There is no larger or more diverse minority group than the disabled community. The challenges brought on this group are frequently related to misunderstanding, ill-advised policies, and social stigmas. While there are many subpopulations in the disabled community, few are as vulnerable and misunderstood as the intellectually and developmentally delayed population (IDD). Grief in adults with intellectual and developmental delay is similar to grief in a neurotypical adult. However, due to minimal research with this population, differences that do exist in their grieving are frequently unrecognized and ignored, leaving health care professionals with little knowledge on which to base their practice strategies. The misconceptions about this group have resulted in poorer quality of emotional long-term care after the death of a loved one when compared to neurotypical adults. Misconceptions include the idea that individuals with IDDs are unable to maturely understand death, comprehend complex emotions related to death, and experience grief in the same way as people who are neurotypical. Guardians and parents of individuals with IDDs tend to protect the individual from the death by withholding information or preventing the individual from having final moments with the dying or deceased individual. Studies addressing these misconceptions reject them and find that grieving individuals with IDDs are more likely to be disenfranchised, ignored, and isolated which then increases risk for complications such as depression, complicated grieving, and unhealthy mourning. There are evidence-based recommendations that can be made to enhance interactions with this population during times of bereavement. It is this project’s intention to outline the best practices for facilitating meaning-making, a natural coping mechanism after both death and non-death losses, for individuals with IDDs.