# **COPING WITH LOSS**

## A 12-Week Bereavement Program

**Facilitator Guide** 

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## **COPING WITH LOSS: A 12-Week Bereavement Program**

#### **Facilitator Guide**

This program is adapted from **Coping with Loss Workbook**, **2nd Edition** by Cassie Jewell and has been expanded to include new assessments, group exercises, and facilitator resources.

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### **BEFORE GETTING STARTED**

#### **Group Goals**

The primary goals of this group are to provide validation and support while helping participants adjust in healthy ways after a loss. Desired outcomes include reducing the intensity of grief-related distress (to lower the risk of developing prolonged grief disorder), improving overall daily functioning, strengthening both perceived and actual social support, and increasing the use of effective coping strategies. Progress toward these goals will be measured by administering a standardized assessment at the start and end of the group to track changes in grief symptoms, functioning, and coping.

#### **Group Advertisement**

This group may be advertised using a multi-method approach to reach individuals who may benefit from participation. Outreach strategies include:

- Posted flyers in common areas, waiting rooms, and community bulletin boards (flyer template included in the Appendix)
- Social media posts to raise awareness and encourage referrals
- Word of mouth referrals from clinicians, case managers, and other staff who
  work directly with individuals experiencing grief-related challenges

A combination of strategies will help ensure that information about the group is widely accessible to potential participants and referral sources.

#### **Screening**

(See Screening Guidelines)

#### **Group Format**

This program is designed as a 90-minute weekly closed group. Because grief work can be sensitive and evoke strong emotions, a closed group helps create a stronger sense of safety and trust among participants. Each session builds on the previous one, so consistent attendance is important for the group to be effective.

#### **Facilitation**

This program is best delivered by two facilitators. In a co-facilitation model, one facilitator leads the session while the other observes group dynamics and monitors nonverbal communication. If a participant becomes distressed or escalated and needs individual support outside the room, one facilitator can step out with them while the other continues leading the group. Co-facilitators should debrief after each session to share observations and insights, which can strengthen future sessions. Having two facilitators also increases the likelihood that important verbal or nonverbal cues will be noticed, as one person may catch something the other might miss.

Facilitators should be licensed mental health professionals or certified grief counseling specialists with experience in both group therapy and grief counseling. While no formal training program is required to run this group, facilitators are expected to have a solid understanding of grief theories and to thoroughly review the curriculum in advance, including practicing through role-play to build confidence and preparedness.

### **Confidentiality Forms & Limits of Confidentiality**

Group participants must sign a confidentiality agreement form prior to group participation. (See *Confidentiality Agreement Form*.) Confidentiality forms should be signed and collected during the screening process.

#### Time of Day

Evening sessions often work best for participants who work during the day, but keep in mind that people may arrive tired or stressed.

#### **Fee Structure**

Decide whether the group will be offered free of charge or if there will be a participation fee. If charging a fee, consider offering a sliding scale to make the group accessible to individuals with financial constraints.

#### **Childcare**

- Determine whether you are able to provide childcare services.
- If childcare is not available, decide whether young children may remain with parents during the group, understanding this may affect the group dynamic.

#### **Transportation**

- Consider accessibility: Is the group location near public transportation?
- If feasible, explore offering bus tokens, passes, or cab vouchers to participants without reliable transportation.

#### **Group Space**

Create a safe, comfortable, and soothing environment.

Su	ıgge	estions:
		Decorate the room with calming colors (e.g., soft greens and blues).
		Consider offering coffee, tea, or light refreshments to create a welcoming
		environment.
		Arrange enough comfortable chairs for all participants in a circle or semi-circle to
		promote equality and connection. Position facilitators across from each other, not
		side by side.
		Ensure a table (or tables) is/are available for activities and materials, plus
		refreshments.
		Stock the room with pillows, tissues, and bottled water for participant comfort.

Ensure the room has enough outlets and space for audio/visual equipment, such
as a large-screen smart TV or a blank wall for a projector. If standard equipment
isn't available, consider using a mini projector that connects to a phone to display
the videos.
Have a large whiteboard with dry erase markers.

#### Participant Workbook Binder

Prepare participant workbook binders with numbered tab dividers (one for each session). Include the participant workbook cover, group flyer, copy of signed confidentiality form, group rules/regulations, scored pre-test, and all group materials (assessments, handouts, worksheets, journaling pages, and other materials) organized in the corresponding sections (see Appendix for additional and bonus materials). Instruct participants to bring their binders to every session. Facilitators may either assemble the binders in full before the group cycle begins or distribute materials weekly to prevent participants from working ahead.

### **ANATOMY OF A SESSION: GROUP STRUCTURE & FORMAT**

90 minutes (including a 10-15-minute break)

2-3 minutes	Review guidelines and provide brief overview of session
15-30 minutes	Group members check in by responding to structured check-in questions (limit sharing to 2-3 minutes per person, depending on the size of the group)
	Structured Check-In: (Questions pre-written on the board or posted in group room/included in binder)  1. One word for how I'm feeling right now  2. One high and/or low point this past week  3. One coping strategy I tried—helpful or not  4. If my grief had a voice today, it might say or share another thought that feels true right now
5-10 minutes	Video (or multimedia component)
10-15	Break
minutes	
15-20 minutes	Education with handouts and/or group exercise
15-20	Open discussion (processing)
minutes	
10 minutes	Safety check and wrap-up

At least one facilitator should remain available after each session in case a participant is feeling unsafe, overwhelmed, or retraumatized and requires additional support. This time can be used for grounding, brief check-ins, or providing referrals if needed. Whenever possible, both facilitators should stay so that one can attend to an individual while the other manages any logistical tasks or group follow-up.

### **TIPS & TROUBLESHOOTING**

#### 1. Use a timer during check-ins.

Set it to play a soothing tone or sound once the time is up as a gentle reminder that it's time to wrap it up. This helps keep the group on schedule without putting facilitators in the role of "cutting people off."

#### 2. Address dominating or guideline-breaking behavior early.

If a participant is dominating discussion or disregarding group guidelines, address it gently and immediately. Politely interrupt—acknowledging the interruption—and explain that your role is to protect the group's safety and balance. Calmly describe the behavior you're noticing and link it to the specific guideline being overlooked. This not only redirects the behavior but also builds trust with other group members, showing that the space is actively safeguarded.

### 3. Handle recurring behavior privately.

If a behavior becomes a recurring issue, arrange a private meeting to discuss the participant's fit for the group. For example, if they consistently dominate, validate their need to share while suggesting they may benefit from additional individual counseling where they can receive more time and attention. If their behavior is disruptive or inappropriate for the setting (e.g., sharing sexually explicit content, insulting others, or using the group to preach or give unsolicited advice), approach the conversation with curiosity and empathy, but clearly explain that they may need to pause their participation until they are able to follow the group's guidelines.

#### 4. Normalize silence.

Some participants may be quiet or reluctant to speak. Gently invite—but never pressure—them to contribute. Let the group know that listening can be just as valuable as sharing and that silence is welcome.

#### 5. Redirect side conversations.

If participants start whispering or talking over others, pause and kindly remind them of the guideline that one person speaks at a time to ensure everyone feels heard.

#### 6. Manage time creep during discussions.

Discussions can run long when emotions are high. Use gentle time cues (e.g., "Let's take two more comments, then we'll move on") to keep the group on track while still validating input.

#### 7. Prepare for emotional overwhelm.

If someone becomes tearful, panicked, or dissociates, pause the discussion. Offer grounding techniques (deep breathing, sensory grounding) and ask if they'd like to step out briefly with a facilitator. Always have crisis resources on hand.

#### 8. Debrief after sessions.

Always debrief with your co-facilitator after group. Discuss any dynamics you noticed, concerns about specific participants, and what went well or could be improved for next time.

## PRINTING & ASSEMBLY OF MATERIALS

Sugge	ested materials:
	1.5" or 2" 3-ring binders with clear cover insert Numbered tab dividers (1-12) for each binder
Front	ested Participant Workbook binder contents and order: of binder: Participant workbook cover placed in clear cover insert Group flyer with group time and location Group Rules (see Appendix) GROUP HANDOUT 1: How Do Grief Therapy Groups Help? Signed confidentiality agreement (optional) Scored Pre-Test Assessment (optional)
	Assessment 1.1 Expressions of Grief Check-In Questions form Session 1 Notes form GROUP HANDOUT 1: How Do Bereavement Therapy Groups Help? HANDOUT 1: Grief Misconceptions WORKSHEET 1: LOSS EVENTS CHECKLIST GRIEF SUPPORT & CRISIS HELPLINES Journal pages
	Check-In Questions form Session 2 Notes form Assessment 1.2 Where Am I In My Grief? HANDOUT 2: DYING FROM A BROKEN HEART Journal pages
Section	

	GROUP EXERCISE HANDOUT: "Grief in Common" (Optional) Journal pages
	Check-In Questions form Session 5 Notes form Assessment 1.3 Grief, Depression, PTSD, or Prolonged Grief HANDOUT 5: DIFFERENT TYPES OF GRIEF HANDOUT 6: GRIEF VS. DEPRESSION
	Journal pages
	Check-In Questions form Session 6 Notes form HANDOUT 7: TASKS OF MOURNING Journal pages
Section	Check-In Questions form Session 7 Notes form Journal pages
Section	
	Check-In Questions form Session 8 Notes form Assessment 1.4 Grief Self-Care Assessment Journal pages
Section	on 9
	Check-In Questions form Session 9 Notes form GROUP HANDOUT 2: Meditation Script & Resources Journal pages
Section	
	Check-In Questions form Session 10 Notes form HANDOUT 8: THEORIES OF GRIEF—The Continuing Bond Theory Journal pages
Section	
	Check-In Questions form

	Session 11 Notes form
	Journal pages
Section	on 12
	Check-In Questions form
	Session 12 Notes form
	Journal pages
End-d	of-Workbook Materials
	GRIEF SUPPORT & CRISIS HELPLINES
	Video List
	Bonus materials
	Resources
	Acknowledgements
	References

### **REQUIRED MATERIALS BY SESSION**

#### **SESSION 1:**

- Name tags (optional)
- Pens/markers
- Small colorful sheets of paper or index cards
- Group "Hope Jar" (or large container)
- Copies of Assessment 1.1 Expressions of Grief
- Copies of GROUP HANDOUT 1: How Do Bereavement Therapy Groups Help?
- Copies of HANDOUT 1: GRIEF MISCONCEPTIONS
- Group Activity 2.1 Hope Jar (Facilitator Guide)
- Copies of WORKSHEET 1: LOSS EVENTS CHECKLIST
- Copies of GRIEF SUPPORT & CRISIS HELPLINES
- Video: Group Therapy: What You Need to Know https://youtu.be/a7tsLHKuQCU (3:08 minutes)
- Video: Helping with Grief & Loss https://youtu.be/Rkod3n-ottM (4:09)

#### **SESSION 2:**

- Pens
- Copies of Assessment 1.2 Where Am I In My Grief?
- Copies of HANDOUT 2: DYING FROM A BROKEN HEART
- Group Activity 2.2 Memory Circle (Facilitator Guide)
- Video: How Grief Affects Your Brain and What to Do About It https://youtu.be/eEcaUhxAH2g (3:08)
- Video: Broken Heart Syndrome: The Physical Symptoms of Grief https://youtu.be/WqJnoEb2f00 (8:01)

#### **SESSION 3:**

- Large sheets of cardstock paper (enough for each group member)
- Magazines
- Scissors
- Glue sticks (or rubber cement)
- Markers
- Stickers
- Group Activity 2.4 Coping Collage (Facilitator Guide)
- Video: The Grieving Process: Coping with Death https://youtu.be/gsYL4PC0hyk (4:12)

#### **SESSION 4:**

• Copies of HANDOUT 3: THEORIES OF GRIEF—Stage Theories

- Copies of HANDOUT 4: The Stages of Dying & Grief
- Group Activity 2.5: Grief in Common (Facilitator Guide)
- Copies of GROUP EXERCISE HANDOUT: Grief in Common
- Video: 5 Things About Grief No One Really Tells You <a href="https://youtu.be/8pT6LQ-mZ3k">https://youtu.be/8pT6LQ-mZ3k</a> (6:41)

#### **SESSION 5:**

- Copies of Assessment 1.3 Is It Grief, Depression, PTSD, or Complicated Grief?
- Copies of HANDOUT 5: DIFFERENT TYPES OF GRIEF
- Copies of HANDOUT 6: GRIEF VS. DEPRESSION
- Video: What Is Depression? https://youtu.be/z-IR48Mb3W0 (4:28)
- Video: What Is Complicated Grief https://youtu.be/wJgviSyPz6I (1:05)
- Video: What Are the Different Types of Grief & Loss? https://youtu.be/HDSOVwrc4bl (2:04)

#### **SESSION 6:**

- Copies of HANDOUT 7: TASKS OF MOURNING
- Group Activity 2.6 Memory Box (Facilitator Guide)
- Small cardboard or wooden boxes (one for each participant)
- Colorful slips of paper
- Markers
- Pens
- Stickers
- Twist ties
- Short pieces of thin ribbon or string
- Video: What is the Tear Model of Grief? The 4 Tasks of Mourning in Grief https://youtu.be/QA24RGXPBiE (15:34)

#### **SESSION 7:**

- Group Activity 2.7 Shifting Roles Map (Facilitator Guide)
- Pens/markers
- Sticky notes
- Video: 5 Ways GRIEF Can Actually HELP You Rediscover Yourself https://youtu.be/t1Xh6b3Q8k8 (9:24)

#### **SESSION 8:**

- Copies of Assessment 1.4 Grief Self-Care Assessment
- Group Activity 2.8 (Facilitator Guide)
- Dry erase markers
- Pens/markers
- Colored index cards

- Stickers
- Group Activity 2.9 (Facilitator Guide)
- Copies of WORKSHEET 2: SELF-CARE IMPROVEMENT PLAN
- Video: THE CHOICE (Short Animated Movie) https://youtu.be/\_HEnohs6yYw (3:27)
- Video: How To Practice Self-Care During Grief https://youtu.be/P0UhAO2tEJo (5:47)

#### **SESSION 9:**

- Copies of GROUP HANDOUT 8: Meditation Scripts & Resources
- Video: Why Mindfulness is a Superpower https://youtu.be/w6T02g5hnT4 (2:43)
- Video: RAIN and Grieving with Tara Brach https://youtu.be/-aMbhK3qlLU (10:48)
- Video: 10-Minute Mindfulness Meditation—Letting Go https://youtu.be/syx3a1 LeFo (10:35)
- Audio only: https://www.mindful.org/a-10-minute-guided-meditation-for-workingwith-grief/ (12:37)

#### **SESSION 10:**

- Copies of HANDOUT 9: THEORIES OF GRIEF—The Continuing Bond Theory
- Group Activity 2.11 Legacy Stones (FACILITATOR GUIDE)
- Smooth stones with flat surfaces (enough for each participant)
- Paint markers or permanent markers
- Video: Continuing Bonds: Ideas for Cultivating an 'Inner' Relationship with Our Deceased Loved Ones https://youtu.be/KIFNMK8vp0E (3:12)

#### **SESSION 11:**

- Copies of GROUP WORKSHEET 2: Building My Support System
- Video: For Those Feeling Grief and Loneliness https://youtu.be/eG58uupYFWM (9:45)
- Video: 4 Level of Loneliness a Human Could Experience https://youtu.be/KmXfKX9e4Q4 (7:04)
- Video: Social Connection https://youtu.be/x1EYcVpQeeE (2:56)

#### **SESSION 12:**

- Copies of Coping with Loss: Post-Test Assessment
- Group Hope Jar (with goals from Session 1)
- Video: Understanding Post-Traumatic Growth https://youtu.be/CQflb5FdmvA?feature=shared (8:18)
- Video: Grief, Loss, & Post-Traumatic Growth https://youtu.be/vtzyou0RcUg (38.40)
- Copies of Post-Program Satisfaction Survey

### **SCREENING GUIDELINES**

This group is for individuals grieving the loss of someone or something significant—such as the death of a loved one, the end of a relationship, changes in health or ability, or other major life transitions—who would benefit from structured support. It is especially appropriate for those experiencing persistent or intense grief, emotional isolation, or difficulties with daily functioning. Participants should be open to exploring their grief in a group setting, practicing new coping strategies, and helping create a supportive environment where members can find validation, understanding, and hope.

**Group size:** Limit to **6–12 adult participants** for optimal interaction and support.

**Group composition:** Aim for a diverse group that includes participants of varying ages, cultural backgrounds, and different types of loss. A mix of experiences enriches group discussion and mutual support.

#### Screening Method

**Intake interview (15–30 minutes):** Conduct an in-person assessment using a structured checklist (*Loss & Bereavement Intake Form*) along with open-ended questions to evaluate appropriateness, readiness, and overall fit, as well as to screen for risk factors. During this meeting, review confidentiality guidelines and limits, and obtain a signed confidentiality agreement. This is also the time to discuss fees, childcare, transportation, and any other logistical considerations.

#### **Critical Elements**

#### Timing of loss

- For death-related losses, participants should be *at least* six months past the loss before joining.
- **Exceptions**: Individuals grieving the death of a child or a senseless/violent death often require individual, trauma-focused treatment before they are ready for a group setting and may need to be referred out.
- For non-death losses (e.g., divorce, breakup, job loss), participants may be eligible once at least one month has passed since the loss.

#### Clinical considerations

Facilitators should carefully screen potential participants to determine group appropriateness and reduce the risk of harm. Caution is warranted when individuals:

- Have experienced a very recent loss, as grief counseling within the first year may interfere with the natural grieving process
- Have experienced multiple or traumatic losses, which may require more individualized support
- Present with major mental health disorders that could impede group participation
- Present with **personality disorders** (particularly narcissistic, antisocial, histrionic, or borderline traits), as they may be more vulnerable in this setting *or* prone to disruptive or manipulative group behaviors

<ul> <li>Have individual sign authorization for emergency contact and develop individualized safety plan</li> </ul>	

## LOSS & BEREAVEMENT INTAKE FORM

(To be completed by clinician)

Cli	ent l	Information
	1.	
	2.	Date:
		Phone/Email:
	4.	Emergency Contact (name/relationship/phone):
L		
Lo	ss H	listory
		Who or what are you grieving? (Name and relationship)
	2.	Date of loss:
	3.	
	4.	Was the loss expected? ☐ Yes ☐ No
	5.	Were you present at the time of death or loss? ☐ Yes ☐ No
	٥.	If yes, please describe:
		ii yes, piedse describe.
lm	nact	of Loss
	1.	D ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
	•••	$\square 0 \square 1 \square 2 \square 3 \square 4 \square 5 \square 6 \square 7 \square 8 \square 9 \square 10$
	2.	How has this loss affected your emotions, thoughts, or
	۷.	behaviors?
		benaviors:
	3	Have you experienced other significant losses?
	٥.	□ Yes □ No
		If yes, please list (relationship or loss, approximate year):
		if yes, please list (relationship of 1035, approximate year).
Co	ninc	1 & Supports
CO		What have you found helpful in coping so far?
	١.	What have you lound helpful in coping so fall!
	2.	What makes coping more difficult?
		What makes coping more annealt.
	3.	Who do you turn to for support (e.g., family, friends, faith, professional support, etc.)?
	٠.	10 Journal 10 101 Capport (0.5., 1),, From 10 June 11 11 11 11 11 11 11 11 11 11 11 11 11
	4.	Do you feel you have enough support right now?
	••	☐ Yes ☐ No
		Explain:
		ьлрин.
Me	ntal	Illness & Risk
علىنا	1.	Have you ever been diagnosed with depression, anxiety, panic attacks, PTSD, or another
	٠.	Thave you ever been diagnosed with depression, anxiety, parite attacks, i feb, or another

mental health condition?

☐ Yes ☐ No

۷.	Have you ever experienced <b>hallucinations</b> or <b>delusions</b> ?  ☐ Yes ☐ No If yes, please explain:
3.	Do you use alcohol, drugs, or medication to cope with your grief?  ☐ Yes ☐ No
	If yes, please describe:
4.	In the past two weeks, how often have you had thoughts of harming yourself?
	□ Not at all □ Sometimes □ Often □ Daily
5.	Have you attempted suicide?
	☐ Yes ☐ No If yes, how and when?
6.	Have you ever been abused or been a victim of trauma?
	□ Emotionally □ Physically □ Sexually □ Violently assaulted □ Other:
	If yes, please explain (to the extent that you're comfortable):
7.	Are you currently seeing a counselor, psychiatrist, or attending a support group?
	□ Yes □ No
Ossila	If yes, who/where:
Goals 1.	for Group Participation  What do you hope to gain from this bereavement group?
2.	
3.	Are you able to commit to attending at least 9 of the 12 sessions? ☐ Yes ☐ No
Clinici	an Notes
	vations about readiness, appropriateness, risk level)

## **CONFIDENTIALITY AGREEMENT FORM**

As a member of this group,			
1. Keep group discuss I will not share wha		group outside of group meetings.	
		oup, but not the details of anyone	
else's story.			
2. Respect each mem			
members, or sessions.	s, screenshots, or reco	rdings of any group materials,	
•	t other aroun members	on social media or in public forums.	
3. Maintain a safe and	<u> </u>	on social media of in public forums.	
	pect and without judgme	ent.	
I understand that g	iving advice is optional,	not required.	
Limits of Confidentiality  While confidentiality is asset	ential there are some si	ituations where facilitators are legally	,
or ethically required to brea	inual, ulere are some si ik confidentiality:	ituations where facilitators are legally	
o. c , . c q c a c a. c.			
	`	ent, threats of violence, etc.)	
•	rmed abuse or neglec	et of a child, elder, or vulnerable	
adult	.l veguivement that cam	anala dia da dura	
	Il requirement that com	npels disclosure necessary to protect health or safety	,
• Medical emergenci	es where information is	necessary to protect nealth or safety	/
		num necessary information with the enever possible, facilitators will	
discuss this with the individ		erievei possible, lacilitators will	
Acknowledgment			
-	ledge that I have read a	and understood this confidentiality	
agreement. I agree to main			
· ·	. ,		
Name	Signature	Date	-

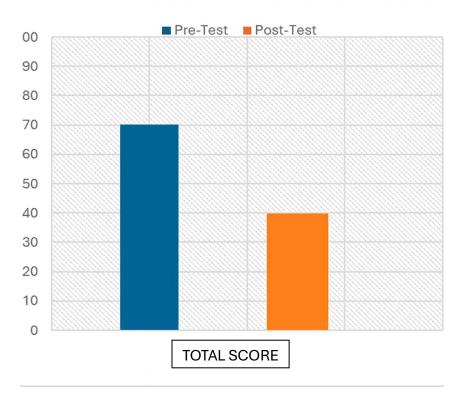
## COPING WITH LOSS: PRE/POST TEST ASSESSMENT

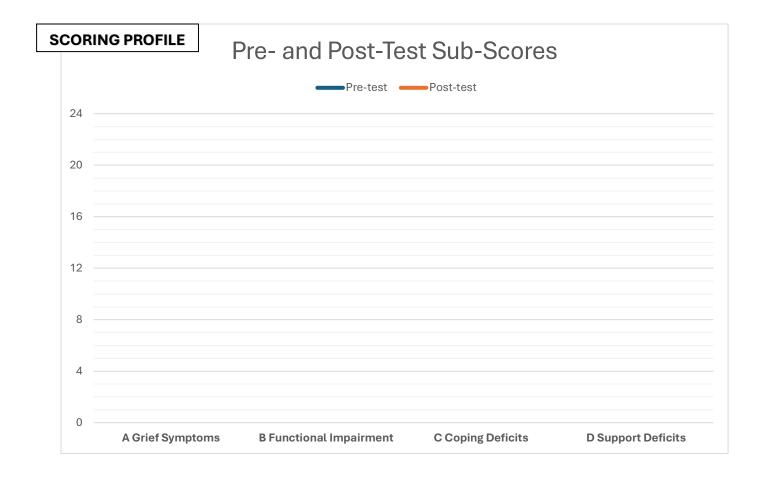
Participant name:	□ Pre-test □ Post-test
(Clinician-administered and scored)	
<b>Purpose:</b> To measure (1) grief symptom intensity, (2) level (4) perceived supports across the group cycle.	of functioning, (3) coping deficits, and
Instructions: Administer prior to Session 1 (pre	) and at the end of Session 12 (post).
Scale (0–4): 0=Not at all   1=A little   2=Somet	imes   3=Often   4=Nearly every day
(Reverse-score items marked R: 0=4, 1=3, 2=	2, 3=1, 4=0)
Part A: Grief Symptom Intensity (6 iten	ns)
1) I feel waves of intense sadness. 2) I feel emotionally numb or detached. 3) I experience yearning/longing for who/w 4) I'm preoccupied with the loss (and find i 5) Reminders trigger strong distress (e.g., 6) I feel guilty, angry, or "stuck" about the loger	hat I lost. t hard to think of other things). tears, panic, shut down).
Interpretation: Higher scores=more intense grief s	ymptoms
Part B: Level of Functioning (6 items)  1) I keep up with basic self-care (sleep, for 2) I can focus well enough to do daily tasks 3) My energy is too low to get through the 4) I miss or avoid important responsibilities 5) My social functioning is impaired. (I with 6) I engage in things that are enjoyable (examples of the social score) Subscale score: Su	s. (R=) day. s (work, bills, errands). draw/isolate).
Interpretation: Higher scores=greater impairment	reversed items reflect better functioning)
Part C: Coping Deficits (6 items)	
<ul> <li>1) I use at least one healthy coping skill da</li> <li>2) I can identify what I feel and name it wit</li> <li>3) I avoid or numb my feelings with substa</li> <li>4) I practice grounding or self-soothing wh</li> <li>5) I ruminate or replay "what if" thoughts th</li> </ul>	hout judgment. (R=) nces, food, or screens. en overwhelmed. (R=)

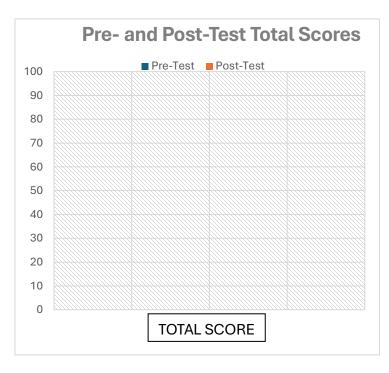
6) I schedule small, doable actions that support healing. (R=)  Subscale score: Sum of items (range 0–24)
Interpretation: Higher scores=coping deficits Lower=improvement, healthy coping  Part D: Perceived Supports (6 items)  1) I feel emotionally supported by at least one person. (R=)  2) I can ask for help when I need it. (R=)  3) People minimize or dismiss my grief.  4) I have access to community/professional support (church, therapy). (R=)  5) I feel alone in my grief.  6) I know specific supports I can use this week (who/what/when). (R=)  Subscale score: Sum of items (range 0-24)
Interpretation: Higher scores=low perceived support Lower=improvement, supports in place Single-Item Anchors (Report separately)
Overall grief distress today (0–10): Confidence I can cope this week (0–10):
Scoring & Interpretation
<ul> <li>Total score=A + B + C + D (range 0–96)</li> <li>Higher scores=more distress/impairment with deficits in coping and support</li> <li>Expect total to decrease from pre- to post-test during the group cycle.</li> <li>Meaningful change (rule of thumb):         <ul> <li>Subscale score decreases of 3–4 points indicate significant change in that area.</li> <li>Total score decreases of 8–10 points indicate overall significant improvement.</li> </ul> </li> </ul>
Scoring Profile Instructions:
On the post-test assessment form Scoring Profile page:  1. Plot pre- and post-test subscale scores:
Use a blue marker for pre-test scores and red for post-test.
Connect the pre- and post-test points for each subscale to create a line graph.
<ul> <li>2. Depict total score change:</li> <li>Create a bar graph with two bars: one for the total pre-test score (blue marker) and one for the total post-test score (red marker).</li> </ul>
<ul> <li>Label each bar with its corresponding score. (See example.)</li> <li>3. Indicate single-item anchor changes:</li> </ul>
<ul> <li>Create a second bar graph showing the pre- and post-test scores for each single- item anchor.</li> </ul>
<ul> <li>Place pre- and post-test bars side by side for each item for easy comparison.</li> </ul>
Notes:

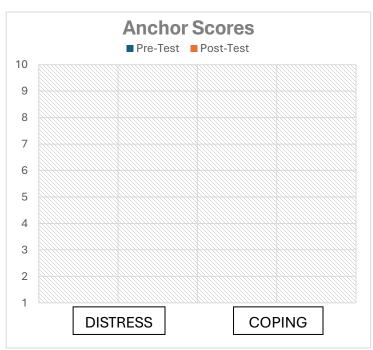
Sample bar graph with a pre-test score of 70 and a post-test score of 40 (indicating significant improvement):











FACILITATOR PREP CHECKLIST (START OF GROUP CYCLE)		
Start	Date:/ Day of the Week and Time:/	
	Session scheduled at a convenient time for participants (e.g., evenings).	
	Group information (location, date, time, and other pertinent information) emailed or mailed to participants (at least one week prior to the first session)	
Refre	shments (Coffee, tea, water, packaged snacks)	
	Facilitator-provided for first group (coffee and/or K-cups, bottled water, packaged snacks)	
	Coffee maker or Keurig in group room? Working outlet?	
	Consider asking for volunteers to bring refreshments for successive groups?	
Fees		
□Free	e □Fee-based □Sliding scale	
	Fees communicated clearly to participants and collected (if applicable) during the	
	screening interview	
Child		
	Childcare provisions in place (if applicable)	
	If young children are permitted in the group space, this must be clearly	
	If young children are permitted in the group space, this must be clearly communicated to all participants during the screening process	
	If young children are permitted in the group space, this must be clearly	
	If young children are permitted in the group space, this must be clearly communicated to all participants during the screening process  Books and quiet toys available in the group room if young children will be present	
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Trans	If young children are permitted in the group space, this must be clearly communicated to all participants during the screening process  Books and quiet toys available in the group room if young children will be present portation  Cab vouchers, bus tokens available (if applicable)  Space	
Trans	If young children are permitted in the group space, this must be clearly communicated to all participants during the screening process Books and quiet toys available in the group room if young children will be present  portation Cab vouchers, bus tokens available (if applicable)  p Space Enough chairs for all participants	
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## **GROUP SESSION CHECKLIST**

Space	e Preparation
	Enough chairs for all participants and facilitators
	Chairs arranged in a circle or semi-circle
	Table(s) set up for activities/materials
	Tissues, water, and comfort items
	Room temperature adjusted for comfort
	Calming environment (soft lighting, soothing colors, minimal distractions—blinds
	closed if windows in the room)
	Restrooms, break room (if applicable), and smoking area clean and accessible
	Books or quiet toys if young children may be present in the group room
	rials & Handouts
	Session outline and facilitator notes
	Handouts, worksheets, or other materials printed, hole-punched, and organized
	Pens/markers, dry erase markers, sticky notes, index cards
	Structured check-in questions pre-written on whiteboard or posted in group
	room/included in binders
	Rules posted in group room
	Folders or binders for participants to organize their group materials
Facili	tator Readiness
	Session plan reviewed
	Facilitator(s) grounded and relaxed
	Agreement of who will lead the session (or plan to co-lead)
	Cell phones silenced and placed out of sight
	One or both facilitators planning on remaining after the group to provide support
	and/or referrals as needed
Defue	
	<u>shments</u> Coffee prepared (or Keurig set up with plenty of K-cups) and snacks arranged in
	an appealing manner; napkins, paper cups, and trash container available
	Space clean before participants arrive
	Space clean before participants arrive
<u>Confi</u>	dentiality & Safety
	Crisis hotlines or other safety hotlines posted (see Appendix)
	"Do Not Disturb" sign for door to prevent disruptions (if needed)
<u>Audic</u>	o/Visual
	Equipment set up and tested

$\ \square$ Audio/visual materials queued and ready to prevent disruptions			

### **FACILITATOR GUIDE Session 1: Introduction**

#### **Session Objectives:**

- To orient participants to the group process
- To normalize grief reactions and emphasize that participants are experts in their own grief experiences
- To encourage peer support and connection
- To set goals and expectations

#### **Materials:**

- Name tags (optional)
- Pens/markers
- Small colorful sheets of paper or index cards
- Group "Hope Jar" (or large container)
- Copies of `
- Copies of GROUP HANDOUT 1: How Do Bereavement Therapy Groups Help?
- Copies of HANDOUT 1: GRIEF MISCONCEPTIONS
- Group Activity 2.1 Hope Jar (FACILITATOR GUIDE)
- Copies of WORKSHEET 1: LOSS EVENTS CHECKLIST
- Copies of GRIEF SUPPORT & CRISIS HELPLINES
- Video: Group Therapy: What You Need to Know https://youtu.be/a7tsLHKuQCU (3:08 minutes)
- Video: Helping with Grief & Loss https://youtu.be/Rkod3n-ottM (4:09)

#### **Preparation**

- Make copies of group materials and hole-punch them for participants
- Post *Group Rules* (see Appendix) in the room
- Write the structured check-in questions on the whiteboard where everyone can see them
- Prep videos for viewing

#### 5-10 minutes

→As participants arrive, pass out Assessment 1.1 and ask them to complete it quietly before the session begins. Participants should keep their completed checklists to use for talking points during the group discussion.

Sample Facilitator Script: "Welcome—I'm glad you're here. As you arrive, please take a few minutes to complete this questionnaire. It's not a test—there are no right or wrong answers. It's simply a way to notice what your grief feels like today. We'll refer back to it later. If any item feels too difficult, skip it. If you'd like feedback, \* you can turn it in after group; otherwise, it's yours to keep."

- → Provide brief overview of today's session objectives and explain the consistent 90-minute group format, which includes check-ins, open discussion, audio/visual content, a 10–15 minute break, group activities (skills and processing), and a safety check/wrap-up. Remind participants that sharing is always optional.
- → Provide copies of GROUP HANDOUT 1 to participants

Facilitator sample script: "Thank you again for being here. We'll start by reviewing our group agreements—guidelines to help us create a safe, respectful, and supportive space. Remember, you are the expert on your own grief; everyone's experience is unique, and your voice matters here. Today, we'll explore common grief reactions and talk about what you hope to gain from this group. But first, let's go around and introduce ourselves by first name only."

**Introductions** (Name tags optional)

- → After participant introductions, facilitators briefly introduce themselves and share their qualifications, their connection to the program, and—if they feel comfortable—a brief personal experience with grief.
- → Facilitators review *GROUP HANDOUT 1* (with guidelines), pausing after each guideline, inviting participants to share what it means to them or how they interpret it.

#### Sample facilitator prompts:

"What does this rule look like in practice?"

"Why might this rule be especially important in a grief group?"

\*When participants submit written work, facilitators should return it the following session with feedback. Whenever possible, provide written comments so participants have something tangible to reflect on between sessions. Feedback should be supportive, validating, and constructive, highlighting strengths while offering gentle suggestions for further exploration. (See *Participant Feedback Form.*)

#### 5 minutes

#### →Introduce video

**Sample facilitator script:** "This short video explains how group therapy works—what makes it different from individual therapy, how sessions are structured, and how group support can be especially powerful."

Video: Group Therapy: What You Need to Know <a href="https://youtu.be/a7tsLHKuQCU">https://youtu.be/a7tsLHKuQCU</a> (3:08 minutes)

→After the video, ask participants for initial reactions or if they have any thoughts/feedback.

## 15-30 minutes

Group members check in by responding to structured check-in questions (limit sharing to 2-3 minutes per person, depending on the size of the group)

**Structured Check-In**: (Questions pre-written on the board or posted in group room/included in binder)

- 1. One word for how I'm feeling right now
- 2. One high and/or low point this past week
- 3. One coping strategy I tried—helpful or not
- 4. If my grief had a voice today, it might say... or share another thought that feels true right now

#### →Introduce second video

**Sample facilitator script:** "Before going on break, we're going to watch another short video that offers simple, compassionate ideas about how to support someone—or yourself—when grief comes into your life."

Video: Helping with Grief & Loss <a href="https://youtu.be/Rkod3n-ottM">https://youtu.be/Rkod3n-ottM</a> (4:09)

#### 10 minutes

#### **Break**

## 15-30 minutes

→ Review HANDOUT 1 and facilitate discussion on grief expressions and grief misconceptions. Invite participants to glance at their assessments and notice what they're experiencing in the moment. Make the key point that grief looks different for everyone as it's influenced by culture, relationships, circumstances, personality, and timing. There is no single "right way" to grieve. There are unhelpful or unsafe ways to cope (e.g., chronic isolation, substance misuse, reckless behavior).

Sample facilitator script: "Let's look at a few common myths about grief. As you review the handout, compare it with your own assessment—what are you feeling right now? Grief can show up as tears, numbness, anger, laughter, or quiet—and all of it is valid. What we do want to watch for are coping habits that can make things harder over time, like using alcohol to numb emotions or withdrawing from others and losing support. Our goal isn't to 'grieve the right way'—it's to grieve in ways that are safe, supportive, and sustainable."

#### Optional questions for discussion:

When you hear the word "grief," what comes to mind for you?

- How has grief surprised you so far?
- ➤ What's one thing people often misunderstand about grief?
- What's been the hardest part of day-to-day life since your loss?

Group Activity 2.1 Hope Jar

### **Group Activity 2.1 Hope Jar (FACILITATOR GUIDE)**

**Instructions**: Hand each group member a colorful sheet of paper or index card and a marker or pen. Ask participants to write what they hope to gain from the group. They can place their hope in the group "hope jar" to be revisited at the end of the group cycle or keep it private.

**Sample facilitator script**: "On your paper, write one hope you have for this group. It might be something you'd like to learn, a feeling you want more of, or a way you'd like to grow. You don't need to share it unless you want to. When you're done, you can place it in our Group Hope Jar to revisit at the end of our sessions, or you can keep it with you as a reminder."

**Why it works**: This activity helps to foster hope and set goals without pushing for deep disclosure too soon.

#### 5-10 minutes

#### Safety check and wrap-up

Ask each group member to briefly share:

- One word about how they're leaving today, or
- One small thing they'll do to care for themselves after group.
- → Provide each participant with a one-pager with crisis hotlines and other grief helplines. (A more comprehensive resource list should be included in participant binders, see *Resources* section.)
- → Assign homework: WORKSHEET 1: LOSS EVENTS CHECKLIST

**Sample facilitator script:** "While homework isn't usually part of this group, you do have one assignment to complete and return next session. This won't be something you share with your peers—it's just for you and for me to review. The purpose is to help prepare you for an exercise we'll be doing next week."

#### → Prep participants for the next session

Sample facilitator script: "Before we close, I want to give you a heads-up about next week. I'll invite each of you to share something about your loss—it doesn't need to be long or detailed. It could be a story, a memory, or even one word that represents who or what you've lost. Share only what feels comfortable; there's no pressure to go deeper than you're ready for. The

goal is to begin learning about each other's experiences and give everyone a chance to have their loss acknowledged."

## Facilitator Feedback Form

Name:
Date:
Assignment:
Strengths/Positive Observation:
Reflections/Questions:
······································
Suggestion/Next Steps:
Encouragement/Validation:

## **Assessment 1.1 Expressions of Grief**

#### **Instructions:**

Check all the items that reflect your current experience of grief.

There are no right or wrong answers. Grief is unique to each person, and the purpose of this assessment is simply to help you explore what your grief looks like right now. Some of the items you'll see are often experienced soon after a loss, while others may surface later in the grieving process. Simply check the ones that apply to you.

Emoti	tional	
	Agitation Anger Anxiety Apathy Bitterness Blame Fear Guilt Irritability Loneliness Numbness Regret Sadness Shock Spasms of grief Other: Other:	
	Other:vioral/cognitive	
Denav	ivioral/cognitive	
	<b>5</b>	
	Bargaining Confusion or "brain fog" Crying spells Denial Difficulty concentrating or making decisions	

□ Increased risk-taking, reckless, or self-destructive behavior         □ Intrusive thoughts about the loss         □ Lack of awareness (self and in general)         □ Memory failure         □ Mood swings         □ Passiveness         □ Preoccupation with the loss         □ Questioning or second-guessing decisions made around the loss         □ Repeating a behavior         □ Rumination         □ Searching or calling for the deceased         □ Thoughts of suicide (either to be with the deceased or to escape pain)         □ Using alcohol or drugs to cope with distress         □ Yearning         □ Other:         □ Other:         □ Other:         □ Other:         □ Other:         □ Other:	
Physical	
<ul> <li>Aches (headache, pain in the body)</li> <li>Changes in appetite</li> <li>Choking sensations or tightness in throat</li> <li>Fatigue</li> <li>Feeling empty</li> <li>Lack of basic self-care</li> <li>Nausea</li> <li>Oversensitivity to noise &amp; light</li> <li>Sensations of heaviness or feeling weighed down</li> <li>Sleep disturbances</li> <li>Weakened immune system</li> <li>Other:</li> <li>Other:</li> <li>Other:</li> <li>Other:</li> <li>Other:</li> </ul>	
Spiritual	
<ul> <li>□ Feeling abandoned by God or a higher power</li> <li>□ Greater appreciation for life and relationships (sometimes as part of post-traumatic growth)</li> <li>□ Questioning faith, beliefs, or life's meaning</li> <li>□ Searching for purpose or meaning in the loss</li> <li>□ Other:</li> <li>□ Other:</li> <li>□ Other:</li> </ul>	