

Grief and Dual Diagnoses

Individuals with a dual diagnosis (person with a mental illness and developmental disorder) can often have their responses to grief misunderstood, or have their natural grief responses viewed as symptoms of either pre-existing mental illness or developmental disability. Grief processing and expression may appear differently depending on a person's development; however, grief is a lived experience regardless of mental health and cognitive development.



Mourning

Individuals with a dual diagnosis may not be informed or invited to participate in anticipatory grief and mourning practices, as caregivers or support persons may feel that the individual will not understand what is occurring and make attempts to protect the individual from emotional pain. By sheltering a person from this experience, increased confusion and further delays in grief processing may occur.

What You Can Do To Support:

- Provide factual information about their loved one's illness, diagnosis, and death.
- Provide opportunities to visit as often as possible, and allow time for the individual to say goodbye to their loved one.
- Answer any questions honestly with factual information, using language that will be understood. Often questions may need to be asked and answered repeatedly.
- Involve the griever in decision-making about their loved one's funeral or memorial services (allowing input about flowers, photos, music, food, etc.).
- Allow the person to decide if they want to attend mourning services (funeral/memorial).
- If crowds are overwhelming, plan on how space and time for the person can be provided.
- Ensure that someone familiar is available during services should additional support be required.
- Prepare them for what will occur, what they may see, and how others may react/ behave at memorial activities.

**You're not alone.
We're here to support.**

There is no timeline for grief. Knowing there are supports and resources available can give hope as you move through your grief.

When to Seek Professional Supports

- If the griever is demonstrating **extreme** changes in behaviour.
- If risk, self-harm, or self-destructive behaviours are occurring.
- If you are noticing extreme acting out, destructive, or impulsive behaviours.
- If grief seems to be interfering with daily functioning.
- If the griever is demonstrating or expressing suicidal thoughts.





Emotional Responses

Often, the intensity of normative grief will begin to reduce within 6 months. However, for those with a dual diagnosis, the expression of grief may be delayed, and the duration of intense grief may be extended, often 1–2 years.

It is important to understand that grief can heighten symptoms of mental illness, and grief processing will occur at a person's typical understanding (developmental) level. Grief reactions should be viewed as a person's emotional response to loss, not solely as a behaviour-based concern. During this time, previous coping strategies may need adjustments or new techniques introduced and practiced.

What May Be Observed

- Depending on the relationship with the deceased, individuals may begin to worry about their future and well-being and may focus on the health of their remaining caregivers.
- Due to the changes (environment, routine, caregiver), individuals may present as restless, irritable, agitated, or hyperactive, as they are having difficulty self-regulating the emotions they're experiencing.
- Changes in appetite and/or sleep may occur.
- Withdrawal from previously enjoyed activities or people.
- Regression in life skills and ability to manage known requests/responsibilities may occur.
- Longing for their loved one may be noticed through statements made, "I want to go see..." It is important to clarify statements through evaluation of any safety/suicide risks. If a statement does not indicate risk, provide education related to death and discuss ways the person can feel connected to their loved one, which is referred to as continuing bonds.
- Confusion and difficulty concentrating may be noticed.
- Individuals may present with unpredictable moods (ups and downs or moodiness) or intense feelings of sadness, anger, guilt, and fear of separation from close family members.

Information about past diagnosis, symptom management, and typical reactions to change and stress prior to the loss should be shared. This will provide clarity about areas of functioning that are being impacted by grief. If recall is difficult for the griever, it is beneficial to have someone who understands the person's history and needs available to assist.

