Beyond Recognized Loss: A Conceptual Analysis of Disenfranchised Grief in the Indian Socio-Cultural Context

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Abstract

Disenfranchised grief refers to grief that is not openly acknowledged, socially validated, or publicly supported, often leaving bereaved individuals without access to meaningful recognition or compassionate care. Although the concept has been extensively discussed in Western bereavement literature, its application within the Indian socio-cultural context remains relatively underexplored. This conceptual paper examines Kenneth Doka's typologies of disenfranchised grief and analyses their relevance within contemporary Indian society, where cultural traditions, family structures, gender norms, religious beliefs, and social stigma continue to shape experiences of loss and mourning. Drawing upon a synthesis of bereavement literature, the paper discusses five major typologies of disenfranchised grief: relationships that are not socially recognised, losses that are not acknowledged, individuals whose right to grieve is denied, deaths occurring under stigmatised circumstances, and socially prescribed expectations regarding grief expression. To enhance conceptual understanding, each typology is illustrated using secondary case narratives adapted from published literature and documented bereavement experiences. A conceptual framework is proposed to demonstrate the interaction between socio-cultural factors, the recognition of grief, and their psychological and social consequences. The paper argues that disenfranchised grief should be understood not only as an individual psychological experience but also as a socially constructed phenomenon that reflects broader issues of inequality, exclusion, and recognition. It concludes by highlighting the need for culturally responsive, inclusive, and person-centred approaches within social work, mental health services, and public health policy to ensure equitable bereavement support for individuals experiencing marginalised forms of grief. By contextualising Doka's framework within India, this paper contributes to the growing discourse on culturally informed bereavement care and provides a foundation for future empirical research and practice.

Keywords: Disenfranchised grief; bereavement; India; social work; grief recognition; cultural context; mental health.

1.Introduction

Grief is a universal yet deeply individual human experience that arises following the loss of a significant attachment. Traditionally associated with death, grief is now widely understood as a multidimensional response encompassing emotional, cognitive, behavioural, physical, social, and spiritual reactions to a broad range of losses. Contemporary bereavement literature recognises that individuals may grieve not only the death of a loved one but also non-death losses such as relationship dissolution, infertility, miscarriage, chronic illness, disability, migration, unemployment, loss of identity, and the collapse of anticipated futures. The intensity of grief is therefore shaped less by the objective nature of the loss than by the personal

meaning attached to it, making grief a highly subjective and culturally mediated experience (Neimeyer et al., 2022; Worden, 2018; Doka, 2020).

Although grief is considered a universal human response, societies do not recognise all losses equally. Every culture establishes explicit and implicit "grieving rules" that determine which losses are considered legitimate, who is entitled to mourn, how grief should be expressed, and how long mourning is socially acceptable. These social expectations influence access to rituals, emotional support, legal recognition, workplace accommodations, and communal validation. Consequently, while some bereaved individuals receive empathy and social support, others experience their losses in silence because their grief falls outside socially sanctioned boundaries. Such disparities demonstrate that grief is not merely an individual psychological response but also a socially constructed experience shaped by cultural norms, institutional practices, and interpersonal relationships (Doka, 1989, 2002, 2024; Turner & Stauffer, 2024).

To explain these often invisible experiences of loss, Kenneth Doka (1989) introduced the concept of **disenfranchised grief**, referring to grief that is not openly acknowledged, publicly mourned, or socially supported. Since its introduction over three decades ago, the concept has expanded considerably beyond hidden bereavement to encompass a diverse range of losses resulting from social exclusion, structural inequities, stigma, discrimination, and cultural marginalisation. Recent scholarship increasingly conceptualises disenfranchised grief as a phenomenon shaped by intersecting systems of identity, power, oppression, and social recognition, rather than solely by the characteristics of the bereaved individual or the loss itself. This evolving perspective has broadened the applicability of the concept across healthcare, mental health, social work, education, palliative care, and community practice (Turner & Stauffer, 2024; Doka, 2024; Mouton, 2023).

Disenfranchised grief may occur when the relationship between the bereaved and the deceased is not socially recognised, when the loss itself is minimised or stigmatised, when the characteristics of the bereaved person result in exclusion from mourning, when the circumstances surrounding the death evoke social discomfort or condemnation, or when an individual's style of grieving deviates from prevailing cultural expectations. Such experiences deprive individuals of opportunities for social acknowledgment, participation in mourning rituals, and emotional validation, thereby increasing vulnerability to prolonged psychological distress, social isolation, and complicated bereavement. Emerging evidence further demonstrates that disenfranchisement extends beyond death-related losses to include reproductive loss, ambiguous loss, pet bereavement, occupational loss, migration, identity transitions, and other significant disruptions that remain socially invisible (Doka, 2020, 2024; Turner & Stauffer, 2024; Mouton, 2023).

The Indian context presents a particularly important setting for examining disenfranchised grief. While India possesses rich religious traditions and elaborate mourning rituals that often provide collective support following socially recognised deaths, these same socio-cultural structures may inadvertently invalidate losses that fall outside conventional definitions of bereavement. Experiences such as miscarriage, abortion, infertility, divorce, same-sex relationships, live-in partnerships, suicide, pet loss, dementia-related changes, estrangement, mental illness, and non-traditional family relationships frequently remain unacknowledged or are actively silenced due to stigma, family honour, gender norms, religious beliefs, and social expectations. Consequently, many individuals experience profound grief without access to culturally sanctioned opportunities for mourning or psychosocial support (Doka, 2024; Turner & Stauffer, 2024; Neimeyer et al., 2022).

Despite the growing international literature on disenfranchised grief, comparatively little scholarly attention has been devoted to understanding its diverse manifestations within the Indian socio-cultural context. Existing discussions have largely focused on specific populations or isolated forms of loss, with limited

efforts to integrate theory, contemporary scholarship, and culturally grounded examples that illustrate how disenfranchised grief is experienced in everyday life. Addressing this gap, the present paper provides a conceptual examination of disenfranchised grief through the lens of the Indian context. Drawing upon contemporary bereavement literature and anonymised illustrative practice vignettes, the paper examines the major typologies of disenfranchised grief, explores the socio-cultural processes that invalidate mourning, and discusses implications for social work practice, grief counselling, and bereavement care.

2.Conceptual Approach

This paper adopts a conceptual approach to examine the phenomenon of disenfranchised grief within the Indian socio-cultural context. Rather than presenting primary empirical findings, the discussion synthesises established theoretical perspectives and contemporary bereavement literature to critically examine Doka's typologies of disenfranchised grief and their implications for social work and mental health practice. To facilitate understanding and demonstrate the practical relevance of each typology, the paper incorporates secondary illustrative case narratives adapted from published literature and documented bereavement experiences. These illustrative examples are intended solely to contextualise the theoretical discussion and should not be interpreted as original empirical data. The conceptual framework presented in this paper similarly represents a synthesis of the reviewed literature rather than a validated theoretical model.

3.Typologies of Disenfranchised Grief

Kenneth Doka (1989) proposed that disenfranchised grief is not a singular experience but rather a multifaceted phenomenon that arises when social norms fail to recognise, validate, or support an individual's experience of loss. Rather than being determined solely by the death of a loved one, disenfranchisement is shaped by the interaction between the bereaved individual and the social environment in which grieving occurs. Social attitudes, cultural beliefs, institutional policies, and interpersonal relationships collectively determine whether a particular loss is acknowledged as worthy of public mourning. Consequently, grief may become disenfranchised because of the nature of the relationship, the characteristics of the loss, the identity of the bereaved, the circumstances surrounding the death, or the manner in which grief is expressed (Doka, 1989, 2002, 2020, 2024).

Although these typologies were originally conceptualised within Western societies, they provide a valuable framework for understanding grief experiences across diverse cultural settings. However, the ways in which these typologies are manifested are shaped by local socio-cultural realities. In India, where kinship structures, religious traditions, family honour, gender expectations, and collective identities strongly influence social life, the boundaries of legitimate grief are often defined by cultural norms rather than by the emotional significance of the loss itself. Consequently, individuals may experience profound grief while simultaneously being denied social recognition, communal support, or opportunities to participate in culturally meaningful mourning practices. The following sections examine Doka's five typologies of disenfranchised grief through an Indian socio-cultural lens, illustrating how each manifests within contemporary Indian society and highlighting its implications for bereavement care and social work practice.

3.1When the Relationship is Not Recognized

One of the most widely discussed forms of disenfranchised grief occurs when the relationship between the bereaved individual and the deceased is not socially acknowledged or considered legitimate. According to Doka (1989), societies establish explicit and implicit rules regarding who is entitled to grieve. Relationships that fall outside culturally recognised definitions of family, marriage, or kinship are often denied public recognition, despite the depth of emotional attachment they may represent. Consequently, individuals

grieving such relationships may be excluded from mourning rituals, denied social support, and deprived of opportunities to express their grief openly. Subsequent scholarship has demonstrated that this form of disenfranchisement extends beyond bereavement following death to include relationships that are socially hidden, legally unrecognised, or culturally marginalised (Doka, 2002, 2020, 2024; Turner & Stauffer, 2024).

Within the Indian context, the recognition of grief remains closely linked to socially sanctioned family structures and kinship systems. Participation in funeral rituals, condolence practices, and collective mourning is largely determined by legal and familial relationships, leaving limited space for acknowledging emotionally significant relationships that exist outside conventional norms. Individuals grieving the death of a close friend, an unmarried partner, a same-sex partner, a foster child, a mentor, or a long-term caregiver frequently receive little recognition despite experiencing profound emotional distress. The increasing diversity of interpersonal relationships in contemporary India, driven by urbanisation, migration, changing family structures, and evolving social values, has further widened the gap between lived relationships and culturally recognised relationships. As a result, many bereaved individuals experience grief that remains invisible not because the attachment lacked emotional significance, but because society fails to recognise the relationship as worthy of mourning.

An illustrative example is that of Ajay and Rohan, who shared a committed relationship for over six years while living together in Kochi. Although they had built a life together, their relationship remained publicly concealed due to prevailing social attitudes. Following Rohan's sudden death in a road traffic accident, Ajay was excluded from hospital decision-making, funeral rituals, and family mourning. His bereavement received little acknowledgement from colleagues, relatives, or the wider community because his relationship with the deceased was never publicly recognised. Despite experiencing the profound loss of a life partner, his grief remained socially invisible, exemplifying Doka's concept of grief without social permission.

The invisibility of such relationships has important implications for bereavement care and social work practice. Professionals working with bereaved individuals must recognise that emotional attachment, rather than legal or biological status, often determines the significance of a loss. Expanding definitions of legitimate relationships within grief support services is therefore essential to ensuring that individuals experiencing disenfranchised grief receive recognition, validation, and opportunities for meaningful mourning irrespective of socially sanctioned family roles.

3.2When the Loss is Not Acknowledged

Disenfranchisement may arise not only because of who is grieving but also because the loss itself is considered socially insignificant, morally ambiguous, or unworthy of public acknowledgement. While grief is traditionally associated with death, contemporary bereavement scholarship recognises that individuals experience profound grief following a wide range of non-death losses that disrupt significant attachments, identities, life roles, and anticipated futures (Doka, 2020; Neimeyer et al., 2022). However, when these losses fall outside culturally accepted definitions of bereavement, they frequently remain invisible within both personal relationships and institutional responses. Individuals are often expected to minimise their emotional reactions, recover quickly, or simply "move on," despite experiencing psychological distress comparable to that associated with recognised bereavement.

Doka (1989, 2002) argues that society implicitly determines which losses are worthy of mourning by attaching greater legitimacy to some experiences while dismissing others as ordinary life events. Over the past two decades, the concept of disenfranchised grief has expanded considerably to include reproductive loss, infertility, chronic illness, dementia-related changes, occupational loss, migration, divorce, pet bereavement, and the loss of meaningful identities or future aspirations (Doka, 2024; Turner & Stauffer,

2024). These losses often lack established mourning rituals, social acknowledgement, or institutional support, creating a disconnect between the individual's lived experience and society's recognition of that experience. Consequently, the absence of validation may intensify feelings of loneliness, shame, and self-doubt while complicating the meaning-making processes that are central to healthy adaptation following loss.

Within the Indian context, the acknowledgement of loss is strongly influenced by socio-cultural beliefs regarding family, reproduction, productivity, and social status. Experiences such as miscarriage, medically indicated abortion, infertility, divorce, involuntary childlessness, unemployment, or the progressive psychological loss associated with dementia are frequently interpreted through moral, religious, or familial lenses rather than recognised as legitimate experiences of grief. Women experiencing pregnancy loss may be encouraged to focus on future pregnancies instead of being given space to mourn the child they had already begun to imagine. Similarly, families caring for a loved one with dementia often grieve the gradual loss of the person's identity while simultaneously receiving little recognition because the individual remains physically alive. Occupational loss, forced migration, or the loss of valued social roles may likewise evoke profound grief, yet these experiences are seldom acknowledged within conventional bereavement discourse. In each of these situations, it is not the absence of grief that creates suffering, but the absence of social permission to grieve.

An illustrative example is that of Neha, a 27-year-old woman who underwent a medically indicated second-trimester abortion following the diagnosis of severe congenital anomalies in the fetus. Although the decision was made on medical grounds, the emotional consequences were overwhelming. She experienced persistent sadness, guilt, and the loss of an imagined future with her child. Yet her grief remained largely invisible. Family members encouraged her to "move on," friends attempted to minimise the loss by emphasising that another pregnancy was possible, and no mourning rituals acknowledged the significance of her experience. Bereaved not only of her unborn child but also of the opportunity to grieve openly, Neha's experience illustrates how reproductive loss may become disenfranchised when society fails to recognise its emotional significance.

Recognising non-death losses as legitimate experiences of grief has important implications for bereavement care and social work practice. Limiting grief solely to experiences of death overlooks the psychological impact of many life-altering events that fundamentally reshape an individual's identity, relationships, and future expectations. Expanding professional understanding of bereavement beyond traditional definitions enables practitioners to identify hidden forms of grief, validate clients' experiences, and provide more inclusive and culturally responsive psychosocial support.

3.3 When the Griever is Excluded

Disenfranchised grief may also arise when the characteristics of the bereaved individual become the basis for excluding them from the grieving process. Unlike other forms of disenfranchisement, where grief is invalidated because of the nature of the relationship or the loss itself, this typology is rooted in assumptions about who is considered capable of experiencing or expressing grief. Kenneth Doka (1989) observed that certain groups—including children, older adults, individuals with intellectual disabilities, people living with severe mental illness, and those occupying socially marginalised positions—are frequently denied recognition as legitimate mourners. Their grief is often overlooked not because it is absent, but because society underestimates their emotional capacity or assumes they are unable to comprehend the significance of the loss.

Contemporary bereavement research challenges these assumptions, demonstrating that grief is not limited by age, cognitive ability, or disability. Children experience grief in developmentally distinct ways and require

honest communication, inclusion, and opportunities to participate in mourning rituals to facilitate healthy adjustment (Worden, 2018). Similarly, individuals with intellectual and developmental disabilities are capable of forming deep emotional attachments and experiencing profound grief, although their expressions of bereavement may differ from socially expected patterns. Excluding such individuals from funerals, memorial services, or conversations about death may deprive them of opportunities for meaning-making, emotional expression, and social support, thereby increasing the risk of unresolved grief and long-term psychological distress (Doka, 2002; Neimeyer et al., 2022).

Within the Indian context, protective family practices often unintentionally contribute to this form of disenfranchisement. Children are frequently shielded from funerals and informed that the deceased has "gone away" or is "sleeping," with the intention of protecting them from emotional pain. Likewise, older adults may be deliberately excluded from discussions surrounding the death of a loved one due to concerns about their physical health or emotional resilience. Individuals with intellectual disabilities or severe mental illness are often denied participation in mourning rituals because families assume they will not understand the event or may disrupt religious ceremonies. While these actions are generally motivated by care and concern, they inadvertently deny individuals the opportunity to acknowledge the reality of the loss, participate in culturally meaningful rituals, and receive communal support during bereavement.

An illustrative example is that of Raju, a 32-year-old man from a village in kerala with an intellectual disability who lived his entire life with his mother, who was his primary caregiver and source of emotional security. Following her sudden death, family members decided that he should not attend the funeral, believing that he would neither understand the event nor cope appropriately with the rituals. Instead, he was told that his mother had "gone to sleep" and was left at home while the funeral took place. In the days that followed, Raju repeatedly searched for his mother, waiting outside the house and calling her name, unable to understand her absence. His grief was not recognised because of his disability, illustrating how assumptions about cognitive ability can deprive individuals of the fundamental right to grieve.

Recognising excluded grievers as legitimate mourners has significant implications for social work and bereavement practice. Rather than protecting vulnerable individuals through exclusion, practitioners should advocate for developmentally and cognitively appropriate participation in mourning rituals, honest communication about death, and inclusive bereavement support. A person-centred approach that acknowledges diverse capacities for grief not only promotes emotional well-being but also affirms the dignity and humanity of every bereaved individual, irrespective of age, disability, or social position.

3.4 Circumstances of the Death

Disenfranchised grief may arise not only from the relationship between the bereaved and the deceased or the characteristics of the mourner, but also from the circumstances surrounding the death itself. Kenneth Doka (1989) argued that certain deaths evoke discomfort, fear, shame, or moral judgement, resulting in the bereaved receiving less social acknowledgement and support than those grieving socially accepted losses. Deaths associated with suicide, substance use, HIV/AIDS, homicide, execution, or other stigmatized circumstances are frequently accompanied by silence, secrecy, and social distancing. Consequently, bereaved individuals are often required to navigate both the emotional pain of the loss and the societal stigma attached to the manner in which the death occurred (Doka, 1989, 2002; Rando, 1993).

Recent scholarship has demonstrated that stigma surrounding particular causes of death significantly shapes bereavement experiences. Individuals bereaved by suicide frequently report feeling blamed, judged, socially isolated, and reluctant to seek support because of anticipated negative reactions from others. Rather than receiving empathy, families often encounter subtle or overt messages that the death should not be openly

discussed, reinforcing feelings of shame and social withdrawal. Contemporary systematic reviews have therefore described suicide bereavement as a uniquely disenfranchising experience in which grief is complicated not only by the traumatic nature of the death but also by relational and institutional processes that invalidate mourning. Similar patterns have been reported among families bereaved by substance-related deaths and other socially stigmatised causes of mortality.

Within the Indian context, the social meaning attached to a person's death often determines the extent to which the bereaved are permitted to grieve openly. Deaths by suicide continue to carry considerable stigma despite increasing public awareness of mental health. Families may deliberately conceal the cause of death to avoid community gossip, discrimination, or concerns regarding family reputation and future marriage prospects. Likewise, deaths associated with HIV/AIDS, substance dependence, honour-based violence, or criminal activity may be surrounded by secrecy, limiting opportunities for collective mourning and psychosocial support. Religious beliefs and local customs may further influence funeral practices, sometimes restricting participation in traditional rituals or discouraging open conversations about the deceased. As a result, bereaved family members frequently experience a dual burden—coping with their personal grief while simultaneously managing the social consequences of a stigmatised death.

An illustrative example is that of Aparna, a 21-year-old woman from Bangalore whose elder sister died by suicide. Following the funeral, her family intentionally avoided referring to the death as suicide, instead describing it as a sudden medical illness. Whenever Aparna attempted to speak about her sister, conversations were quickly redirected, and she was repeatedly reminded not to disclose the circumstances of the death because it might damage the family's reputation. Over time, photographs of her sister disappeared from the home, and her name was rarely mentioned. Although Aparna continued to grieve intensely, the silence surrounding the death deprived her of opportunities to share memories, seek emotional support, or openly acknowledge her loss. Her experience illustrates how social stigma surrounding suicide may disenfranchise grief by denying survivors both recognition and the freedom to mourn.

For social workers and mental health professionals, recognising the influence of death-related stigma is essential for effective bereavement care. Interventions should extend beyond addressing emotional distress to include challenging societal stigma, facilitating safe opportunities for remembrance, and creating environments where bereaved individuals can speak openly about their loss without fear of judgement. Trauma-informed, culturally sensitive, and non-judgemental approaches are particularly important when supporting families affected by socially stigmatised deaths.

3.5 Different Ways Individuals Grieve

Disenfranchised grief may also emerge when an individual's manner of grieving fails to conform to prevailing social expectations. Although grief is widely recognised as a universal response to loss, there is no single "correct" way to grieve. Emotional expression varies considerably across individuals and is influenced by personality, culture, gender, previous experiences of loss, and available social support. However, societies frequently prescribe how grief should be displayed, how long mourning should continue, and which emotional responses are considered appropriate. Individuals whose grieving styles differ from these expectations may find their grief questioned, criticised, or invalidated, thereby experiencing another form of disenfranchisement (Doka & Martin, 2010; Doka, 2020).

Doka and Martin (2010) distinguish between **intuitive** and **instrumental** grieving styles. Intuitive grievers primarily express their grief through emotions, openly sharing sadness, crying, and seeking interpersonal support. Instrumental grievers, in contrast, tend to process grief cognitively or behaviourally, often focusing on practical responsibilities, problem-solving, or maintaining routines rather than overt emotional expression.

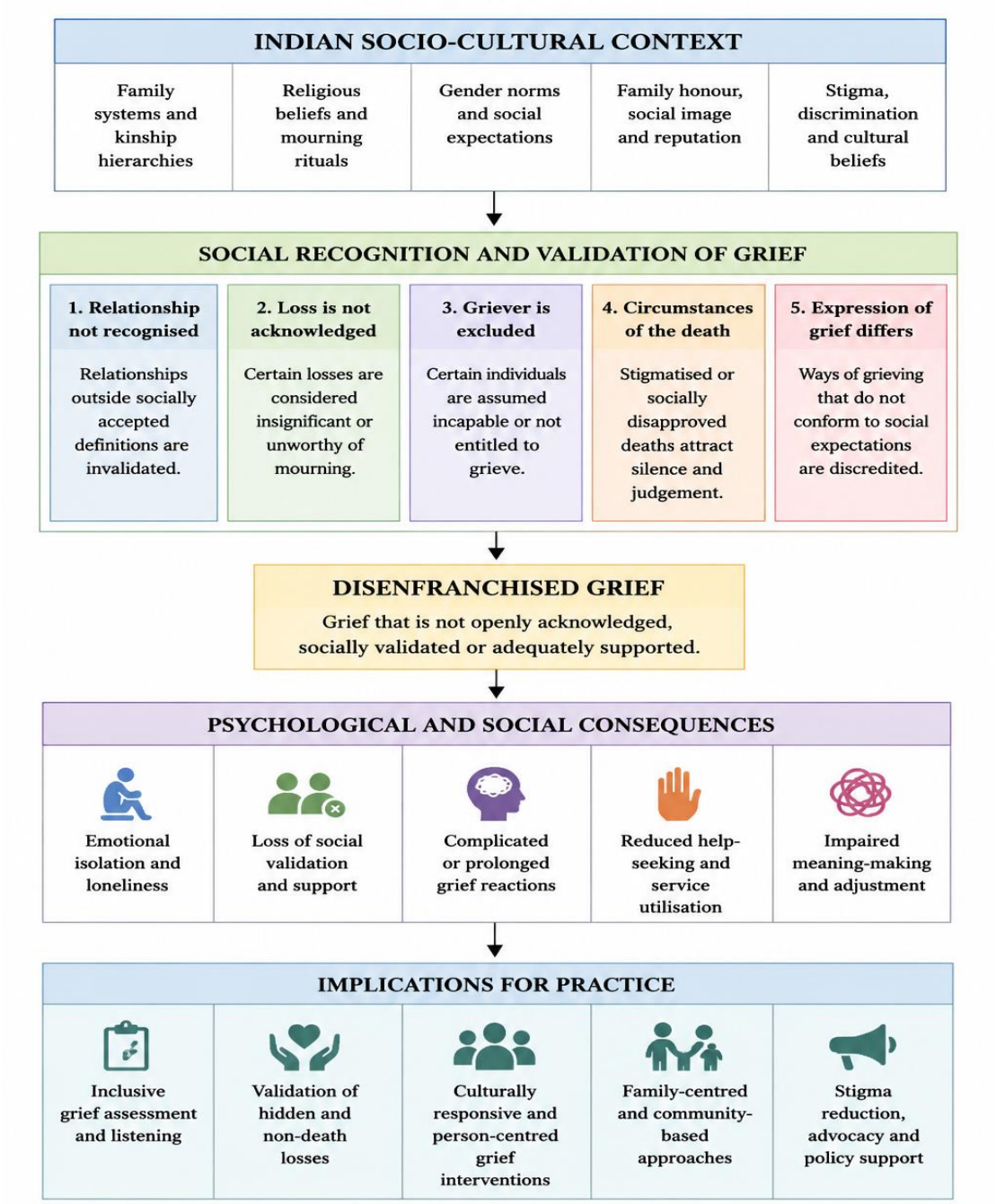
These grieving styles exist on a continuum, with most individuals demonstrating characteristics of both. Problems arise when culturally prescribed expectations favour one style over another, leading others to interpret alternative expressions of grief as evidence of emotional detachment, denial, or inadequate attachment to the deceased.

In India, cultural expectations surrounding grief expression are strongly shaped by gender roles, family traditions, and community norms. Women are generally afforded greater social acceptance for expressing sadness openly, whereas men are often expected to remain composed, fulfil family responsibilities, and suppress emotional vulnerability. Similarly, some communities value visible expressions of mourning, including crying and ritual lamentation, while others regard emotional restraint as a sign of maturity and resilience. Individuals whose responses deviate from these expectations may experience criticism from family members or the wider community. A bereaved person who does not cry may be perceived as uncaring, while someone who continues to express grief months or years after the loss may be encouraged to "move on" or accused of dwelling excessively on the past. Such reactions reinforce the misconception that grief follows a universal trajectory rather than recognising it as a highly individual process.

An illustrative example is that of Rajesh from telengana, a 28-year-old man who lost his mother following a prolonged illness. During the funeral and the weeks that followed, he remained composed and rarely displayed visible signs of emotional distress. Relatives interpreted his silence as indifference, with some questioning whether he had truly loved his mother. Unbeknownst to them, Rajesh continued to honour her memory through quiet daily rituals, preparing her morning tea and leaving a cup outside her room long after her death. His grief was expressed through routine, remembrance, and private acts of continuing bonds rather than through overt emotion. Yet because his mourning did not align with socially expected expressions of bereavement, his grief was misunderstood and invalidated.

Recognising diverse grieving styles is fundamental to culturally competent bereavement care. Social workers, counsellors, and mental health professionals should avoid evaluating grief according to culturally prescribed standards of emotional expression and instead appreciate the multiple ways in which individuals adapt to loss. Validating different grieving styles not only reduces the risk of disenfranchisement but also promotes more inclusive, person-centred, and culturally responsive bereavement support.

Figure 1: Conceptual Framework of Disenfranchised Grief in the indian socio cultural context



Source: Developed by the authors based on Doka (1989, 2002), Doka and Martin (2010), and the literature reviewed in this paper.

To synthesise the concepts discussed throughout this paper, Figure 1 presents a conceptual framework illustrating how disenfranchised grief emerges through the interaction between socio-cultural influences and the recognition of grief within the Indian context. Building on Doka's (1989, 2002) typologies, the framework demonstrates that cultural norms, family structures, religious beliefs, gender expectations, social stigma, and relationship legitimacy shape whether a person's grief is acknowledged, validated, or marginalised. When grief remains unrecognised due to the nature of the relationship, the type of loss, the characteristics of the griever, the circumstances surrounding the death, or socially prescribed expectations regarding grief expression, individuals may experience disenfranchised grief. The framework further illustrates the potential psychological and social consequences of such invalidation, including emotional isolation, reduced social support, complicated grief reactions, and barriers to help-seeking. Finally, it highlights the need for culturally responsive, inclusive, and person-centred social work and mental health interventions that recognise diverse grief experiences and promote equitable bereavement care.

4.Implications for Social Work and Mental Health Practice

Disenfranchised grief presents significant challenges for social work and mental health practice because it often remains unrecognised, unsupported, and insufficiently addressed within conventional bereavement services. Individuals experiencing disenfranchised grief frequently encounter not only the emotional consequences of loss but also the additional burden of social invalidation, stigma, and exclusion. Consequently, professionals must move beyond traditional understandings of bereavement that primarily focus on death-related losses and adopt more inclusive, culturally responsive, and person-centred approaches to grief assessment and intervention.

4.1 Expanding the Recognition of Grief

A fundamental implication of disenfranchised grief is the need for practitioners to broaden their understanding of what constitutes a legitimate loss. Social workers and mental health professionals frequently encounter individuals grieving experiences that extend beyond bereavement through death, including divorce, infertility, pregnancy loss, migration, dementia, chronic illness, job loss, loss of identity, and disrupted family relationships. Such losses often remain invisible because they are not socially recognised as deserving of grief. Comprehensive psychosocial assessments should therefore explore both death-related and non-death losses, acknowledging that the subjective meaning of a loss is often more important than its objective nature. Validating these experiences enables individuals to express emotions openly, reduces feelings of isolation, and facilitates healthier adaptation to loss (Attig, 2004; Doka, 2002; Neimeyer, 2016).

4.2 Promoting Culturally Responsive Bereavement Care

Bereavement care cannot be separated from the cultural contexts within which grief occurs. In India, religious beliefs, collectivist family structures, gender norms, and community expectations significantly influence how grief is experienced and expressed. While these cultural traditions often provide valuable sources of support and meaning, they may also contribute to the disenfranchisement of individuals whose losses or grieving styles deviate from accepted norms. Practitioners should therefore demonstrate cultural humility by understanding local mourning rituals, respecting religious diversity, and recognising the influence of family dynamics without reinforcing practices that invalidate grief. Culturally responsive care requires balancing respect for tradition with advocacy for the emotional needs and rights of bereaved individuals, particularly those whose grief remains socially marginalised (Rosenblatt, 2008; Klass, 2014).

4.3 Inclusive Assessment and Therapeutic Intervention

The diversity of disenfranchised grief necessitates flexible, person-centred interventions rather than standardised approaches to bereavement care. Social workers should adopt strengths-based and trauma-informed perspectives that recognise each individual's unique grief experience while avoiding assumptions regarding how grief "should" be expressed. Interventions such as grief counselling, narrative approaches, meaning reconstruction, family therapy, and support groups may help individuals reconstruct meaning following socially unacknowledged losses. Likewise, practitioners should actively create safe therapeutic environments where clients feel validated regardless of the nature of their relationship, the circumstances of the loss, or their preferred style of grieving. Such approaches reinforce dignity, reduce shame, and encourage adaptive coping (Neimeyer, 2016; Doka & Martin, 2010).

4.4 Strengthening Community Awareness and Public Policy

Addressing disenfranchised grief requires interventions that extend beyond individual counselling to include community education and policy development. Improving grief literacy among schools, workplaces, healthcare institutions, faith communities, and the general public can reduce stigma and foster greater social recognition of diverse grief experiences. Bereavement policies should acknowledge a wider range of significant relationships and losses rather than limiting support to immediate family members. Educational programmes for health and social care professionals should also incorporate training on disenfranchised grief, cultural competence, and inclusive communication to improve service delivery. Public awareness initiatives that challenge myths surrounding grief and promote compassionate responses may further reduce the social isolation frequently experienced by disenfranchised mourners.

4.5 Directions for Future Research

Despite growing international interest in disenfranchised grief, empirical research within the Indian context remains limited. Future studies should explore culturally specific manifestations of disenfranchised grief across diverse populations, including children, older adults, caregivers, LGBTQ+ individuals, migrants, people living with disabilities, and families affected by suicide, substance use, or chronic illness. Longitudinal research examining the long-term psychological and social consequences of socially invalidated grief would contribute substantially to bereavement scholarship. There is also a need to develop culturally sensitive assessment tools and evaluate the effectiveness of interventions specifically designed for disenfranchised grief. Such evidence would strengthen both clinical practice and social work education while informing policies that promote equitable bereavement support.

Overall, recognising disenfranchised grief extends beyond acknowledging hidden losses; it requires transforming the ways in which professionals, families, communities, and institutions respond to bereavement. By adopting inclusive, culturally responsive, and evidence-informed approaches, social workers and mental health professionals can ensure that individuals whose grief has historically remained invisible are afforded the validation, support, and opportunities for healing that every bereaved person deserves.

5.Conclusion

Disenfranchised grief remains one of the least recognised yet profoundly consequential forms of bereavement, challenging conventional assumptions regarding who is entitled to grieve, which losses are considered legitimate, and how mourning should be expressed. Building upon Doka's conceptualisation, this paper has demonstrated that grief is shaped not only by the experience of loss itself but also by the socio-cultural processes that determine whether that loss is acknowledged, validated, and supported. Through an examination of the major typologies of disenfranchised grief and their relevance within the Indian socio-cultural context, the paper highlights how cultural norms, family expectations, gender roles, religious beliefs, and societal stigma continue to influence the recognition of grief and access to compassionate support.

The discussion further illustrates that disenfranchised grief extends beyond individual psychological distress and represents a broader social and ethical concern. Individuals grieving losses that fall outside culturally sanctioned narratives including perinatal loss, socially unrecognised relationships, stigmatized deaths, and marginalised identities often experience silence, exclusion, and reduced opportunities for meaning-making and communal support (Bindley et al., 2019; Albuquerque et al., 2021; Wojtkowiak et al., 2021). Such experiences not only hinder emotional recovery but may also contribute to prolonged grief reactions, social isolation, and poorer mental health outcomes (Sköld, 2021; Mouton, 2024). As Heazell et al. (2016) argue in

relation to pregnancy and infant loss, the absence of social recognition may itself become an additional source of suffering, reinforcing the need for compassionate and inclusive bereavement care.

Within the Indian context, the continued under-recognition of disenfranchised grief calls for a shift towards culturally responsive and socially inclusive approaches that challenge patriarchal assumptions, stigma, and restrictive norms governing bereavement (Kolte & Mohan, 2024; Singh & Mittal, 2025). Strengthening grief literacy, expanding bereavement services, and integrating the principles of disenfranchised grief into social work education, mental health practice, and public health policy are essential steps towards ensuring equitable support for all bereaved individuals. Recognising grief in all its diverse forms is not merely a therapeutic responsibility but a matter of social justice, affirming every individual's right to mourn with dignity, receive validation, and access compassionate care irrespective of the nature of their loss or the circumstances surrounding it.

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