Disenfranchised grief (DG) refers to grief that is not or cannot be openly acknowledged, publicly mourned, socially supported, or that is misunderstood or trivialized. At times, this is related to characteristics of the bereaved. For example, it may be assumed that a bereaved person’s relationship (e.g., ex-spouse, coworker) does not elicit the same grief as an immediate family member or current spouse. Some people are assumed to have less ability to experience grief, such as the young, the elderly, and those with special needs. In addition, the way one expresses their grief may result in disenfranchisement if their response is not an anticipated or conventional emotional response (e.g., humor, anger, or mourning longer than expected by others).

Circumstances that Can Result in DG

- Certain types of losses that are assumed to be less significant, such as the loss of a pet or a loss due to miscarriage or stillbirth.
- Where stigma results in denial or withdrawal of sympathy, validation, and social support for those who are grieving, such as deaths from suicide or homicide, deaths resulting from criminal activity, drug-related deaths, or deaths due to AIDS.
- Mass casualty events where the careful attention to individual deaths is not possible, or when there is an inability to publicly mourn or grieve in ways that are consistent with cultural or religious practices (as during COVID-19 pandemic quarantine restrictions).

The Importance of Identifying DG

- Understanding of DG draws attention to how social responses to loss affect an individual’s grief processes.
- Greater awareness of DG encourages the questioning of assumptions that people “should” grieve in certain ways.
- DG has been associated with:
  - Depression
  - Complicated grief/prolonged grief disorder
  - Social isolation
  - Adverse changes in how one views oneself or the world

What Can be Done to Help

- Acknowledge the importance of the loss by offering sympathy, learning about, respecting, and participating in mourning rituals with the bereaved.
- Accept the emotional responses of someone who has suffered a loss rather than judging its appropriateness.
- Encourage adaptive coping responses and self-care (e.g., getting adequate sleep, eating a balanced diet, exercising, spending time with loved ones, enjoying other healthy activities).
- Promote use of therapeutic cultural and/or religious rituals and supports.
- Support engagement with community and peer support groups, including through the careful use of technology and social media.
- Identify those who need professional mental health treatment (especially for those who exhibit intense or long-lasting grief responses that impair daily functioning) and provide referrals as needed.