# Psychosocial Spiritual Alberta Community of Practice: Dementia and Grief

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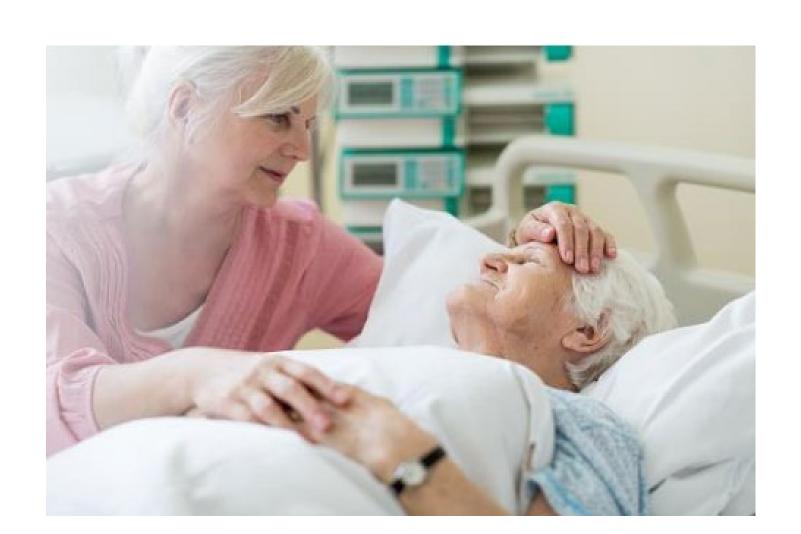
Vidhi Vinayak, Project Coordinator, Covenant Health Palliative Institute

#### Date:

April 24<sup>th</sup>, 2025







## Land Acknowledgement

We acknowledge that we are located on Treaty 6, 7 and 8 territories. We respect the histories, languages, and cultures of First Nations, Métis, Inuit, and all First Peoples of Canada, whose presence continues to enrich our vibrant community.







## The Palliative Care ECHO Project

The Palliative Care ECHO Project is a five-year national initiative to cultivate communities of practice and establish continuous professional development among health care providers across Canada who care for patients with life-limiting illness.

Stay connected: www.echopalliative.com





### Disclosures

The Palliative Care Public Awareness project is funded by the Government of Alberta. The views expressed herein do not necessarily represent the views of the Government of Alberta.





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- This session is being recorded.
- Please do <u>not</u> disclose any personal health information during the session.
- Your microphones are muted. When we invite participation, please unmute yourself if you'd like to speak at that time.
- If you experience technical difficulties, please let us know in the chat.





# Dementia and Grief: Helping Patients and Families through Anticipatory Loss and Grief

Becky VanTassel, BSW RSW, M.Ed

**AHS Grief Support Program** 



### Disclaimer

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### Alberta Health Services Grief Support Program Calgary Zone

Contact: 403-955-8011

www.albertahealthservices.ca



### Learning Goals

After attending this session participants will report:

- Increased awareness of the impact of grief and dementia for caregivers and people living with dementia
- Increased ability to identity grief when working with people living with dementia
- Increased knowledge of tools to respond to residents living with dementia regarding loss and grief







## Caring for yourself

We will all have experienced some form of loss. This session may bring up feelings of grief.

- Give yourself permission to feel
- Be gentle with yourself
- Look after your physical health
- Grief triggers or grief bursts are normal





## Two Categories of Loss

The *physical loss* of something tangible:

The *psychosocial loss* of something intangible:

 Like a death of a loved one, loss of one's home, possessions, the surgical removal of a body part  Like a divorce, development of chronic illness, loss of independence, a dream, a hope, a place





# Small Group Activity

In your small group you will spend 5 minutes discussing the losses that families and people living with dementia experience.





## Ambiguous Loss

 A loved one is physical present while psychologically absent, (Alzheimer's disease, ALS)

OR

 Physically absent but kept psychologically present, (divorce, estrangement, missing persons, refugee experiences, prisoners, kidnap victims)

Boss, P. (2006).

Services, Calgary Grief Support



# Small Group Work

For the next five minutes you will work with a small group to discuss the impact of ambiguous loss and how it affects people caring for those living with dementia.







# Understanding Anticipatory Grief: The 'Constant Companion' of Patients and Families

"In the context of dementia family caregiving, anticipatory grieving may extend over many years while family members witness deterioration in the affected person's cognitive, social, and physical functioning. Family caregivers also face changes in their roles and level of personal freedom while they contemplate the care recipient's inevitable incapacitation" (Garand et al., 2012).



### What is Anticipatory Grief?

- Anticipatory grief is a powerful form of grief.
- It is a response to the realization that the person is going to die and that the hope of being cured has diminished.
- Anticipatory grief is not always about the actual loss of life.
- It can accompany a major change in peoples lives such as loss of ability or function, change in roles. (Grieving before a death: Anticipatory grief and dementia caregivers – HopeHealth)



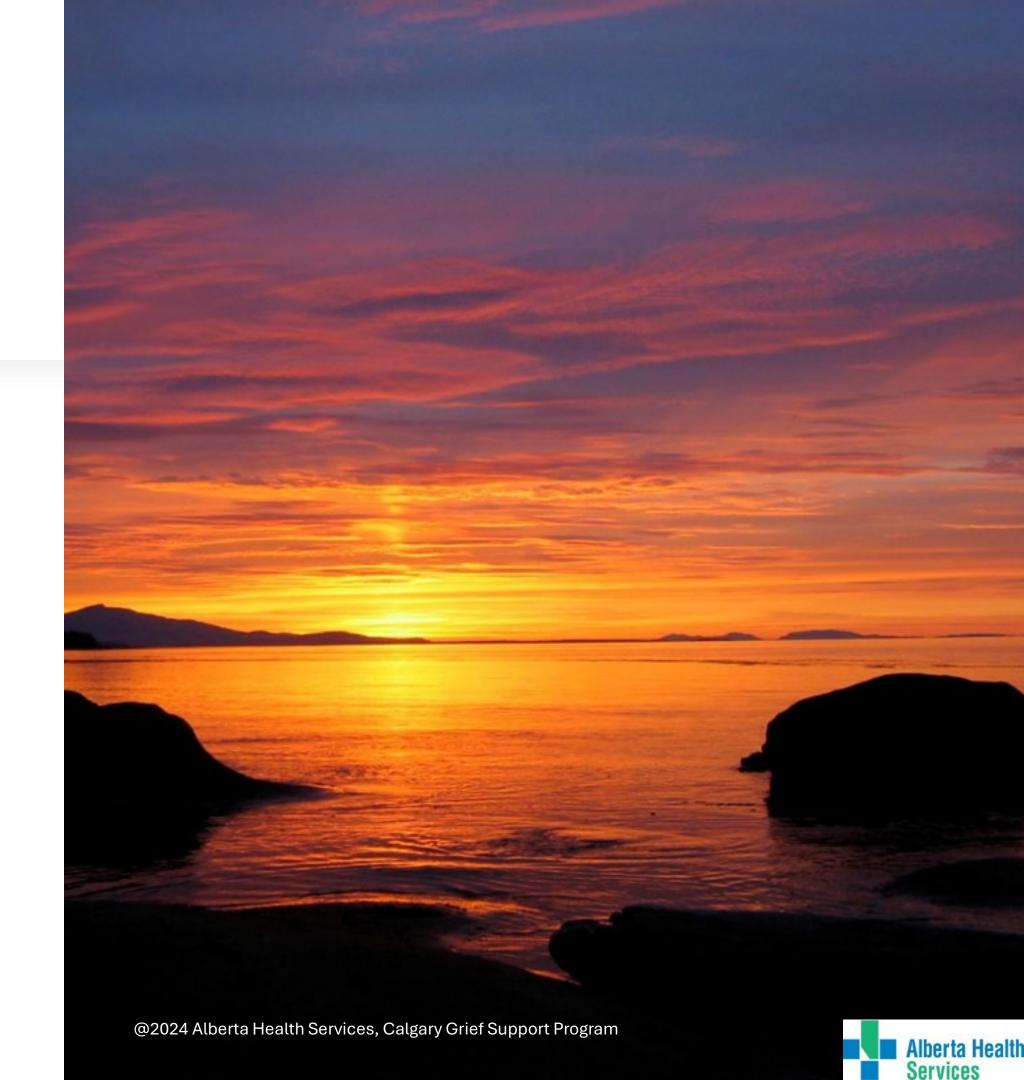
### Responding to Grief

When we are exposed to human pain it is natural to want to heal hurt and relieve suffering – our instinctive desire to fix, cure and make whole again is strong.

Grief support is more about

"being with" than "doing for"

Companioning not Curing





Responding to Anticipatory Grief Care for the Patient and the Family



### Responding to Anticipatory Grief

- Identify the Grief Response (anger, shock, crying)
- Be genuine
- Avoid trying to smooth over the loss with platitudes & explanations
- Let people know its OK to cry.... It's OK if you get a bit teary yourself
- Give permission for the griever to "take their time..." then be present and open to listen



### Responding to Anticipatory grief

- Act like a mirror reflect back what you think the patient or family member is saying, feeling or needing
- It is about supporting them, validating their feelings and sharing their feelings about what they are experiencing in the moment
  - "This is very how hard for you....I would be scared too"
  - "I can see tears in your eyes, can you tell me about your tears"
  - "Being afraid makes sense when you don't know what will happen next"
  - "You are feeling 'done'...it sounds like you have just had enough"
  - "He is your father, and I can see you love him very much"
  - "It is heartbreaking to watch someone you care for in so much pain.
  - "It seems important for you to be by her side in this moment"



### **Toolbox of Communication Skills Nurse Statements**

Toolbox of Communication Skills Nurse Statements *	
N. Name the emotion	"I see you are very frustrated"
U. Understand the emotions	"It sounds like this has been a long, hard journey for you and your family"
R. Respect what the patient, family or caregiver tells you	"Your love and devotion to your children and family have been so [apparent] to the staff"
S. Support the patient, family, and caregiver	"you don't need to do this alone, Our team will be here to help you along the way"
E. Explore the patient, family or caregiver concerns	"Can you tell me more about what worries you?"

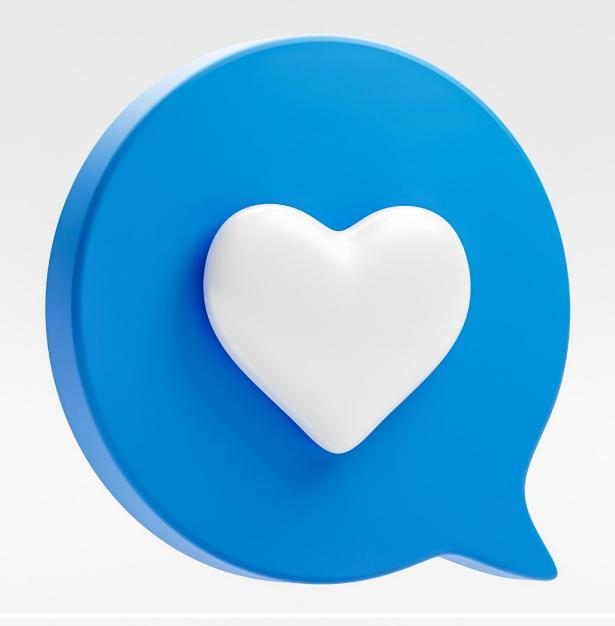
<sup>\*</sup> A framework of communication which focuses on recognizing, responding and

### Helpful Questions

### **Exploring the family experience:**

- Do you feel supported?
- What relationships are most important for you right now?
- What is the most difficult part of your loved one dying for you/ for your family?
- Is there anything that we should know about your family to best support and care for you through this
  difficult time?
- What are the losses you already experiencing in your relationship with your family member?





What are the questions or phrases that you like to use?



### Resources

 https://www.alzheimers.org.uk/sites/default/files/pdf/factsheet\_gr ief\_loss\_and\_bereavement.pdf

• ambiguous-loss-and-grief\_for-individuals-and-families.pdf

https://pmc.ncbi.nlm.nih.gov/articles/PMC4853283/



Any comments or questions please feel free to email me at

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### Evaluation



Psychosocial Spiritual Alberta
Community of Practice: Dementia and
Grief





## Upcoming Session

**Poetry in Therapy** 

**Date:** May 15, 2025

Presenter: Joanne Morcom, BSW, RSW, social worker, Extendicare Cedars Villa

In this session you will gain knowledge of the therapeutic uses of poetry, including for coping with serious illness and in grief work. Joanne will provide information about bibliotherapy, poetry as therapy and resources for further study. Participants will have the opportunity to read and discuss a sample poem in break-out rooms before reconvening for a final discussion





## Stay Connected



- Visit <u>Compassionate Alberta (covenanthealth.ca)</u> to access all our tools and resources.
- Please subscribe to our newsletter: <u>Palliative Institute | Compassionate</u>
   <u>Alberta newsletter</u>
- Contact us at: Palliative.Institute@covenanthealth.ca











### Thank You!

The Palliative Care ECHO Project is supported by a financial contribution from Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.



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