

DR. TASHA MAC

RESEARCH RESPONSE

October 3, 2026

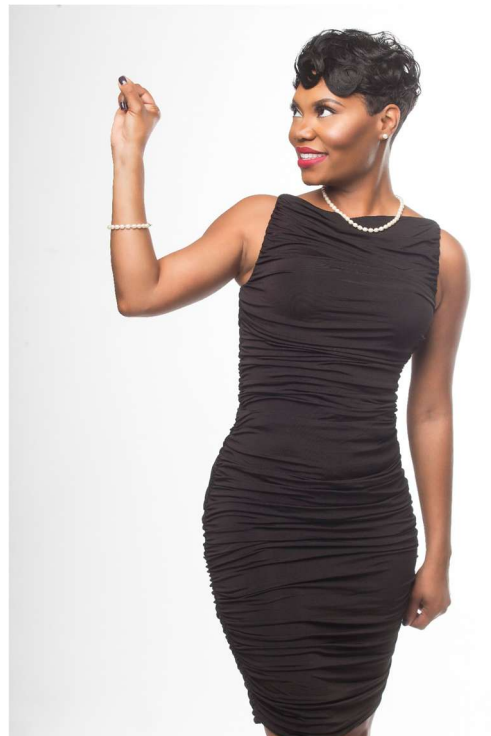
Why Grief, Identity Disruption, and Social Recognition **Must Be Measured Separately**

A construct separation argument for studying loss, self continuity, and the recognition environment

Dr. Tasha Mac

Identity Integration Scientist | Founder, The Reset Studios™

www.drashama.com | tasha@theresetstudios.com



Identity Integration Science™ • Identity Architecture Model™ • Grief Pathway System™

© 2026 Dr. Tasha Mac and The Reset Studios™. All Rights Reserved.

Identity Integration Science™, Identity Architecture Model™, Grief Pathway System™, and associated language are proprietary intellectual property. No content may be reproduced, recreated, adapted, distributed, transmitted, or used to create derivative works without prior written permission.

Recent research examining Long COVID and morally complicated grief reveals an important measurement problem: grief, identity disruption, and social recognition often occur together, but they are not the same phenomenon.

When researchers combine them under one broad label, it becomes difficult to determine what has actually changed, what produced the change, and which form of support may be appropriate. Emotional pain may be interpreted as identity disruption. Identity conflict may be treated as a grief symptom. Social invalidation may be attributed to an individual's inability to cope.

Scientific precision requires these constructs to be measured separately before their relationships are tested.

Three related but distinct constructs

Grief describes a response to perceived loss, irreversible change, unmet expectation, or the disappearance of a previously available reality. A person may grieve physical capacity, occupational status, relational possibility, bodily predictability, moral certainty, or an anticipated future.

Identity disruption concerns changes in the structure and continuity of the self. It may involve conflict between former and current identities, inability to perform a valued role, rupture in one's life narrative, diminished self-recognition, or uncertainty about the identity that can emerge next.

Social recognition concerns whether other people and institutions acknowledge the loss, changed capacity, moral complexity, or emerging identity as legitimate. Recognition may include belief, validation, accommodation, relational permission, and institutional response. Its absence may appear as disbelief, stigma, silence, exclusion, moral condemnation, or pressure to resume a former role.

These constructs may interact, but interaction does not establish equivalence.

What the emerging evidence shows

Holmes-McCoid and Lecky's 2026 systematic review of Long COVID and self-identity synthesized 21 qualitative studies involving 613 participants. Four themes emerged: grief and loss of the familiar self, identity reflected through other people's responses, threats to identity, and efforts to repair a fractured identity.

These findings demonstrate convergence, but they also expose important distinctions. Grieving a former capacity is not identical to losing continuity of self. Being disbelieved by family members, employers, or healthcare professionals is not simply another grief symptom. It is a social condition that may influence how the person interprets the loss and whether a changed identity can be incorporated without shame.

Similarly, Shaw and colleagues' 2026 study of six men who had killed a loved one while experiencing psychosis identified divided identity, disenfranchised grief, moral injury, stigma, continuing bonds, and restricted permission to mourn. In this context, grief existed alongside responsibility and moral complexity. Social recognition could not

be assumed because participants' grief was entangled with the harm they had caused and the institutional setting in which they were confined.

This study should not be generalized to ordinary occupational, health, or relational disruption. Its value lies in demonstrating that grief does not erase responsibility and that responsibility does not eliminate grief. It also shows why grief, guilt, shame, moral injury, stigma, and identity division cannot be represented by one undifferentiated score.

Why separation matters scientifically

1. It prevents construct contamination

If an assessment asks whether a person “no longer feels like themselves” and treats the response as evidence of grief, identity disruption, and poor adjustment simultaneously, the item does not reveal which construct it measures.

The person may be:

- Grieving a lost capacity
- Experiencing conflict between former and current identities
- Responding to other people's disbelief
- Feeling shame about needing support
- Recognizing that a previous role is no longer sustainable

These experiences may coexist, but they are not interchangeable.

Pauline Boss's distinction between ambiguous loss and boundary ambiguity offers an important precedent. The loss condition, the person's perception of that condition, and subsequent outcomes must be identified separately. Researchers should not name a measure after the stressor when its items actually assess perceptions, emotions, symptoms, or consequences.

2. It preserves causal clarity

If grief, identity disruption, and social invalidation are combined, researchers cannot determine temporal ordering.

Several relationships are possible:

- Loss may produce grief that later destabilizes identity.
- Changed capacity may disrupt identity and subsequently produce grief.
- Social invalidation may intensify both grief and identity conflict.
- Identity continuity may remain intact despite substantial grief.
- Identity disruption may occur without a person describing the experience as grief.
- Social recognition may support adaptation without eliminating the underlying loss.

These are empirical questions. The measurement model should not answer them before the research begins.

Social recognition should therefore be examined as its own contextual variable. Depending on the research question, it may function as an antecedent, mediator, moderator, or outcome. Its position should be tested rather than assumed.

3. It improves intervention matching

Different conditions require different responses.

Grief may call for acknowledgment of loss, meaning reconstruction, permission to mourn, and adaptation to changed reality.

Identity disruption may require examination of role conflict, self-continuity, narrative coherence, current capacity, emerging identity, and compatibility among multiple identities.

Deficient social recognition may require environmental change: credible acknowledgment, accommodation, institutional accountability, relational repair, or protection from stigma.

An internal intervention cannot correct every external condition. Teaching regulation or reframing may be insufficient when an employer continues to deny changed capacity, an institution reproduces moral injury, or a family refuses to recognize that a person's former life is no longer available.

Conversely, external validation alone may not resolve internal identity conflict or grief. Separate measurement makes it possible to identify which processes changed and which remain unresolved.

4. It protects against overpathologizing

A grieving response does not automatically indicate identity fragmentation. Identity change does not automatically indicate disorder. Lack of social recognition does not prove that an individual lacks resilience.

Conflating these constructs can relocate a relational or institutional problem inside the person. It may also make normal responses to irreversible change appear pathological.

Scientific language should clarify experience without converting every form of disruption into diagnosis.

A more defensible measurement structure

Future studies should distinguish at least five levels:

Measurement level	Central question
Loss or disruption	What changed, ended, became unavailable, or became uncertain?
Grief response	What emotional, cognitive, relational, or embodied response followed?

Measurement level	Central question
Identity structure	How were continuity, roles, self-recognition, meaning, or future identity affected?
Recognition context	How did other people and institutions acknowledge, deny, permit, stigmatize, or accommodate the experience?
Functional outcome	What changed in participation, performance, relationships, recovery capacity, or sustainability?

These levels should initially produce separate scores. Their relationships can then be tested through longitudinal research, mediation analysis, moderation analysis, or profile-based methods.

A single composite score would obscure the distinctions the research is intended to explain.

Implications for Identity Integration Science™

For Identity Integration Science™, the Identity Architecture Model™, and the Grief Pathway System™, these studies provide construct alignment—not framework validation.

They support further investigation of several propositions:

1. Grief can follow nondeath losses involving capacity, role, recognition, moral certainty, and anticipated futures.
2. Identity disruption may involve conflict among former, current, socially reflected, moral, relational, and emerging identities.
3. The surrounding recognition environment may influence whether changed reality can be incorporated without concealment, shame, or loss of belonging.
4. Visible functioning may continue even while grief, identity conflict, and social invalidation remain unresolved.

The next scientific task is not to combine these experiences into a proprietary total score. It is to establish discriminant validity: demonstrating that each construct can be distinguished from the others while still explaining how they interact over time.

Conclusion

Grief answers, “What has been lost or made unavailable?”

Identity disruption asks, “How has this change affected who I understand myself to be?”

Social recognition asks, “How is this loss and changed identity being received by the world around me?”

Those questions may arise from the same disruption, but they do not measure the same thing.

Separating them creates stronger research, more accurate assessments, and more responsible applications. It also prevents people from being treated as internally unstable when part of the disruption is being reproduced by the systems, relationships, and institutions around them.

References

- Boss, P. (2026). Quantify or classify? Recommendations for ambiguous loss versus boundary ambiguity. *Journal of Family Theory & Review*, 18(1), 7–12. <https://doi.org/10.1111/jftr.70011>
- Holmes-McCoid, H. J., & Lecky, F. E. (2026). Exploring the influence of Long COVID upon self-identity: A systematic literature review. *Archives of Public Health*, 84, 189. <https://doi.org/10.1186/s13690-026-02017-8>
- Shaw, O., Kloess, J. A., Gilchrist, E., & Burnett, A. (2026). A qualitative exploration of disenfranchised grief in men who killed a loved one while experiencing psychosis. *Death Studies*. Advance online publication. <https://doi.org/10.1080/07481187.2026.2716700>