

Supporting those with neurodiversity *bereaving suicide*



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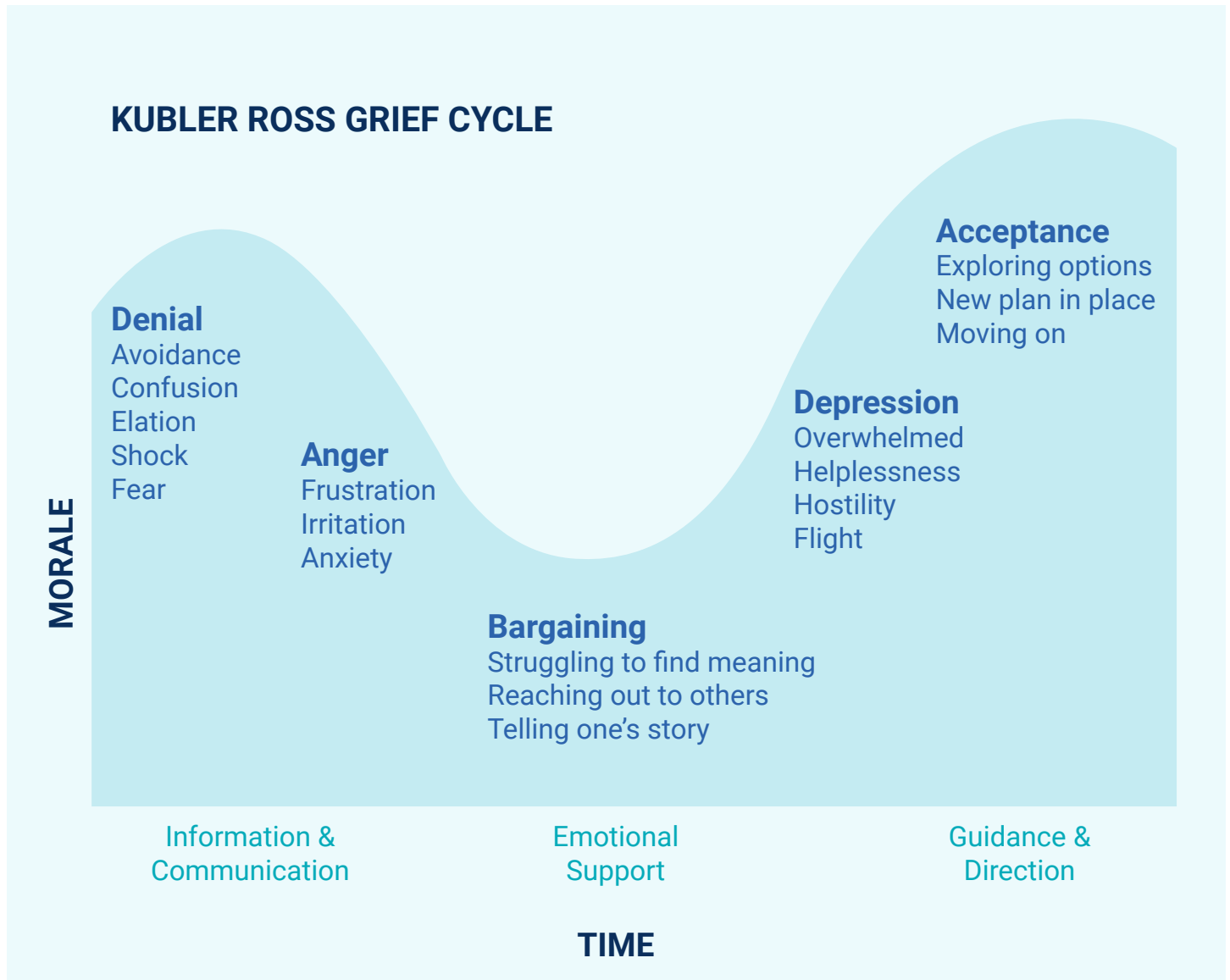
Understanding reactions to grief

for those with neurodiversity

The reaction to grief is a long process, for everyone.

While support should always be tailored to meet the needs of an individual, there are extra considerations to make when supporting those with neurodiversity through bereavement by suicide.

Although the same grief cycle applies, additional support may be required to transition through the phases.



Delicately discussing *difficult subjects*

A complete understanding of death is important.

The first and most important consideration is whether the person has a full understanding of what death means. The denial phase cannot be processed if there is an incomplete understanding of death.

A complete understanding means awareness of the following:

- Death is permanent and irreversible.
- Death happens to everyone.
- Bodily functions stop. For example, the heart stops beating and breathing stops.
- The person who has died can no longer think, hear or feel.
- The person who has died is not in any pain.

To best support, we need to sensitively fill any gaps in understanding. Explain that when someone dies, their body stops working and doctors cannot fix it.

Why?

If a person does not understand irreversibility then they may live in hope of the deceased returning. Often, this is displayed through behaviours in an attempt to 'earn' them back. For example, praying or demonstrating good behaviour.

Additionally, if there is a gap in understanding around bodily functions, they may believe the deceased can still see and hear, for example. This can cause extreme distress at the idea of a burial.



The importance of language

Open communication is essential when supporting those with neurodiversity through grief. While death by suicide is a difficult subject for everybody, it is important that those in need of support are able to discuss their thoughts and feelings in a safe environment.

When supporting a neurodiverse person through bereavement, strive to put aside your own discomfort with the topic and be prepared to answer uncomfortable questions to help mitigate their confusion.

Words to Use	Words to Avoid
Ended or stopped their own life	Successful suicide
Decided to stop their body from working	Completed suicide
Made themselves die	Committed suicide
Made themselves stop breathing	Chose to suicide



Keeping communication simple

and avoiding tricky euphemisms

Remember that explanations can be taken literally therefore these types of phrases often cause anxiety or confusion. They can cause a fear of private activities such as going to sleep - believing someone is 'watching'. Being told, for example, that a deceased loved one is both buried in the cemetery and in heaven can be a confusing concept.

Be mindful that:

- You may need to explain particular phrases like 'suicide' or 'mental health difficulties'. Be careful to be non-judgmental in your explanation.
- Give a simple account of the way the person died. For example, they died in a car, they stopped themselves breathing or they did something to stop their heart beating.
- You may be able to build up 'layers' of explanation over time as the person processes what's happened. For example:
 1. They stopped breathing.
 2. They were feeling very sad.
 3. They wanted to stop their pain.

Euphemisms that neurotypical people commonly use are very confusing for those with neurodiversity.

Examples to avoid:

- They are in a better place.
- They have gone to heaven.
- They are in a deep sleep.
- They have become an angel/star/butterfly.
- They have passed over/on/away.
- They are watching over you.
- They are all around you.



Understanding different ways *people respond to grief*

Potential behavioural responses.

Existing challenges may worsen during times of grief. It's important to remember that those with neurodiversity are likely to struggle to process a bereavement and express their feelings.

Remember that responses vary from each individual.

Examples can include:

- Communication difficulties, repetitive behaviours, sensory overwhelm, anxiety or processing delays.
- Feelings of anger, restlessness, disruption to normal sleeping or eating habits, feeling less confident or less independently able.
- They may not process grief or sadness themselves but may share these feelings when someone else expresses them.
- They may appear to have not acknowledged the bereavement and may continue demonstrating excitement and happiness in their day to day lives.
- Those with neurodiversity are likely to be confused by, or unaware of, the social norms and conventions around death.

A closer look at behavior responses from those with autism

- May demonstrate unexpected reactions
- Will commonly find it difficult to recognise and understand their emotions.
- May or may not cry or behave in an emotional way.
- Can often demonstrate delayed and extreme emotional responses.
- Might experience an increase in autistic traits, like sensory differences, meltdowns and shutdowns.
- They may find it harder to organise, plan and concentrate on tasks. These skills are known as 'executive functioning.'
- May appear uncooperative and struggle to understand how to behave during social situations with heightened emotions such as, hospital visits and funerals.

A closer look at behavioural responses

from those with neurodiversity

Often, those supporting someone with neurodiversity will hide news or exclude them from mourning rituals in an effort to protect them. It is now widely accepted that this is not helpful, respectful or healthy. It is important to build awareness and understanding of death and the implications it has for the future. Talking about death and loss is crucial to the grieving process and progression through the grief cycle, towards understanding and acceptance.

How to best support those with neurodiversity:

- Listen, and accept what the individual says and encourage them to talk through their feelings. Signpost other safe and trusted people for them to talk to.
- Give the person the opportunity to talk about the loss.
- Offer reassurance that feelings and experiences are normal.
- Be aware of the practical changes that may result from the loss and be prepared with helpful solutions.
- Some people may become overwhelmed and require space. If you recognise this, allow them time and tolerate silences.
- Provide continued support and be aware that feelings may intensify over various events, for example, the anniversary of loss and birthdays.
- Do some preparation for events that could be overwhelming. For example, discuss what a funeral is like, visit the funeral home or cemetery before the funeral.
- Don't take anger personally as such demonstrations of misplaced emotions are a normal reaction to loss.
- Accept that it is not possible to take away the pain of the loss, and that these feelings are healthy to progress through the stages of grief.
- Be aware that it can be difficult to support a person with neurodiversity through grief – especially as their responses are likely to be different from your own. Ensure you are seeking the help you need to best support them.
- Should the person wish to view the body, it may be helpful as part of the grieving process. Some people may find it helps their understanding, where others will find the prospect frightening. It is important to be sensitive to either reactions.
- Allow them to be involved in funeral arrangements, if they wish to do so. It's important that people with neurodiversity do not feel isolated or marginalised. For example, you could give them the opportunity to choose flowers.
- Some people like to make a 'memories album' or a 'memories box' using pictures, newspaper cuttings and objects which remind them of the person who has passed away. Encourage this behaviour as it will help them reach the acceptance phase of the grief cycle.
- Visits to the grave or crematorium can help with acceptance and coming to terms with the loss
- Use accessible information and 'easy read' or visual guides. There are a number of these available in the resources highlighted on the next page.

Helpful online resources for supporting *those with neurodiversity bereaving suicide*

[Dealing with bereavement and support with grief | Speak to a bereavement counsellor | Mencap](#)
Easy Read guides, guides for caregivers and an online bereavement counselling chat function

[Bereavement | Foundation for People with Learning Disabilities](#)

[Bereavement \(autism.org.uk\)](#)

Guides for autistic people, guides for their caregivers, guides for professionals

In times of crisis

it's important to know where to turn for help

URGENT RESPONSE

If you or a loved one are at risk and in need of immediate help, please call 911 and seek out your nearest hospital.

Alex Panton Foundation Resources

Bereavement Support Group

Facilitator: Ms April Lewis

Ages 18+

Every Thursday, 6:30PM – 7:30PM

Active dates: 24 February – 31 March

Bethesda Counselling Centre, Unit 4,
68 Mary Street, George Town, Grand Cayman

Email: edu@alexpantonfoundation.ky

Teen Talk virtual support group

Facilitator: Dr Shari Smith

Ages 13 – 17

Every other Saturday

1PM – 2PM

Current dates:

5 March, 19 March, 2 April, 16 April, and 30 April
via Zoom (link provided upon registry)

Web: <https://alexpantonfoundation.ky/teen-talk/>

Email: support@alexpantonfoundation.ky

Breaking Barriers support group

Facilitator: Shane Purcell

Ages 18 – 30

Every Saturday, 12:30 PM – 2:00 PM

Parcel 110, 3rd Floor Royal Plaza, 40 Cardinal Avenue,
George Town, Grand Cayman

Web: <https://alexpantonfoundation.ky/support/>

Email: info@alexpantonfoundation.ky

Public Service Providers

Cayman Islands Crisis Centre

KidsHelpline:

+1 (345) 649-KIDS (5437)

Department of Counselling Services

Web: <https://www.dcs.gov.ky/our-services>

Tel: +1 (345) 949-8789

Email: FOI.DCS@gov.ky

Family Resource Center

Web: <http://www.frc.gov.ky/>

Tel: +1 (345) 949-0006

Email: frc@gov.ky

HSA Mental Health Services

Web: <https://hsa.ky/services-specialties/outpatient/>

Tel: +1 (345) 949-5600

Private Services Providers:

Achieve Cayman

Web: <https://achievecayman.com/contact-us>

Tel: Teena +1 (345) 327-9999,

Trisha +1 (345) 321-4100

Aspire Therapeutic Services

Web: <https://aspire.ky/>

Tel: +1 (345) 743-6700

Email: info@aspire.ky

Bethesda Counselling Centre

Web: <http://caymanetherapy.com>

Tel: +1 (345) 946-6575,

+1 (345) 923-6488

Email: bethesda@candw.ky

BHAC (Behavioural Health Associates Cayman)

Web: <https://bhac.ky/>

Tel: +1 (345) 746-0066

Email: info@bhac.ky

Cathy Alberga

Web: <https://www.caymanhealth.com/listing/alberga-catherine/>

Tel: +1 (345) 945-6570

Hope Academy Clinical Services

Web: <https://www.hopecayman.com/clinical-services>

Tel: +1 (345) 769-4673

Email: office@hopecayman.com

Infinite Mindcare

Web: <https://www.infinitemindcare.com/adolescents>

Tel: +1 (345) 926-0882

Email: info@infinitemindcare.com

Kidsability Ltd.

Web: <https://kidsability.ky/clinical-psychology-services/>

Tel: +1 (345) 943 5437

Email: info@kidsability.ky

Life Options Counselling Services

Web: <https://www.lifeoptions.ky/>

Tel: +1 (345) 940-LIFE (5433)

Email: info@lifeoptions.ky

OnCourse Cayman

Web: <https://oncoursecayman.com/services/>

Tel: +1 (345) 745-6463

Email: info@oncourse.ky

The Wellness Centre

Web: <https://wellnesscentre.ky/our-services/>

Tel: +1 (345) 949-9355

Email: info@wellnesscentre.ky

International Resources

Befrienders Worldwide

Web: <https://www.befrienders.org/>

Grassroots Suicide Prevention

Web: <https://prevent-suicide.org.uk/find-help-now/>