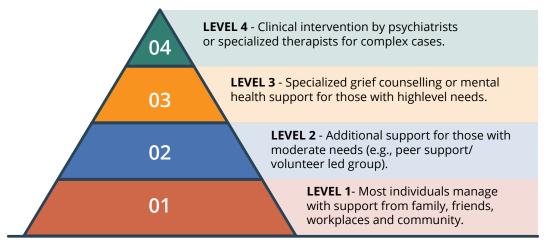
# **International Exemplars**

The UK, Ireland, and Australia are international leaders in implementing successful national models for responding to grief. While all deliver grief services through a combination of the health care system, communitybased charitable or not-for-profit organizations, and private practitioners, that is where similarities with Canada end. Unlike Canada, these jurisdictions have wide-ranging formal government policies regarding grief developed with stakeholders commonly based on a public health model. Many have central coordinating bodies to provide policy and program leadership.

#### Public health model

Several countries have adopted a public health approach to grief policies, recognizing that effective and sustainable grief support requires collaboration between informal approaches and formal services. Public health models match the individuals' needs and risk factors with the types of services. Several countries have embraced variants of the Irish Adult Bereavement Care Pyramid (Burns et al., 2020), emphasizing early support through compassionate communities and targeted help for those with complex grief, to shape bereavement care policy, planning and service delivery by matching services to needs and risks.

- Level 1 Informal support from family, friends, workplaces and community – recognizing that many people cope with loss with the help of their existing social networks and good information on grief.
- Level 2 Additional support for those with moderate needs, such as peer-led bereavement groups or one-to-one peer support, providing opportunities to share experiences, reflect, and receive empathy from others who have "been there".
- Level 3 Specialized grief counselling and mental health support for individuals with high-level needs or those at risk of prolonged grief disorder.
- Level 4 Clinical intervention by psychiatrists or specialized therapists for complex cases.



Modelled on the "Irish Pyramid" which is used in Ireland, the UK and Australia

In the United Kingdom, bereavement care contributes to the outcomes considered in the National Health Service and Department of Health frameworks. The UK Commission on Bereavement, formed in 2021, published a report resulting in a series of activities to improve grief services including developing guidelines for delivery of bereavement support, investing in bereavement support and improving research into bereavement. Subsequently,

the Bereavement Care Service Standards have been updated and the National Institute for Health Research commissioned a study of ethnic minority communities' experience of accessing grief services.

Additionally, the UK has numerous child bereavement networks and initiatives like grief cafes and "compassionate city" charters, which normalize conversations about death and loss in everyday life.

In Wales, the government developed and funded implementation of a national framework for the delivery of bereavement care to ensure quality services with a pledge for robust monitoring and evaluation.

#### Central coordinating body

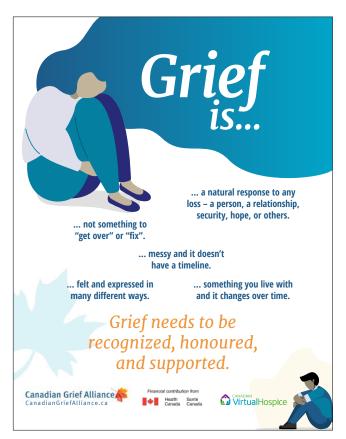
The example of Australia is particularly instructive because of the similarity between its federal system and Canada's. The Centre for Grief Education, now Grief Australia (<u>www.grief.org.au</u>), was established in Melbourne in 1996 with a national mandate for leadership in grief policy and services. It receives support both from national and state governments as well as the private sector. A member-based organization, it has a particular focus on the bereaved whose experience is prolonged and liable to result in costs to the individual, health and social care systems and employers.

Grief Australia provides:

 Support for professionals and volunteers – provides a suite of services including: education and training opportunities, and ongoing support through resource materials and newsletters. It convenes a robust network of grief professionals and volunteers, sharing information and sustaining best practices. It operates a national certification program for grief specialists.

- Policy leadership and advocacy is a source of policy and program guidance to both governments and the private sector.
- Public awareness facilitates health promotion activities, including remembrance events and social media campaigns. It sponsors the Compassionate Employers Award, which engages the public and employers from small operations to multinational corporations.
- Service provision provides direct counselling, including tele-health, face-to-face counselling and support groups. It operates a grief referral service and undertakes special projects such as the development of grief standards for palliative care services and a review of defense department grief services and work-related bereavement.
- Emergency response assists governments by mounting grief programs in times of national crises, such as the Black Saturday bushfires, the Bali bombings, and Covid-19.

The consultations we conducted reinforced that Canada's quiet epidemic of grief demands a coordinated national response with provincial and territorial engagement. In the next section, we share the learnings from those consultations and describe the current state of grief support in Canada.



## **Current State**

Over 18 months, members of the public, volunteers, and professionals from a variety of roles and disciplines across Canada shared remarkably consistent feedback about the current state of grief. The consultations reinforced key themes and challenges.

## Canada is in a state of grief illiteracy

Grief will enter all our lives many times, but few of us are well-prepared for its length, depth or how it may affect us and those we care about. Many people are uncomfortable talking about losses, death and grief. Grief is not well-understood or responded to, either by those experiencing it or by those trying to offer support. We live in a society that struggles to recognize grief, diminishes its impact, stigmatizes certain illnesses, deaths and circumstances and fails to recognize grief from other life events and situations such as: divorce and other relationship loss, financial loss, job loss and retirement, ecological loss, loss of sense of security, loss of hopes and dreams, loss of independence or sense of self, diagnosis of a life-threatening illness, developmental disorder or mental illness, or secondary losses, to name a few. Also, the anticipatory grief that accompanies the many losses and ongoing challenges associated with chronic and life-limiting illnesses, experienced by the person who is ill, their caregivers and other family and friends, is overlooked and not supported. Children and teens often respond differently than adults to grief and as a result their grief is often unrecognized and unsupported. Social inhibitions and cultural assumptions often prevent people from reaching out for support.

"I don't think people can really understand unless they have been through it. Acknowledge grief even if you are uncomfortable."– Survey participant As we grapple with our grief, our family, friends, neighbours, colleagues, employers and health providers may struggle with how to support us. They are often uncomfortable with our distress and may fear "making things worse" by saying or doing the wrong thing. Some cultures are reluctant to speak openly about grief. This may manifest itself in avoiding the grieving person. Of the nearly 4,000 respondents to the CGA grief survey, 50% indicated that their grief was not well supported. Yet ninety percent indicated that it would be helpful to be asked about their grief. Stigma associated with certain deaths, including MAiD, suicide or substance-related deaths, exacerbates these barriers. At a time when personal connection is vital, many who are grieving feel misunderstood, isolated, and poorly supported. The grief attached to some losses such as pregnancy loss, the death of an ex-spouse or partner, or bankruptcy may not be recognized by society or may lack rituals that assist in grieving. The death of a pet was identified in the grief survey as a source of often tremendous, unrecognized and unsupported grief. As a result, these disenfranchised losses go unacknowledged, and people are left to grieve in isolation. While human connection and social support are vital to people who are grieving, often those giving support, both informal and professional, do not have the appropriate skills, knowledge or capacity to support the person grieving.

"They will say, 'I didn't want to say anything and remind you.' You can't be reminded of something you can never forget, that's present with you every waking minute of your day." – Consultation participant

One of the most important findings of a national grief survey conducted by the CGA in 2023, was that more than nine out of ten respondents found it was helpful to be asked about their grief, and yet, inexperience, fear, and social inhibitions often restrain us from giving people who are grieving the support they want and need. Furthermore, in our discomfort, many of us rely on stock phrases to comfort others that our survey respondents identified as unhelpful such as "everything happens for a reason" or "they are in a better place".

#### Helpfulness of grief supports

Type of support	% who found the support somewhat, very or extremley helpful
Grief counsellor	83.6
Friends and/or colleagues	78.8
Peer support group	76.2
Family (including chosen family)	74.8
Support group facilitated by a counsellor or social worker	73.5
Hospice grief program	73.2
Support group faciliated by a volunteer	71.4
Online community support	69.8
Faith-based or spiritual community or leader	66.3
Other community program	63.8
Family physician	60.3
Employee assistance program	48.4
Telephone helpline	40.8

Data from the National Public Consultation Survey on Grief in Canada (conducted November 16 - December 22, 2023 Canadian Grief Alliance, 2023)

"Don't make judgements and think you should just get over it. Grief is personal and different for every person." -Survey participant

Many believe that grief is something we "get over" in days or weeks rather than something we live with. This leaves grieving people feeling pressured to "move on" and that they are somehow "doing it wrong". For those whose grief requires timely professional intervention, there is a general lack of understanding of the signs that more help may be needed and where to access trusted, available, competent, grief-informed services. Generally, as a society we are not adept at understanding and responding to our grief, and neither are those we rely on most. We lack grief literacy. Improving grief literacy is paramount to effect this necessary societal shift. People who are knowledgeable and empowered to recognize and respond to their own grief and that of others create a more compassionate society that can mitigate the impacts of unsupported or under-supported grief.

## The volume and complexity of grief

#### "People are drowning right now in grief" – Consultation participant

In the wake of Covid-19, the volume and complexity of grief has risen sharply. Research has now shown that post-pandemic, Canadians grieving all deaths, whether or not they are a result of Covid-19, are at elevated risk of unresolved, complex and/or prolonged grief (Adiukwu et al., 2022). When grief is complex — if circumstances prevent access to appropriate supports - it can evolve into depression or anxiety, substance use, and the risk of suicide and may result in a poorer quality of life. Consultations with grief organizations and experts highlight a consistent message: current grief services did not adequately meet the volume or complexity of needs pre-pandemic, and this gap between demand and supply has grown significantly over the past 5 years. A drastic increase in suicidality among clients compared to pre-pandemic was noted by one organization. Many providers are overwhelmed by skyrocketing demand, burgeoning waitlists, and more cases of traumatic loss, cumulative losses, and prolonged grief than ever before.

The volume of need for grief services is further exacerbated by societal and demographic factors. More than 325,000 people living in Canada die each year (Statistics Canada, 2024). Statistics Canada projects that the number of deaths from all causes will increase to 425,000 in 2036 (Health Canada, 2018). Research at Pennsylvania State University indicates that each death directly affects a minimum of 9 people (Swayne, 2020). An additional 50,000 people died of Covid-19 between 2020-2023 (Statistics Canada, 2024). In 2023, there were 7,162 accidental drug poisoning deaths in Canada, the highest ever recorded, but there are few grief programs tailored to the unique circumstances of these deaths (Statistics Canada, 2024). Our aging society will fuel demand for grief services into the future. Smaller families and an increasingly mobile society often mean that the people we may count on most for support, live at a distance. Some communities and groups experience disproportionate impacts of grief, requiring tailored approaches and supports. Meeting burgeoning future grief support needs requires a radically different approach to grief as a national public health and policy issue.

## Service delivery and resource challenges

"You can spend all your time fundraising, or you can work towards programming and try and get to the bottom of things." – Consultation participant

Several systemic issues hinder effective grief support. Funding instability is a core and ongoing issue. Many grief support programs (often run by non-profits or hospices) do not have stable or adequate funding and rely heavily or exclusively on fundraising, short-term grants or donations. This impacts long-term planning and expanding services which, given the sustained nature of grief, is fundamentally important. Economic downturns like that which accompanied Covid-19 tend to reduce donations yet increase demand.

Shortages of trained grief counsellors are natural outcomes of insufficient funding, overwhelming demand, overworked staff and burgeoning waitlists. There are relatively few grief specialists in Canada and even fewer who specialize in children's grief. Some are leaving the profession temporarily or permanently due to burnout. Some regions of the country have no grief specialists. Many organizations rely on volunteer grief facilitators or peer supporters, but recruiting, training, and retaining volunteers requires effort and resources that are often stretched very thin. Without appropriate and ongoing support and continuing education, volunteers often burnout resulting in retention and continuity challenges.

Training gaps are rife. A lack of Canadian-based education and training opportunities for professionals and volunteers limits capacity building to respond to a spectrum of grief needs, impedes maintaining currency of skills, and diminishes feelings of personal and professional satisfaction.

These challenges are compounded by the volume of demand and the complex grief post-Covid-19. To mitigate long waiting lists, many services are now limiting the number of counselling sessions people can access.

## Service gaps and other barriers to support

Effective grief support requires a grief informed approach, however grief services and resources across all regions in Canada are insufficient or non-existent, hard to find, or difficult to access. Grief services are fragmented and under-resourced because they are not part of the formal healthcare system or other government funding envelop. While urban centres are better resourced than rural and remote areas that have few or no services, nowhere in Canada is the level of service adequate for the level of need. There is a "grief gap" in the information and services provided by many illness-based organizations: the grief that accompanies a life-limiting diagnosis, for both the person living with the illness or their families is seldom acknowledged, normalized or supported.

A universal concern is the lack of easily accessible grief supports to meet varied needs, with underserved groups being disproportionately affected. Moreover, services are unevenly matched to need. Someone whose partner has died from cancer may have access to grief supports through a hospice or cancer program, while similar supports may be unavailable to someone whose child died from the toxic drug supply crisis. Someone who has lost a child to suicide may not benefit from participating in a support group that also includes people who have lost a parent to Alzheimer's or a spouse to cancer. BIPOC populations, those contending with homelessness, recent immigrants and refugees, or those for whom a death has triggered financial struggles, for example, each have particular needs.

The pandemic pivot to online counselling and grief support groups made grief support more accessible to some, however, connectivity issues in rural and remote communities and discomfort with technology can be a barrier and impede building the personal connection that underpins services.

Another barrier is the lack of awareness that supports exist. Resources often aren't well known or advertised. Many consultation participants indicated that by the time clients discovered a grief program, they had already been struggling alone for months. Often people working in health and social care systems aren't aware of local supports to which they can refer individuals or families. Further, a lack of regulatory and licensing bodies for grief specialists means that anyone can "hang out a shingle" to offer grief counselling or education, and the grieving public does not have a measuring stick against which to measure the efficacy of the services they are accessing.

## Health and social care systems

"After the patient dies, family members are dropped by the system and there's no pathway to follow up." – Consultation participant

Despite health and social care systems being rife with grief, scant grief services are embedded or connected to these systems. While healthcare systems would seem like a natural point of contact for many wrestling with grief, they lack a network of grief services and once a death occurs, whether in hospital, long-term care, or community care, people who are bereaved are often "cut loose" from the system and *"left to cope alone.*" Unless a person is connected to a palliative care program or a hospice, they may never be offered grief support or even told that grief services exist. Even then, grief support is not a guarantee.

## Right services at the right time

"In my ideal world there would be multi-level avenues of grief support: start out with education to particular communities, to the general public a public health approach to grief support." – Consultation participant

Grief support needs are highly personal and may change over time. That is why timing, readiness and access to a spectrum of services matters. Supports that are flexible and available when the person is ready for them is critical and help mitigate the possibility of more persistent grief. Peer support was highlighted as an essential component of a grief support system because not everyone who is grieving needs or wants therapy. For some, peer support groups that offer people the chance to meet others who are going through similar grief experiences, provide the connection and support needed. However, a mismatch was identified in current offerings: many peer support programs are offered only early in the grief experience, but many consultation participants indicate that these supports were more efficacious six months to a year after the death. For some, due to life circumstance and access to support, attending to loss and grief comes years after the loss event.

## Preparing professionals to support grief

Many professionals who encounter grief in the course of their practice, including physicians, nurses, teachers, social workers, spiritual care providers, funeral home employees, child and family services staff, first responders, and mental health counsellors, receive little or no training in grief. Healthcare professionals often express discomfort in being with grieving people and a lack of confidence, skills and time to provide constructive, compassionate support. As a result, they may not recognize grief when they encounter it, or they may feel unprepared to address it when they do. At times they may apply ineffective or even counterproductive interventions, which research has shown can have longterm negative implications on a person's grief (Simon & Shear, 2024). While the treatment of grief may be an elective course in some social work programs, if offered at all, it is only touched on and often absent from the curricula of many other health professionals and first responders. Few evidence-based grief training programs exist in Canada, and those that do exist are not well known. Professional competency frameworks that inform curriculum across different health professions do not include grief or only mention it in relation to bereavement. Although recent work to develop competencies for the provision of palliative care (provincially and synthesized nationally) includes some attention to grief, these frameworks were developed for working healthcare professionals and have yet to be integrated or adopted by provincial regulators to inform entry to practice education (Batt et al., 2021).



## Grief is not homogenous

"We need to include the communities who are impacted in telling us what they want, what grief looks like for them, and create the spaces where it's okay for them to talk about it" – Consultation participant

Not only does everyone grieve differently, some communities and groups experience unique factors that can affect the grief experience. There are limited or no supports tailored to specific communities, languages or circumstances. What works for one person or community, may not work for another, leaving many neglected. The widespread devastating cultural and historical grief, that includes ongoing racism, and discrimination, experienced by Indigenous Peoples, Black communities, and other racialized communities requires culturally-based, community-led approaches, yet few if any such resources or services currently exist. Statistics revealed that Black, Indigenous and racialized communities experienced more deaths during the pandemic, and therefore more grief; however, these impacts extend beyond the pandemic (Yang & Carter, 2020). The risk of unsupported grief is exacerbated when a 'one-size-fits-all' approach to grief services is adopted that does not recognize specific needs.

#### **Indigenous Peoples**

Indigenous Peoples carry a particularly heavy burden of grief from causes such as colonialism, residential schools, intergenerational trauma, dispossession, racism, and violence, which has compounded the grief experienced by Indigenous Peoples. There is growing recognition of the significant impact unattended grief is having upon individuals and communities, along with the lack of resources and services developed by and for Indigenous Peoples. Whether in remote communities or urban areas, Indigenous Peoples may find it difficult to access culturally safe grief support. "When an Indigenous person is in the health system, particularly with palliative care, they're in a system that is not supportive of their culture and identity. And grief and bereavement within the system is even less supported" – Consultation participant

#### **Black and Racialized Communities**

Black and racialized communities experience grief disproportionately due the effects of anti-Black racism. The resulting intergenerational trauma has compounded the grief experienced within Black and racialized communities. We currently lack a holistic approach that is led by and for Black and racialized peoples for their respective communities, and includes interdepartmental agency cooperation.

"In the cultural context of African and Caribbean Black men specifically, there's this idea that they have to be strong and not show emotions; they don't necessarily process their grief because their environment doesn't allow them to" – Consultation participant

#### **Cultural and Linguistic Minorities**

Newcomers to Canada and those from various cultural backgrounds noted that available supports often do not align with their cultural practices or aren't provided in their preferred language. Many refugees have very specific experiences of grief and trauma that need to be better understood and responded to. Grief can be expressed in culturally specific ways, and a lack of culturally safe services leave many feeling alienated. One organization shared that when people from some cultural communities access support groups they often don't return after the first session because "no one looks like them" or understands their experiences.

"A lot of refugees/recent immigrants feel the grief of not being back home, of losing their loved ones, but a lot of times they're not even experiencing that grief because they're in such high crisis in the moment." – Consultation participant "If a child learns about grief before experiencing it, we're also teaching compassion: compassion is what will change the world" – Consultation participant



#### **Children and Youth**

Children are among the hidden mourners in our society with little understanding by the public of how they grieve, and little attention paid to their needs in relation to grief. It is estimated that one in 14 children will experience the death of a family member before they turn 18 (Burns et al., 2020). According to a US study that tracked respondents for 7 years, bereaved youth are more likely to consume drugs and alcohol, engage in violence, experience depressive symptoms, possess diminished self-esteem, have more suicidal thoughts and attempts, and view their overall health less favourably (Pham et al., 2018). Families and professionals in the consultations both pointed out that children's grief is poorly understood many children lack access to appropriate support. Parents and guardians often overlook children's grief, not knowing how to recognize or support it. Schools seldom have grief-trained staff, and community programs for grieving children and youth are scarce in many regions of Canada. Given the long-term risks bereaved children and youth face, participants urged more attention to school-based grief resources and specialized programs for young people.

#### Two-Spirit and LGBTQ+

While Canadian attitudes and beliefs about 2SLGBTQ+ communities have become more positive in recent years, oppression and discrimination, including homophobia and transphobia, continue to complicate and deeply impact the experiences of grief in 2SLGBTQ+ communities (Lucas et al., 2022). Grief in 2SLGBTQ+ communities is often layered with other losses, such as changes in identity or relationships and cumulative losses and may include trauma. Grief experienced by those who identify as 2SLGBTQ+ may go unacknowledged or dismissed, impacting the ability to grieve.

"Communities are being devastated. A whole generation of gay men and a whole generation of drug users died in the AIDS crisis" – Consultation participant

#### Men

Gendered differences in grief experiences have long been noted in the literature (Kiaos, 2024). Existing services have not fully grappled with the specific challenges of reaching and supporting men. Many grief specialists expressed concern that existing services are not meeting the needs of grieving men. Some men do not benefit in the same way and to the same extent from grief groups which are disproportionately attended and led by women. According to the CGA's 2023 national survey, men were much more likely to say that they did not find existing supports helpful. More than one-third of men found their family physician unhelpful, compared with fewer than one-in-five women. Nearly 50% of male respondents found hospice grief programs unhelpful compared with 10% of women. Services that emphasize introspection, emotional exploration and talk may not be effective in supporting some men, therefore other approaches such as the "Men's Sheds" movement merit consideration.

"As a man you can be strong for your family, but I do highly recommend letting them see you grieve. Show them you care, and you're hurting as well." – Webinar panelist

#### **Rural and Remote Communities**

People in rural areas described significant barriers to support. There may be no local grief counsellors or groups and where there are local providers, familial or friend relationships can be barriers to access. Travel to urban centres for counselling or retreats is not always feasible. The pandemic pivot to online counselling and grief support groups, made grief support more accessible to some, however, connectivity issues and discomfort with technology may be barriers to building the personal connection that underpins services.

*"We don't have access to a lot of in-person stuff outside of the city: there's a real urban-rural divide" – Consultation participants* 

#### **Provider grief**

Grief specialists, emergency responders, funeral professionals and volunteers often experience compassion fatigue and burnout from continual exposure to loss, but stigma and a lack of grief literacy prevents many from reaching out and results in their grief being overlooked by employers. Despite many struggling with unrecognized COVID-related trauma on top of the day-to-day grief of patient deaths, they are seldom provided with the support they need, are rarely offered debriefings after a death, and may have no time in their workday to consider the impact a death has had on them. Healthcare providers and emergency responders are experiencing high rates of burnout and suicide and many are leaving their professions.

#### Incarcerated individuals

Grief in the justice and correctional system is often completely ignored. People in prisons or detention experience many losses – of family, friends or other inmates, of freedom, of identity - yet have severely limited opportunities to grieve. A Scottish study on the experiences of 33 young men in custody found that almost all had been bereaved, two thirds had suffered substantial bereavement (four or more deaths), and more than three-quarters experienced traumatic bereavement (Youth Justice Improvement Board, 2017). Inmates are often not permitted to attend funerals or may not be informed of family deaths in a timely way nor are they allowed to access online supports. Grief must often be kept brief and hidden due to prison culture. Unresolved grief can complicate rehabilitation and contribute to mental health crises or re-offending behaviors upon release.

#### Those experiencing non-death loss

Non-death losses are often not recognized or identified as requiring support, despite the devastating and often long-term impacts on individuals and families. Few if any publicly available supports exist and constructive approaches aren't always well developed.

## Grief and mental health: Understanding the dichotomy

"When you talk about putting things under mental health, there can be a stigma with seeing a mental health counselor." – Consultation participant

Grief and mental health are commonly conflated by the public, policy and decision-makers, healthcare systems, Employee Assistance Programs, and mental health practitioners. This is problematic as traditional mental health interventions aimed at individuals with depression and anxiety are not effective or appropriate for people grieving and may inadvertently cause harm.

Grief is unique and while the Government of Canada made significant investments in mental health at the height of the pandemic, grief falls outside the mandate of the Canadian Mental Health Commission and mental health associations. Current mental health assessments do not include grief, and investments do not extend to grief supports. Grief requires specific investments and prioritization at federal, provincial, territorial and municipal levels.

## Implications of unsupported grief

Grief falls perilously between the cracks of our health, social care and education systems – grief is a natural, unavoidable experience, not a problem to be solved. Yet for those struggling in grief without proper support it can have serious physical and mental health consequences. Insufficient grief services can result in increased burden downstream for health and social care systems; it can affect productivity, absenteeism and job retention for private and public sector employers; and affects the economy. Anecdotally, there are much higher rates of absenteeism in primary and secondary schools following the Covid-19 pandemic which may be attributed to a downstream effect of insufficient grief support and resources for children, families and teachers during and post pandemic. Similarly, college and university instructors note heightened levels of anxiety, inability to meet deadlines and increased retention issues which can be the result of a number of contributing factors including climate change, world events and anxiety about the future.

Many of the traditional sources of support for people who are grieving, including family and extended family, close communities, religion, spiritual practices and social rituals are less present in the lives of many Canadians than they once were. Although there are many hospices, health care agencies, government organizations, notfor-profits, "compassionate communities", faith-based institutions, community groups, social workers and private mental health practitioners who strive to fill the gap, there is nothing amounting to a network, much less a system for supporting those who are grieving.

Unsupported complex grief leads to negative mental health outcomes, and yet investments in mental health do not extend to grief. As a result, grief services are completely overwhelmed by the volume and complexity of grief and continue to be unable to meet skyrocketing demand.

Bereaved individuals are at increased risk for numerous adverse outcomes including prolonged grief disorder, mood and anxiety disorders, existential distress, decreased work productivity, adverse health behaviours, neglect of health care, cancer, heart disease, suicide, and death (Lichtenthal et al., 2024).

### Research

Compared with other issues of comparable concern, such as mental health, there has been extremely little research funding in Canada allocated to learning more about grief. Most of the key research has taken place in other countries. As a result, little is known about the applicability of such findings in the context of Canadian cultures and institutions. There is no dedicated funding for grief research, nor is there a coordinated national research plan. Little is known about the grief experienced by Indigenous, Black and other racialized or refugee communities, or men, in Canada which could inform rethinking of programs and processes.

Additionally, Canada lacks data about grief. While Canadian research is testing the Public Health Model of Bereavement Support in the Canadian context (Cadell et al., 2025), there is currently no systematic data collection to determine need, access or utilization of grief services in Canada. Grief is not included as an indicator by Statistics Canada or the Canadian Institute for Health Information.

As our understanding of grief broadens and we recognize many areas of un-supported or undersupported grief, new approaches, techniques, and services need to be explored. Non-death grief is generally not well understood. Emerging areas of concern in Canada such as grief related to BIPOC, Covid-19, economic impacts on individuals, families and society, MAiD, the environment and the toxic drug supply crisis require further research. Best grief practice in Canada depends on the funding of research in grief and loss.

## Federal policy agenda

Canada faces a quiet yet growing epidemic of grief and, from a public policy perspective, lags far behind countries with similar approaches to health care. Governments have become more attentive to addressing mental health issues, including trauma. However, there exist few policy levers to address grief, certainly not when it strikes at scale. Yet grief, if unattended to, may lead to outcomes that are not only serious and costly to those affected but to society and the economy. Research shows grief can increase the risk of health care utilization by 20% to 30% (Miles et al., 2014).

While the Constitution Act of 1982 and the British North America Act 1867 that preceded it assigned responsibility for healthcare to the provinces, the *Canada Health Act* gives the federal government responsibility for five principles of healthcare: comprehensiveness, universality, affordability, accessibility and public administration. The Government of Canada has at best dipped its toe into grief policy in the last ten years. Health Canada recognized grief as a part of a comprehensive palliative care approach in Health Canada's Framework for Palliative Care in Canada (2018), identifying the following priorities related to grief, that remain to be addressed:

- Examine how equitable access to bereavement supports and services can be established
- Build greater care capacity in communities to alleviate pressure on health care systems and caregivers.

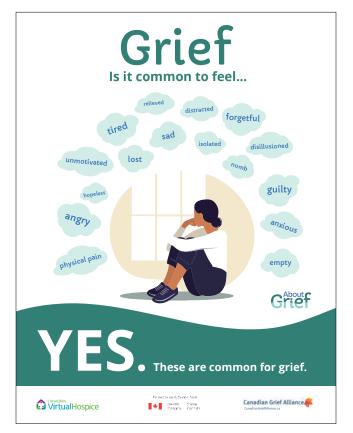


 Develop services related to anticipatory grief and adjustment to losses before death to complement existing bereavement services.

Grief education was identified as a priority in the 2021 Budget. Health Canada provided \$1 million to CGA to develop a suite of foundational knowledge tools and a *Next Steps Action Plan for Grief*. This was a transformational action which allowed CGA to begin the essential work of increasing grief literacy in Canada. "When a child is born we get a year of maternity leave; that same child dies and you get four or five days leave." – Consultation participant

Through the leadership of Matt Jeneroux MP, Royal Assent was received in September 2021 for his Private Members' Bill *C-220 An Act to Amend the Canada Labour Code* to extend bereavement leave to eligible workers to a maximum of 10 days following the death of an immediate family member. However, the majority of workers in Canada are subject to the Labour Codes in their province or territory and are still only afforded between three and five days of bereavement leave.

Despite these challenges, the tone of the consultations was hopeful. Organizations and individuals across Canada are ready to take action, be a part of the movement, and help strengthen our capacity to respond to grief. There is growing momentum to break the silence around grief and to build a more compassionate, well-supported nation for the bereaved. The ideas and concerns raised in these sessions directly inform the recommendations of this report.



## Recommendations

#### 1. Improve grief literacy

Build Canadians' grief literacy through targeted public awareness that puts a premium on community engagement. Implement public awareness campaigns that leverage all levels of government and stakeholders. Activate, empower and support communities to #MakeGriefAPriority. Focus on expanding Canadians' capacity to understand and respond to their own grief, to support others, to be available services, to know when they or someone else needs help and where to find it. Increase awareness of programs and services. Successful models of engagement and public education approaches in Canada and other jurisdictions are identified, considered and, where appropriate, scaled and spread. Metrics are captured and evaluated to inform approaches and target groups and locations.

#### **Promising Practice:**

**Grief Matters** offers a promising model for public education and awareness which actively supports people who are grieving through engaging individuals, communities and media. Based in Nova Scotia, a weeklong program of "grief gatherings" has been offered in September of 2023 and 2024. The gatherings are generated and sustained by local communities and included walks, dinners, workshops and artistic displays.

#### **Promising Practice:**

**Space for Grief** is an internationally-recognized public art installation and movement that explores community bonding and healing through grief. The initiative aims to destigmatize the expression of grief, as well as inspire and provoke important social conversations. Successful installations have been held at Toronto's Reference Library and more recently Evergreen Brick Works, in Toronto.

#### **Promising Practice:**

**Good Mourning Festival** invites the public to come together to reclaim death as a special part of life. This Toronto-based event is dedicated to exploring and honouring the significance of mourning in public spaces. In a world where grief is often private and hidden, the Good Mourning Festival celebrates the profound communal aspects of mourning. Through workshops, food, shopping, art installations, walks and more, a space is created where grief can be expressed, shared and understood.

#### **Promising Practice:**

#### **Canadian Alliance for Children's Grief**

provides regular opportunities for grief serving organizations to meet, learn, share and be inspired through lunch and learns, discussion hubs, working groups. They also offer an annual virtual symposium with the purpose of improving grief literacy by providing a forum for professionals across Canada, allowing people to connect and learn more about children's grief and to learn how to provide better support in communities.

#### 2. Adopt a public health approach

Canadians need access to a range of grief services when they need them, whereby need and risk are matched to a continuum of services that recognizes the sustained nature of grief. Canada needs to understand better how to support grief in general but especially in underserved populations such as Indigenous Peoples; immigrants and refugees whose circumstances are often complex; those who are precariously housed; and, men, who disproportionately don't seek support. Meeting the needs of Indigenous, Black, and other racialized communities is a priority.

- a. Health Canada works with CGA and grief stakeholders to develop a Grief Strategy.
- Engage provinces, territories and stakeholders in defining approaches to increase access to grief services.
- c. Engage Indigenous, Black and racialized communities in consultations to understand needs and culturally safe approaches, and to co-design tools.
- d. Identify innovative approaches and invest in scale and spread. Seed funding to support increased grief services for three years to priority populations as a pilot project.

- 3. Improve supports to people working and volunteering in grief and intersecting roles. Build capacity and confidence for supporting their own and others' grief by strengthening the infrastructure of contemporary knowledge, education, training and research that they can rely upon.
  - a. Expand training and education opportunities in school curriculum, as requirements for degrees in healthcare, and part of continuing education and available for informal care providers
  - b. Establish competencies in professional and volunteer grief support.
  - c. Develop standardized training for volunteers.
  - d. Encourage health and related faculties to include constructive grief support as a core part of curricula to build capacity to attend their own grief and that of the communities they serve.
  - e. Develop training with and for first responders to build capacity to attend to the communities they serve as well as their own grief.
  - f. Expand and support the National Grief Network of people working in grief and intersecting and adjacent roles established by the CGA through this contribution agreement.
  - g. Develop professional grief competency frameworks that are reflective of the various contexts where grief support is provided.

#### 4. Encourage progress in deepening our understanding of how grief is responded to in Canada

- a. Explore national data collection systems.
- b. Develop a grief research network.
- c. Dedicate funds to support grief research of which these is a serious deficit in Canada.

- **5. Establish The Canadian Centre for Grief** An adjunct to the Canadian Grief Alliance will serve a national coordinating function for grief policy, program support, implementation and evaluation, in collaboration with national, regional and local organizations. The Centre will be tasked with implementing the recommendations as well as:
  - a. Support federal, provincial, territorial and local policy responses to grief.
  - b. Facilitate a national grief network (already started through CGA)
  - c. Establish national professional standards and competencies and manage regulatory and licensing requirements.
  - Identify and deliver training and educational programming for professionals, healthcare providers, first responders, volunteers and the public. Encourage health science and related faculties to include grief training in their curricula. Make training universally available for people working in health and grief adjacent roles.
  - e. Coordinate emergency responses to escalating grief needs (e.g. pandemics, communities devastated by wildfires, mass casualty events).
     Explore collaborations with Public Safety Canada to support holistic responses to the grief experienced in local, regional and national emergencies.

# Ideas to support someone who is grieving

Acknowledge. Show up. Check in.

#### Acknowledge:

The loss "I'm sorry this happened to you."

The grief "I won't pretend to know what you're going through or how you feel, but I'm here for you.



#### Support:

**Offer to spend time together** "Would you like some company? We could go for a walk."

Support how they need to grieve "Whatever you're feeling is alright. I'm here even if you don't know what you need."

Be specific with offers of help "Can I walk your dog? Bring you dinner? Mow your lawn?"

Keep checking in "Just letting you know I'm thinking of you."

> Know the importance of small gestures "You're welcome to join us for dinner if you're feeling up to it."

Show you care, follow their lead, and listen "If you would like to talk, I'm here to listen."

**Don't let discomfort stop you** "We don't have to talk. We can just be together."

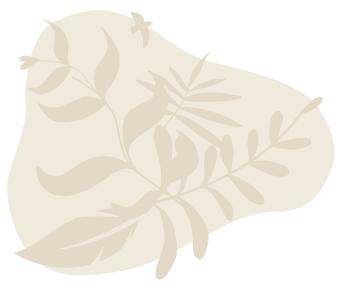
Canadian Grief Alliance 🌾

# In Conclusion

Canada is at a pivotal moment in its understanding and response to grief. The insights gathered through extensive consultations and surveys clearly indicate a pressing need for a systemic shift in how grief is acknowledged, understood, and supported across the nation. The current fragmented and under-resourced landscape of grief services is simply not sufficient to meet the growing volume and complexity of grief experienced by Canadians, especially in the wake of events like the Covid-19 pandemic and other national tragedies.

This Next Steps Action Plan outlines foundational actions required to fill existing gaps and raise Canada to be a leader in grief literacy alongside the UK and Australia. Rooted in a public health model, the proposed strategic approach, offers a comprehensive roadmap to address these challenges. By establishing a continuum of accessible and culturally safe services, investing in professional training, fostering robust research and data collection, and creating a national coordinating body, Canada can move towards a more compassionate and resilient society. By prioritizing grief literacy, we equip people with the skills and knowledge to compassionately support each other. The success of international exemplars demonstrates that a coordinated, multifaceted approach is not only feasible but essential to achieve a holistic, effective array of grief support.

The next steps towards a grief-informed Canada requires the collective commitment and sustained effort of governments, organizations, business, communities, and individuals. The momentum generated through initiatives like the CGA's *Advancing Grief Literacy in Canada* project and the widespread desire for change expressed by Canadians provide a strong foundation for this transformation. By embracing these recommendations, Canada can ensure that grief is no longer a hidden burden, but an experience met with understanding, support, and the resources necessary for individuals, families, and communities to navigate loss. This report is an important step, the next step needs to be a bold comprehensive grief strategy.



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## Appendix – Organizations Consulted

- AIDS Bereavement and Resiliency Program of Ontario
- Baycrest
- BC Centre for Palliative Care
- BC Hospice & Palliative Care Association
- Bereavement Helpline / BC Victims of Homicide
- BIPOC Healing and Wellness Centre
- Bruyère Research Institute
- Burnaby Hospice
- Butterfly Run Ottawa
- Canadian Alliance of Grieving Children
- Canadian Association of Psychological Oncology
- Canadian Association of Social Workers
- Canadian Association of Spiritual Care
- Canadian Cancer Society
- Canadian Palliative Care Nurses Association
- Canadian Resource Centre for Victims of Crime
  Canuck Place
- Centre for Research and Innovation for Black Survivors of Homicide Victims
- CGA's National Consultation Committee
- Children's Grief Foundation of Canada
- Coalition of Community Health & Resource Centre of Ottawa
- Compassionate Ottawa
- CVH National Elders and Knowledge Carriers Circle
- End of Life Doula Association

- Funeral Associations (British Columbia and Alberta)
- Grief Australia
- Grief Stories
- Hospice Northwest
- Hospice Palliative Care Ontario
- Institute for Clinical Evaluative Sciences (IC/ES)
- Irish Hospice Foundation
- Island Health Authority
- Lakehead University
- Le Réseau québécois de recherche en soins palliatifs et de fin de vie (RQSPAL)
- Lighthouse for Grieving Children & Families
- Long-term care Community of Practice
- MAiD House
- McMaster University
- Mom's Stop the Harm
- Multicultural Seniors Network
- Palliative Care Coalition of Canada (Canadian Palliative Care Nurses Association, Canadian Society of Palliative Medicine, Canadian Society of Respiratory Therapists, SE Health, Canadian Breast Cancer Network)
- Pregnancy and Infant Loss Network (PAIL Network)
- Space for Grief
- Sue Ryder
- Victoria Hospice
- Western University





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