

## 2025 CT / FT Certification Exam Handbook and Study Guide

#### Message from ADEC's Credentialing Council and Exam Development Committees

Congratulations on your commitment to professional development. By pursuing ADEC's respected certification in thanatology, you are on the path to earn the credential of CT (Certified in Thanatology) or FT (Fellow in Thanatology). Certification protects the public by establishing standards in the field. ADEC's certification exam is driven from the core Body of Knowledge that defines the knowledge required for competency in the field of death, dying and bereavement.

It is our belief and experience that exam candidates who prepare by utilizing 1) ADEC's study guide, 2) the Body of Knowledge Outline, and 3) the specified exam references, will be the ones most likely to succeed in this final step toward receiving certification and being awarded the credential of CT or FT.

This guide was created to assist you in preparing for the certification exam which is administered once each year. ADEC does not offer a required preparatory course but does strongly recommend developing a self-directed study plan as you prepare for the annual exam.

ADEC's certification exam measures foundational knowledge in the field of thanatology. Exam candidates come from diverse thanatology roles (funeral directors, nurses, clergy, social workers, therapists, counselors, end of life doulas, organ transplant professionals, death educators, and so many more). Each discipline has its own set of skills needing to be used within its thanatology role. Important: This exam is not intended to measure your clinical skill competency. It is a knowledge exam that measures your "knowledge competency" in the broad field of thanatology.

Best wishes in your study process and in taking the exam this fall. Thank you for the valuable thanatology service you provide to those in need of your knowledge, skills, and compassion.

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#### **Exam Administration**

#### **Exam Format**

The exam consists of 150 multiple choice questions. Each question will have 4 answer options with a single correct answer.

### Accessing the Online Exam

About 2 weeks before the exam date, you will receive:

- Detailed instructions on how to access the exam
- Access to a "familiarization exercise" designed to help you practice navigating the exam platform prior to the exam
  date

#### **Familiarization Exercise**

Sign into the familiarization exercise during the time frame it is available. The exercise includes 5-10 non-Thanatology questions so that you can practice:

- Accessing the exam platform
- Navigating between questions
- Selecting your answer
- Changing your answer
- Flagging questions for later review
- Returning to flagged or unanswered questions
- Submitting the exam

#### Taking the Exam

- With the exception of the exam instructions, no other books, notes, devices, etc. are permitted in the room where you
  take the exam. This is not an open book test.
- The exam has a fixed 3-hour time limit. There is no pause button, so any time you divert away from the exam is
  deducted from the time limit.
- The 2025 exam window is open from October 17, 9:00 AM EST to October 18, 9:00 AM EST. Be sure to account for
  differences in time zones when starting the exam the exam will close at the designated time regardless of your 3-hour
  time limit.
- The exam cannot be submitted with unanswered questions unless you have reached the 3-hour time limit,
  - o If you reach the 3-hour time limit, the exam will self-submit regardless of how many unanswered questions are left.

#### **Technical Difficulties and Exam Interruption**

ADEC does not control the technological system end to end and, therefore, is not responsible for the function or dysfunction of a candidate's equipment, internet service, bandwidth, or other equipment and services required to take the exam. You will receive detailed information 2 weeks before the exam on how to handle exam interruption.

Should there be a system-wide failure affecting the ability of ALL learners to access or complete the exam, ADEC will convene an emergency meeting to discuss the problem and determine the best solution. Candidates will be contacted within 72 hours of a decision to provide information and instructions.

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#### Submitting the Exam

**IMPORTANT:** Once you submit your completed exam, please note that the screen will not show/state "Completed". The screen will instead show that your exam is "Started". Please do not be concerned that it doesn't say "Completed", this is a function of our scoring process, please see below:

#### **Understanding the Exam Scoring Process**

You will not receive an automatic pass or fail score when your exam is submitted. While this may be frustrating, it is important to understand that the process used to score the exam is comprehensive and ultimately of more benefit to the test taker than using methods that provide immediate scores.

Post exam, our Test Consultant conducts an in-depth, analytic review of each question on the exam. Questions that were incorrectly answered by many test takers are then scrutinized by a team of professionals to determine if any of the questions were ambiguous, invalid, or unfair. If so, those questions are excluded from the scoring and the pass score is determined based only on the remaining questions. This important process ensures reliability, fairness, equity, and credibility of our exam. It takes between 4 and 6 weeks post-exam for this analysis to be completed. Additionally the actual percentage that constitutes the pass score is determined by the degree of overall difficulty the exam represents in comparison to previous exams.

#### **Receiving Exam Results**

After review by ADEC's psychometrician and exam management committee, candidates will be notified of their results by email within 6-7 weeks of taking the exam. Successful candidates can expect to receive a signed printable digital certificate that shows they have been awarded the CT or FT. Results are released as Pass or Fail only.

Candidates who do not receive a passing score are not certified and will be eligible to retest the following year.

## **Candidate Exam Rights**

### **Testing Accommodations**

ADEC's Testing Accommodation Policy is in accordance with the 1990 Americans with Disabilities Act (ADA) and 1991 U.S. Civil Rights Act.

Candidates who require testing accommodation must request their accommodation and provide the required documentation when submitting the credentialing application.

Required documentation from the candidate's healthcare provider must include:

- The reason the testing accommodation is required (e.g. diagnosis)
- The specific accommodation recommendation

ADEC aims to respond to accommodation requests within 30 days of submission.

Testing Accommodation Requests must be submitted here: https://www.adec.org/page/TestingAccommodationRequest

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#### **Exam Postponement Request**

Candidates may submit a request to postpone their exam to the following year. Requests must be made at least 24 hours before the exam opens. If approved, the candidate will:

- be allowed to complete the exam the following year without having to reapply
- be required to pay a \$25 non-refundable administrative fee

A candidate may only postpone the exam for 2 consecutive years before being required to reapply. All fees will be relinquished if the exam is not taken within 2 years of the initial postponement.

Exam Postponement Requests must be submitted here: https://www.adec.org/page/ExamPostponementRequest

#### **Exam Cancellation Request**

Candidates may submit a request to cancel their exam.

- Candidates who submit a cancellation request at least 14 days prior to the exam will receive a refund equal to the application fee minus a \$75 administrative fee.
- Candidates who submit a cancellation request less than 14 days prior to the exam are not eligible for a refund.
- If a candidate cancels their exam, they must reapply if they elect to pursue certification in the future.

Exam Cancellation Requests must be submitted here: https://www.adec.org/page/ExamCancellationRequest

#### **Appeal of Exam Results**

Candidates have the right to appeal if they believe their outcome was the result of errors within the exam content or testing process.

- Candidates must file the appeal within 10 days of receiving the exam results.
- Candidates will be notified of the decision within 45 days of the appeal.

Appeals of Exam Results must be submitted here: <a href="https://www.adec.org/page/AppealofExamResults">https://www.adec.org/page/AppealofExamResults</a>

#### **Retesting Request**

Candidates who do not achieve a passing score on the exam remain eligible to retest two times without having to reapply.

- Retesting requests must be submitted on or before the general application deadline of the year you intend to retest.
- Retesters are required to pay a \$150 fee for each retest attempt.
- Resting requests are limited to the two consecutive years after the initial testing attempt.
- All fees will be relinquished after 3 unsuccessful attempts to pass the exam.

Retesting Requests must be submitted here: <a href="https://www.adec.org/page/RetestingRequest">https://www.adec.org/page/RetestingRequest</a>

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#### Request for Situational Review

Candidates who experienced technical difficulties during the exam or have experienced another concerning situation that does not fit within the other appeals and requests offered have the right to a peer review of the situation.

- To ensure a fair review, candidates may be contacted by phone, email, or receive a meeting request to provide clarification
- ADEC aims to reach a decision within 45 days of the request. However, some situations may require more extensive investigation.

Requests for Situational Review must be submitted here: <a href="https://www.adec.org/page/RequestSituationalReview">https://www.adec.org/page/RequestSituationalReview</a>

#### **Exam Content Overview**

#### **Source References**

The 2025 exam questions are based on the following reference books. Click the hyperlinks to be directed to a purchase source for the book.

- Corr, C.A., Corr, D.M., & Doka, K.J. (2025). <u>Death & Dying, Life & Living (9th Ed.)</u>. Cengage Learning. ISBN-13: ISBN-13: 978-0-357-94692-3. (This book can also be rented or purchased as "used".)
- Servaty-Seib, H.L. and Chapple, H.S., (Eds). (2021). <u>Handbook of Thanatology: The essential body of knowledge for the study of death, dying, and bereavement (3<sup>rd</sup> ed.). Association for Death Education and Counseling®; The Thanatology Association®. ISBN: 978-1-736117-0-0
  </u>

ADEC does not provide a preparatory exam course but does strongly recommend utilizing the exam reference books to develop your own independent study plan that fits your unique learning style. You are not required to purchase the reference books from which the exam questions are created.

#### Major Content Areas and Study References

The reference books for the Exam Content Areas table on the following page are abbreviated as follows:

- 3/HoT = Handbook of Thanatology, 3<sup>rd</sup> Edition (2021).
- 9/Corr = Death & Dying, Life & Living, 9<sup>th</sup> Edition (2025).

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Exam Content Areas	# of Questions; % of Exam
Dying and Foreseen Death; Traumatic and Unforeseen Death; Death Matters	
<ul> <li>Research: theories, models, terms, demographics/epidemiology, definitions that inform practice</li> </ul>	
<ul> <li>Practice: practice settings, assessments, and interventions (including education and resources)</li> </ul>	
<ul> <li>Considerations: cultural, religious, developmental, personhood/individual, family systems</li> </ul>	51 Questions
Professional Practice Issues: behavioral, moral, ethical, legal	34%
Study References	
• 3/HoT: Chapters 1-3, 6, 7, 12-16, 19	
• 9/Corr: Chapters 2-8, 10, 12-17, 19, 20	
End of Life Preparation and Decision Making	
Research: theories, models, terms, and definitions that inform practice	
<ul> <li>Practice: practice settings, assessments, and interventions (including education and resources)</li> </ul>	
	15 Questions
Considerations: cultural, religious, developmental, personhood/individual, family systems	10%
Professional Practice Issues: behavioral, moral, ethical, legal	10/0
Study References	
• 3/HoT: Chapters 4, 5, 7, 19	
• 9/Corr: Chapters 5, 7, 10 12-15,16, 18, 19	
All Loss: Grief, Mourning and Memorialization	
Research: theories, models, terms, demographics, and definitions that inform practice	
Practice: practice settings, assessments, and interventions (including education and resources)	63 Questions
Considerations: cultural, religious, developmental, personhood/individual, family systems	42%
Professional Practice Issues: behavioral, moral, ethical, legal	42/0
Study References	
• 3/HoT: Chapters 7-11, 13-17, 19, 22	
• 9/Corr: Chapters 5, 7, 9-15, 19	
History of the Field of Thanatology and Evolution of Death Education	
Important theorists, researchers, clinicians, educators, and authors who have shaped the field of	
Thanatology	21 Questions:
	14%
Social movements and social representations of death that have contributed to our changing	
<ul> <li>Social movements and social representations of death that have contributed to our changing awareness and perceptions of death and the evolution of death education</li> </ul>	
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awareness and perceptions of death and the evolution of death education	

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## Body of Knowledge (BoK) Outline

The Body of Knowledge (BoK) Outline is a more detailed breakout of content that may appear on the exam:

### Arenas of Thanatology

- a) Issues around definitions and perceptions of death
- b) Demography and epidemiology related to death and dying (local and global)
- c) Dying and foreseen death (when death is expected)
  - i) Conversations about goals of care at the end of life
  - ii) "Tasks" of dying: physical, psychological, spiritual, social
  - iii) Concerns/needs of those involved in the dying process
- d) Unforeseen death
  - i) Suicide
  - ii) Homicide, wrongful death
  - iii) Accidents and other unexpected deaths
  - iv) Concerns/needs of those immediately or distantly affected
- e) Otherwise traumatic death in terms of mode, reaction, or appraisal
- f) Loss, grief, and mourning
  - i) Anticipatory grief/mourning
  - ii) Reactions to loss: psychological, physiological, social, spiritual, neurological
  - iii) Factors that influence the grief response
  - iv) Developmental considerations
  - v) Concerns related to differently-abled and disenfranchised persons/populations
- g) Theories of grief
  - i) Historical context
    - (1) Early concepts
    - (2) Stages/phases of grief
  - ii) Contemporary models
    - (1) Dual process
    - (2) Two track
    - (3) Attachment theory
    - (4) Constructivist (meaning-making)
    - (5) Grieving as a process of relearning
  - iii) Important concepts related to grief
    - (1) Tasks of Grieving
    - (2) Disenfranchised grief
    - (3) Continuing bonds
    - (4) Ambiguous loss
    - (5) Non-finite loss
    - (6) Anticipatory grief/mourning

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- (7) Chronic sorrow
- (8) Resilience
- (9) Historical trauma
- (10) Complicated/Prolonged Grief
- iv) Funeral practices, rituals, and memorialization (both short and long term)
  - (1) Traditional
  - (2) Current trends and changes

## Practice Considerations for Professionals in Thanatology

- a) Practices related to human finitude
  - i) Preparation for end of life
    - (1) Conversation
      - (a) Education about death and dying
      - (b) Preferences and goals
      - (c) Life review
      - (d) Past experiences with death
    - (2) Documents/tools
  - ii) Decision making regarding the end of life
    - (1) Weighing benefits and burdens
    - (2) Other ethical issues
    - (3) Role responsibilities
    - (4) Issues around hastening death
      - (a) Euthanasia
      - (b) Medical aid in dying
    - (5) Organ, body, and tissue donation
  - iii) Care of the dying
    - (1) Developmental and differently-abled considerations
    - (2) Hospice and palliative care
    - (3) Implications of care settings
    - (4) Ethical/moral considerations
- b) Practices related to counseling/therapy in Thanatology
  - i) Therapeutic relationship
  - ii) Assessment
  - iii) Interventions
    - (1) Targets
      - (a) Individual
      - (b) Family
      - (c) Group
      - (d) Community/nation
    - (2) Intervention models
  - iv) Developmental considerations
  - v) Concerns related to differently-abled and disenfranchised persons/populations
- c) Practices related to death education
  - i) Target Audience

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- (1) Individuals/families
- (2) Social groups/communities
- (3) Academic settings
- ii) Formats
  - (1) Formal classes/workshops; death cafes
  - (2) Informal conversations
  - (3) Teachable moments
  - (4) Media, internet
- iii) Developmental considerations
- iv) Concerns related to differently-abled and disenfranchised persons/populations
- v) Content regarding different ways of knowing
- d) Practice issues applying to all professionals in Thanatology
  - i) Training, preparation, and continuing education
  - ii) Self-awareness regarding one's own Thanatological issues
  - iii) Self-care, compassion fatigue, and burnout
  - iv) Professional practice issues, e.g., moral distress
  - v) Cultural humility
  - vi) Global considerations
  - vii) Collaboration and collegiality
  - viii) Communication/translation
  - ix) Ethics in thanatology
  - x) Marginalized populations
  - xi) Evolving platforms of practice, e.g., internet, social media

### Contextual and Theoretical Considerations in Thanatology

- a) History of the field
- b) Social frameworks that influence thanatology
  - i) Societal or cultural norms
    - (1) Death anxiety and denial
    - (2) Cultural taboos
    - (3) Religious influences
    - (4) Ritual
    - (5) Technology
  - ii) Laws
  - iii) Body disposal
  - iv) Institutional policies
  - v) Community/local considerations
  - vi) Disciplinary perspectives and language
  - vii) Family dynamics/Individual values
- c) Representations of death and grief in the arts and in media
- d) Non-death loss
- e) Resources and research

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# Key Contributors to Thanatology

Familiarize yourself with the following individuals whose work contributed to the early development and continued evolution of the field of Thanatology.

**Disclaimer:** This list is not exhaustive and is in no way inclusive of all the possible people or related topics that may appear on the exam.

#### A-K

Aries, Philippe Attig, Thomas Balk, David Becker, Ernest Bertman, Sandra Bluebond-Langer, Myra

Bonnano, George Boss, Pauline Bowlby, John

Brent, Sandor Byock, Ira

Calhoun, Lawrence Callahan, Daniel Chapple, Helen Charmaz, Kathy Connor, Stephen Corr, Charles

Davies, Betty DeSpelder, Lynne

Doka, Ken

Durkheim, Emile Erikson, Erik Feifel, Herman Freud, Sigmund Fulton, Robert Gamino, Louis Gawande, Atul Glaser, Barney Harris, Darcy

Kastenbaum, Robert

Klass. Dennis

Hone, Lucy

Kohlberg, Lawrence Kubler-Ross, Elisabeth

#### L-Z

Larson, Dale
Lifton Robert
Leviton, Daniel
Lindemann, Erich
Martin, Terry
Mishel, Walter
Mount, Balfour
Murray, Judith
Nagy, Maria
Neimeyer, Robert

Neimeyer, Robert Parkes, Colin Murray

Piaget, Jean
Pine, Vanderlyn
Prigerson, Holly
Raphael, Beverly
Rando, Therese
Reed, Pamela
Rosenblatt, Paul
Rubin, Simon
Rynearson, Edward

Sanders, Catherine Saunders, Cicely Schneidman, Edwin

Schut, Henk
Shand, Alexander
Schneidman, Edwin
Servaty-Seib, Heather
Silverman, Phyllis
Speece, Mark
Strauss, Anselm
Stroebe, Margaret
Tedeschi, Richard

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## Sample Exam

A 10-item practice exam is provided on the next two pages to 1) help you discover how well you know thanatology content prior to studying, and 2) help you learn how to pace yourself in answering questions.

Since the actual exam is timed for you to complete 150 questions in 3 hours, you may want to time yourself on the sample exam. To stay within the timing framework, you will need to complete the 10 questions within 12 minutes.

NOTE: The following questions were written from previous reference books and may not reflect the content found in current reference books. These questions will not appear on the exam.

Q1: Following a stillbirth, which form of support is MOST important in reducing maternal anxiety and depression.

- A. Family support.
- B. Spiritual support.
- C. Grief support groups.
- D. Mental health counseling.

**Q2:** With the goal of providing the best care possible to a terminally ill patient, a palliative care nurse opens a conversation in a genuine attempt to understand the patient's identity (racial, ethnic, personhood, family roles, beliefs, values, etc.). The nurse is:

- A. Fulfilling the plan of care.
- B. Practicing cultural humility.
- C. Overstepping professional boundaries.
- D. Gathering information to help the family write an obituary.

Q3: Six months after the death of her husband, Jane registers for "Car Mechanics for Dummies", a course to learn about the simple car maintenance her husband always handled. According to Worden's model of bereavement, Jane is working on which task?

- A. Accepting the reality of the death.
- B. Experiencing the pain and anguish of grief.
- C. Emotionally relocating the deceased and moving on with life.
- D. Adjusting to an environment in which the deceased is missing.

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A.	Tame death.
B.	Forbidden death.
C.	Death of the other.
D.	Remote and imminent death.
<b>Q5</b> : WI	nich of the following is a core issue of compassion fatigue?
A.	Lack of self-care.
B.	The financial stress of caregiving.
C.	Absence of a serene, spiritual workplace experience.
D.	Boredom resulting from performing a single role constantly.
tube fe does w she has Her dat asked t	s. Johnson, an 81-year-old, is dying from cancer. Her signed and dated advance care directive states she does not want edings or blood transfusions; but she does want to be offered food and drink as long as she is able to swallow, and she ant to be kept comfortable through pain management. She was admitted to a hospice inpatient facility 3 days ago where become more lethargic and is resisting any food or water that is offered. Upture, Joan, arrived from out of state today and is demanding IV hydration and tube feeding be started. You have been on help Joan understand the plan of care in accordance with her mother's written wishes. Which ethical principles will eplanation and advocacy be based on?
A.	Justice and Autonomy.
В.	Beneficence and Trust.
C.	Nonmaleficence and Autonomy.
D.	Confidentiality and Beneficence.
	interpersonal, socio-physical and symbolic network through which an individual's relationship to mortality is mediated by er society is known as the death:
A.	Culture.
B.	System.
	Society.
D.	Structure.

Q4: According to Aries, which term describes the attitude that death is "simple, inevitable, and public"?

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Α	. It almost always leads to pathological grief.
В	. It can lead to a new and altered relationship with the deceased.
С	. It was only conducted on older adults and doesn't apply to children.
D	. It is specific to Western culture and cannot be applied to most other cultures.
<b>Q9</b> : W	hich description of the difference between spirituality and religion is correct?
Α	. Spirituality is communal; religion is personal.
В	. Spirituality does not accommodate a transcendence level; religion does.
С	. Spirituality does not provide comfort during the dying process; religion does.
D	. Spirituality involves individual meaning-making; religion involves shared beliefs.
<b>Q10</b> : A	method used to re-create the personality and lifestyle of the deceased following an ambiguous death is known as a/an:
Α	. Investigation.
В	. Obituary extension.
С	. Psychological autopsy.
D	. Forensic reassessment.
Sample	e Exam answers are listed on the following page.

**Q8:** Which of the following statements about research on continuing bonds is true?

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# Answers to Sample Exam Questions

Question	Answer
1	А
2	В
3	D
4	А
5	А
6	С
7	В
8	В
9	D
10	С

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