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Widowhood in Context of Positive Psychology

Surabhi Srivastava
ICMR-JRF,
Deptt.of Psychology,
University of Lucknow
Lucknow

P.C. Mishra
Dean,
Faculty of Art and Ex.-Head,
Deptt.of Psychology,
University of Lucknow
Lucknow

Abstract

The demise of a spouse is identified as one of the most stressful life events. Though widows and widowers experience considerable discomfort, distress and depression as the immediate after effects of this loss yet they adjusts over the course of time. Recent years have seen a paradigm shift in psychology, which aims at creating well-being, happiness and life satisfaction. The focus has shifted from curing illness to promoting wellness. In this context, present paper is an attempt to present review of literature regarding widowhood in context of Positive Psychology. The review suggested that widowed persons bounce back and tend to adjust themselves to widowhood over the years.

Keywords: Paradigm Shift, Widowhood, Positive Psychology, Widows and Widowers.

Introduction

The demise of a spouse is identified as one of the most stressful life events. Pain of losing one's spouse is unmatchable. This pain is experience at an emotional level and to overcome this situation one has to redefine one's place in this world. Therefore, widowhood is marked by adjustment difficulties.

Review of Literature

To begain with, it is important to differentiate between 'bereavement' and 'widowhood'. Bereavement can be regarded as situation or state of having experienced the death of someone significant in one's life- in this case, a spouse. Bereavement is generally thought to be a short-term state that primarily has personal consequences and meanings. On other hand, widowhood refers to a processing and frequently long term state which has both social and personal consequence and much meaning.

Researches on widowhood have their roots in studies regarding bereavement. Freud (1917) described the differences between grief and melancholia. He elaborated that death of a loved one at times caused depression and he believed that it was necessary for the people to undertake tasks to relive their grief, what we now know as grief work.

Lindemann (1944) studied the after effects of bereavement and characterized two types of grief: normal and morbid grief. His work formed the foundation of much of the later research in bereavement and to some extent, in widowhood. Normal grief in one which people commonly experience following the loss of a loved one on other hand, morbid grief is one that lasts longer and is more severe and at times pathological.

However, one of the pioneer researches on widowhood was by Marris (1958). He reported normal grief among widows and found that there was a lower rate of morbid grief among these women than among those who had experienced other types of traumatic bereavement.

Most of the researches on widowhood have focused on bereavement rather than on widowhood itself. Researchers have developed theories that explain the ways in which people adjust to bereavement, including spouse loss. Many of these have resembled stage theories, which suggest that people must experience sequential emotional states such as anger, depression, numbness, disorganization and reorganization, in order to adjust to spouse loss. Besides, researches have also focused on grief work which includes working through the feelings, memories and thoughts associated both with spouse and the death itself. Few research findings are against this view and suggest that these approaches are unhelpful and even potentially harmful because they imply that these stages are necessary conditions to successful adjustment (Lopata, 1996).

Stroebe and Schut (1999) propounded the Dual Process Model (DPM) of coping with bereavement and described two types of coping behaviors or experiences: Loss – Oriented coping and restoration – Oriented coping. Loss oriented coping comprises grief work which includes avoiding making changes to one's life. Whereas, restoration – Oriented coping comprises of attending to the life changes. It involves avoiding things that reminded one of grief.

Klass et al., (1996) reported that bereaved persons tend to maintain a bond with the deceased. In a study it was reported that older widows idealized their deceased husbands and tended to forget their mistakes (Lopata, 1996). In this context, Moss (1996) discussed the treble relationship between the widowed person, their new spouse, and the deceased spouse. Stroebe and Schut (2005) discussed, in terms of outcome that whether it is better to discard or continue to hold a bond with the deceased. However, they suggested that it is not possible to establish one single fact that which one is better as these are individual differences. For some it may be important to maintain bonds, whereas for others it may be necessary to discard it.

Research regarding widowhood has also focused on anticipatory bereavement and social causation. Anticipatory bereavement refers to the effects of bereavement experienced by widowed persons before their spouse has actually died (Dessonville – Hill, Thompson, & Gallagher, 1988). For instance, spouses who die from the terminal illness.

Social causation in terms of widowhood implies that it is the effect of widowed status rather than the bereavement itself that causes decline in psychological well-being of widowed persons (Wade & Pevalin, 2004). Society does not treat single people, including widowed people well or grant them as much status as those who are married. Hence, widowed people are underprivileged financially, socially and psychologically and are therefore marginalized.

Widowhood in Indian Context

Women continue to struggle for gender equality and equal rights across Indian societies. Widowhood is undoubtedly one of the most difficult transitions of life. Particularly, widows in India face a lot of problems and hardships in society because of traditional and cultural norms. Widowhood in India is accompanied by serious sufferings mainly for widows.

As per the 2011 Census, widows outnumber widowers, accounting for about 78% of the total widowed population. Sahoo (2014) has reported that widows, particularly in India have a pronoun problem. Widows in India go from being called "She" to "it" when they lose their husbands i.e. they become "de-sexed" creatures. This discrimination goes to a great extent ranging from inheritance issues to derogatory comments from society.

In patriarchal society women derive their status from their husbands, and when the husband dies, the widow is considered as a sign of misfortune and is seen as inauspicious. They are compelled to withdraw from the social life and are forced to follow a stern disciplined life. Efforts were made during the early British period to work towards the upliftment of widows in India, and one such effort was abolition of 'sati'. Although widows today are not compelled to die in 'sati', yet they are still generally expected to lament till their last breath.

Mohini Giri (2002), a veteran social activist stated, "Widowhood is a state of social death, even among higher castes," she further elaborated that widows are commonly held responsible for their husband's death and are expected to live a spiritual life with strict rules and regulations imposed on them which jeopardize their well-being. Widows whether young or old are expected to discard their colorful sarees, part with their jewelry and even shave their heads, if they are from more conservative Hindu family.

Meera Khanna (2002) a contributor to a book named "Living Death; Trauma of widowhood in India", remarked, "The widow is 'uglified' to deprive her of the core of her feminity" to have control over her sexuality. Widows are expected to follow certain baseless rules based on traditions, such as, restrictions on their diet, clothing etc. In most of the Indian societies, across castes and religions, widows are generally considered to be a burden for their families.

In few cultures, widowhood is highly stigmatized and seen as a source of shame. In some culture, widows are thought to be cursed and are even thought to be associated with witchcraft. Such misnomers often lead to widows being ostracized and abused (Sahoo, 2014). This worsens the situations and even leads to marginalization of widows.

The children of windows are often extremely affected, both emotionally and economically. Such children suffer multiple deprivations which increase their vulnerability for abuse and social exclusion. Thus, abuse of widows and their children not only prevent them from actualizing their potentialities but also act as a major hurdle in growth and development of the nation.

Understanding the plight of widows worldwide and to give special recognition to the condition of widows of all ages and across cultures, the United National General Assembly declared 23 June as International Widows Day in 2011, to be observed annually.

Gender hierarchy is deep rooted in Indian culture. In comparison to widows, widowers enjoy better status in Indian society. Due to patriarchy, women are considered as a secondary object and are subjected to social restrictions while no such restriction are imposed on widowers.

Understanding Widowhood through Shift in Paradigm in Psychology

Research studies regarding widowhood have reported that the widowed persons experience lower levels of psychological well being (Hughes & Waite, 2009; Umberson, Wortman, & Kessler, 1992). Widowed men and women report higher levels of depressive symptoms, lower morale, and decrease in social engagement (Bennett, 1997). Elevated levels

of loneliness were found in widowed people (Dugan & Kivett, 1994). Carr et al (2001) found that level of dependency on the spouse during the marriage was positively associated with reported anxiety in widowhood. Studies suggest that there is immense negative impact of becoming widowed on psychological health (Lopata, 1996; Stroebe, Stroebe & Hansson, 1993).

Traditional psychology focused on human problems and how to remedy them. In this regard, there was a lot of emphasis on understanding, identifying, curing and preventing mental illness. In efforts to pursue this, research studies neglected what can go right with humans. Recent years have seen a paradigm shift in psychology, which aims at creating well-being, happiness and life satisfaction. This flourishing field is termed as "Positive Psychology". Positive Psychology advocates that researchers should focus on strengths and virtues of people rather than "fixing" problems in them. Seligman and Csikszentmihalyi (2000) are the pioneers in the field of Positive Psychology. They have emphasized the need to identify human potentials and capabilities while not getting overly involved with the human deficits. Positive Psychology advocates that mental health professionals should also focus on supporting and promoting healthy emotions, moods, thoughts, and behaviors rather than merely trying to remove symptoms. Advent of Positive Psychology marked the beginning of research studies pertaining to resilience, optimism, happiness, gratitude, forgiveness, life satisfaction and psychological well-being.

Resilience is best defined as to "bounce back" or rebound after being stressed (Agnes, 2013; Smith et al, 2008). Optimum in general means, "[to] believe that good rather than bad things will happen" (Scheier & Carver, 1985). Studies suggest that consequences of a traumatic life event on well- being may be buffered by personal resources such as optimism and resilience. In a study optimism was found to be related to psychological well being among older widowed persons (Fry, 2001) and with life satisfaction among healthy older women (Rijken, Komproe, Ros, Winnubst, & Van Heessch, 1995). In a research by Rosengard & Folkman, (1997) high level of optimism was found to be linked with absence of suicidal ideation among bereaved care givers of males with AIDS. Research by Hooker, Monahan, Bowman, Frazier & Shifren, (1998) also reported that low level of optimism was linked to higher level of perceived stress and lowered mental health in spousal caregivers. Studies also suggest that resilience facilitates well being among widowed persons (Bennett, 2010 b; Bonanno, 2004; Moore & Stratton, 2003). Research studies support the importance of several existential variables, such as Personal Meaning, Optimism, Importance of Religion, and Accessibility to Religious Support in the prediction of psychological well-being, in widows and widowers (Fry, 2001). Research findings also indicate that specific domains of personal meaning for life, religiosity, and spirituality may reduce the depression and anxiety of bereaved people following spousal loss, and provide hope and comfort (Fry, 2001).

Research findings have highlighted that there were resilient response to spouse loss by widowed persons i.e. there were no significant difference in changes in depression between pre-loss and 6 and 18 months post- loss (Bonanno, Wortman, Lehman, Tweed, Haring, 2002). Researchers argued that resilience is the "ability to maintain a stable [Psychological] equilibriums" following the loss, without long – term consequences (Bonanno, Wortman, Lehman, Tweed, Haring, 2002). Moore & Stratton, (2003) in their research have identified four models of behavior related to resilience in context of widowhood: reorganization (Rubinstein, 1986); adaptation, (Moore & Stratton, 2003); benefit finding (Janoff – Bulman, 1992; McMillen, 1999); and compensation (Ferraro, Mutran, & Barresi, 1984). They identified many widowers in their study as resilient and were found to share certain commonalities such as; initial painful awareness of loss ; the sense of a continuing "holes in their lives" – despite being engaged in meaningful actives ; an integrated belief and value system ; having an optimistic and positive personality and having capability of garnering social support. They suggested that resilient widowers adapted to widowhood in three ways – they made changes in themselves in some way, made changes in environment in some way and by finding a new companion. In a research it was reported that over time widowed people increased the number of friends and their involvement with them (Ferraro, Mutran and Barresi, 1984).

Psychological resilience as defined by Kobasa, Maddi, and Kahn, (1982) is a strong faith that one can respond under stress efficiently. This capability is thought to be constituted of three interrelated concepts. First, resilient people maintain a strong commitment to living i.e. the tendency to indulge fully in daily activities. In addition to this, people who are resilient enjoy challenges as they believe that hurdles in life provide opportunities to enhance one's skills and self-knowledge. Lastly, resilient people maintain the perceived ability to exercise control over their life's circumstances. This reflects a sense of personal autonomy and the strong faith that one is able to affect life's destiny (Kobasa et al., 1982).

Research findings suggest that psychological resilience (hardiness) (as explained by Kobasa and colleagues 1982) is significantly associated with the well-being of widowed women (O'Rourke, 2004). Research findings also suggest that a positive orientation to the future is a significant aspect of widows' adaptation to loss and well-being i.e., a positive future orientation appears to prevent a negative preoccupation with the past (i.e., demise of one's husband) (O'Rourke, 2004).

Therefore, the review of literature reflects that the application of positive constructs aids coping with adversity, in context of widowhood. Positive psychology aims at promoting organized, systematic research and practice regarding creating, maintain,

boosting and enhancing a meaningful life. Over the years, the approach of Positive Psychology has become more holistic; contrasting and at the same time combining the life-enhancing as well as life-depleting aspects of human existence to create flourishing beings. The literature review regarding widowhood suggests that positive emotions can undo the effect of traumatic event i.e. demise of one's spouse and can provide a buffer against it.

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