

### Problems faced by widow pensioners and their strategies for coping

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#### **Abstract**

*The purpose of this study was to explore the problems faced by widowed women. Total of 260-volunteered widow participated in this study; they were randomly chosen from the list of beneficiaries of the widow pension scheme from SAS Nagar and Union Territory, Chandigarh social welfare Department. Results revealed that higher proportion of respondents in the present study reported psychological problems, followed by social challenges and then physical well-being. Financial problems didn't emerge as the major problem for the widows. Since majority of these widows were from lower economic background, they didn't feel that death of the spouse made their economic condition miserable.*

#### **Introduction**

Widowhood is widely regarded as a women's issue. In all developed and nearly all developing nations, women are more likely than men to survive the death of their spouse. Further, women also are more likely than men to remain unmarried after their spouse dies. The death of a spouse has immediate and longer-term consequences for many aspects of the surviving spouse's life, including their health and wellbeing, and their personal relationships. Loss of spouse is one of the most negative life events in a woman's life.

Women who are widowed at younger age face many problems. The death of a spouse means a profound change in the living conditions of the surviving party. There is decline in the level of support following the demise could be disastrous (Nystedt 2002; Van Poppel & Joung 2001). Cherchye et al. (2012) reported decline in material well-being when women are widowed. Van de Walle (2013) demonstrated that widowhood has a long-lasting negative effect on living standards of ever-

widowed women. Lloyd-Sherlock et al. (2015) stated widowed is correlated with belonging to the poorest wealth quintiles in a number of countries. Among households headed by widows are found to be poorer in a large number of African countries (Appleton (1996); Brown and Van de Walle (2020); Horrell and Krishnan (2007)). Widows confront financial adversities after attaining widowhood (Bharat 1986; Kumari 1987; Rani et al. 2006; Salahudeen, 1996). Srivastava (2012) found that widows were denied access to other property resources like animals, streedhan etc. as a strategy to make them surrender their property rights.

Davis and Petchesky (1977) have found loneliness and emptiness as major problems of widows. Lack of social network system further aggravates their problems. Clark et al. (1988) also reported that loneliness is a major problem of widows. Many widows live by themselves. They suffer the fear of being alone and loss of self-esteem. They feel the loss of personal contact and human

association; therefore, they tend to withdraw and become unresponsive (Fasoranti & Aruna, 2007). Bhat (2006) reported decline in participation by widows in social and religious functions as they are regarded as inauspicious, a burden, a sexual threat and an unwanted insider by society. Several restrictions regarding dress, food and behaviour etc. are imposed on widows to discourage any kind of intimacy with other men (Aradhya, 1987). Suryakumari (2006) maintains that a widow is denied to lead a normal life. She has to either die as 'sumangali' or lead a life contained in all aspects- desexed and depersonalized.

Widows, through poor nutrition, inadequate shelter, lack of access to health care and vulnerability to violence, are very likely to suffer not only physical ill health but stress and chronic depression as well (UN Division for the Advancement of Women, 2000). Several researchers (e.g., Davar, 1999; Reddy, 2004; Schuster and Butler, 1989; Thompson *et al.*, 1989) have found that widowhood has a greater adverse impact on the psychological well-being of women. Wilcox *et al.* (2003) have reported negative effects of widowhood on physical and mental health, of widows falling in the age group of 50-79 years. Aged widows are subjected to social and economic marginalization by their own families and society (Arora, 2006).

Anji & Velumani (2013) have reported how patriarchal hierarchies negatively affect the condition of widows and make their situation even worse. A woman has to face series of dehumanizing treatments from the in-laws, with the claim that, she killed her husband (Eweluka, 2002). Ranjan (1989) has found that widowhood is an

expression of violence against women wherein high caste Hindu widows are denied property rights; prohibited from productive work and any chance of remarriage; and; devoid of any security and luxuries are virtually non-existent entities. Widowhood weakens the kinship network vis-a-vis the husband's side, while the loss of wife's role restricts some of their social interactions (Prakash, 1994).

Most of these studies have touched the problems at surface level only and lack in-depth studies. To fill these gaps the present study was undertaken with the following objectives:

**Objectives:**

1. To highlight the socio-economic profile of widow pensioners living in Chandigarh and Mohali district, Punjab.
2. To identify the problems faced by widow pensioners i.e.

- (a) Health
- (b) Economic
- (c) Psychological
- (d) Social
- (e) Physical wellbeing

3. To find out the coping mechanisms used by widow pensioners to handle their problems

**Methodology-** Widow pensioners drawing pension from the Social Welfare Department from UT Chandigarh and Mohali district of Punjab were included in the study. The widows who didn't remarry and had at least one child been the unit of analysis for the present study. The research design was both exploratory and descriptive. Through simple random sampling, a total sample of 260 widows (130 from Chandigarh and 130 from Mohali district, Punjab) was drawn. A structured interview schedule was used to collect information. In order to study problems, these have been divided into five broad categories,

such as health related problems, financial burden, psychological problems, social challenges and problems related to physical wellbeing. For each of these a specific set of questions were asked from the respondents.

**Results-**

In the present study, 62 percent of respondents experienced widowhood before reaching the age of 35. The distribution of respondents between Chandigarh and Mohali showed minimal variation. Notably, 27 percent of respondents became widowed between the ages of 35-40, with a higher percentage in Mohali (31 percent) compared to Chandigarh (22 percent). Among those whose husbands passed away before the age of 35, the percentage was 34, with Chandigarh slightly surpassing Mohali by 2 percent. For respondents whose husbands passed away between the ages of 40-45 and 45-50, the percentages were 8 and 3 percent, respectively. In both cases, Chandigarh had higher percentages than Mohali. Notably, Mohali had a higher percentage (19 percent) of husbands passing away between 40-45, and a higher percentage (7 percent) for the age group 45-50.

The study revealed that 52 percent of respondents belonged to the General caste, while 31 percent were from SC castes, with a higher percentage in

Mohali. Education levels indicated that 41 percent of respondents and 36 percent of their husbands had attained primary education, with Mohali having a higher percentage. Conversely, Chandigarh had higher percentages for illiteracy (26 percent respondents, 15 percent husbands) and matriculation-level education (17 percent respondents, 34 percent husbands).

In terms of employment, 36 percent of respondents in Chandigarh were self-employed, engaged in activities like stitching clothes or providing tuitions. In Mohali, 17 percent and 13 percent of respondents worked as daily wagers and domestic help, respectively. Mohali also had a higher percentage (34 percent) of respondents not currently employed. Additionally, 32 percent of respondents had a family income below Rs. 12,000 per annum, while 15 percent earned between Rs. 12,000 and Rs. 24,000 per month, with a higher percentage in Chandigarh. Respondents earning above Rs. 50,000 annually comprised only 10 percent, with Chandigarh again having a higher percentage in this category.

**Health problems**

Widowhood is one of the most tragic transition periods in the life of widows. Bereavement after the death of husband negatively impacts the health of widows. In this context information relating to health problems after widowhood was obtained.

**Table 1 Distribution showing health problems faced by respondents**

Response	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Yes	45	35	33	25	78	30
No	85	65	97	75	182	70
Total	130	100	130	100	260	100

\*Percentage has been rounded off to the nearest digit.

Table 1 portrays that most of the respondents i.e. 70 percent did not face health problems after widowhood,

amongst them the percentage of Mohali respondents was higher i.e. 75 percent followed by 65 percent

respondents from Chandigarh. There were 30 percent respondents who reported that they got serious health problems after widowhood, 35 percent were from Chandigarh and 25 percent respondents were from Mohali.

**Type of health problems**

Widows ignore primarily their health in adjusting to the problems of widowhood and taking care of their children. An attempt has been made to find out the health problems faced by widows after widowhood.

**Table 1.2 Distribution showing types of health problems**

Type of health problems	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Not applicable	85	65	97	75	182	70
Hypertension, Migraine, Cervical, allergy	42	24	19	14	49	19
Disability	2	1	0	0	2	1
Asthma, Diabetes	12	9	14	11	26	9
AIDS	1	1	0	0	1	1
<b>Total</b>	<b>130</b>	<b>100</b>	<b>130</b>	<b>100</b>	<b>260</b>	<b>100</b>

\*Percentage has been rounded off to the nearest digit.

Table 1.2 discloses the type of health problems respondents developed after widowhood. There were 19 percent respondents who had comorbidities like migraine, cervical, allergy, hypertension etc. and the percentage of respondents from Chandigarh was higher i.e. 24 percent followed by 14 percent from Mohali district. There were 7 percent respondents who reported that they developed chronic health problems like asthma, diabetes etc. after widowhood out of which 9 percent were from Mohali and 7 percent were from Chandigarh.

Findings have shown that only 3 percent respondents had fatal diseases of heart stroke, cancer and AIDS etc. and 1 percent respondents had some kind of locomotor disability.

**Coping with health problems**

It has been observed that most of the widows under study neglect themselves. Maintaining good health becomes a difficult task for these widows due to lack of funds required for urgent medical treatment. An effort has been made to find out coping mechanisms used by respondents to handle health issues.

**Table 1.3 Distribution showing respondents' coping mechanisms to deal with health problems**

Coping mechanisms	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Use of sedatives	36	28	32	25	68	26
Meditation	51	39	75	58	126	48
Consult physician	30	23	21	16	51	20
Visit astrologers	2	1	2	1	4	1
Didn't respond	5	4	0	0	5	2
Any other	6	5	0	0	6	3
<b>Total</b>	<b>130</b>	<b>100</b>	<b>130</b>	<b>100</b>	<b>260</b>	<b>100</b>

**\*Percentage has been rounded off to the nearest digit.**

Almost half of the total respondents, i.e., 48 percent, joined various religious organizations and engaged in meditation. Among them, a higher percentage of respondents were from Mohali. Twenty-six percent of respondents reported resorting to sedatives, while 20 percent consulted physicians; in both cases, the percentage of respondents from Chandigarh was higher than their counterparts in Mohali. Similarly, 1 percent of respondents visited astrologers for medical treatment remedies. Three percent of respondents reported using homemade remedies for health problems. Two percent of

respondents did not respond, and all of them belonged to Chandigarh.

**Financial Problems**

Financial status of widows is adversely affected after widowhood. Immediate loss of income with death of spouses completely destroys the income structure of family. Widows encounter problems in providing good education to children; maintaining earlier standard of living; paying off deceased husbands' debts; fulfilling children's other needs and obliging financial needs of the relatives due to lack of financial resources. An effort has been made to find out whether widows faced financial burden.

**Table 2 Distribution showing financial problems faced by respondents**

Response	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Yes	22	17	11	8	33	13
No	108	83	119	92	227	87
Total	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Data shows that most of the respondents i.e. 87 percent did not face any financial burden, amongst them the percentage of Mohali respondents was higher i.e. 92 percent followed by 83 percent respondents from Chandigarh. There were only 13 percent respondents who admitted that their husbands left financial burden for them which made their condition vulnerable. There were 17 percent respondents who hailed from Chandigarh and 8 percent respondents from Mohali who felt financial burden after the death of their husbands. Some respondents

admitted that it was very difficult to make both ends meet after widowhood and financial load left by their deceased husbands made their life miserable.

**Coping mechanisms**

Widows look out ways for coping with challenges of widowhood. They have to manage household expenses either by taking loans, selling household things, property, jewellery etc. An effort has been made to analyse the coping mechanisms that mostly used by widows.

**Table 2.1 Distribution showing respondents' coping mechanisms to deal with financial problems**

Coping mechanisms	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Took loans	8	6	11	9	19	7
Sold household items	8	6	3	2	11	4
Loan from relatives, neighbours	42	33	33	25	75	28
Sold jewellery	52	40	65	50	117	45
Sold property	2	1	1	1	3	2
indebt	18	14	15	12	33	13
Didn't respond	0	0	2	1	2	1
<b>Total</b>	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Table 2.1 depicts coping mechanisms adopted by respondents in dealing with economic problems. There were 45 percent respondents who sold their jewellery for managing finances while 7 percent and 4 percent respondents admitted that they took loans and sold household items respectively, amongst them higher percentage was from Mohali district. There were 28 percent respondents who borrowed money from their relatives, neighbours whereas only 2 percent sold property for solving financial problems, in both cases percentage of respondents from Chandigarh was higher than percentage of respondents from Mohali. There were 13 percent respondents who failed to arrange funds and were in debts wherein higher percentage was from Chandigarh. Only 1 percent respondent from Chandigarh did not

respond. The study reveals that widows have to arrange finances on their own by any means not only for the sake of themselves but also for their children. Deprivation of resources make their situation quite pitiable.

**Psychological Problems**

Widowhood is an event that constitutes the greatest and saddest change in the life of a woman. Death of the husband brings numerous problems for the widow. Apart from health and financial problems the widows also encountered psychological problems. They had to go through the phase of self-victimisation and depression upon death of their husbands. Davar, (1999); Reddy, (2004) have found that widowhood has a greater impact on psychological wellbeing of woman. There is lot of tendency to develop negative feelings about themselves.

**Table 3 Distribution showing psychological problems faced by respondents**

Response	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Yes	105	81	66	51	171	66
No	25	19	64	49	89	34
<b>Total</b>	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Table 3 shows that there were 34 percent respondents who reported that they don't feel loneliness, amongst

them the percentage of respondents from Mohali was higher than the respondents from Chandigarh. There

were 66 percent of the total respondents who reported that they had feelings of loneliness and seclusion wherein the percentage of respondents from Chandigarh was higher i.e. 81 percent than 51 percent respondents from Mohali. Being modern city social bonds are not strong enough in Chandigarh whereas in rural areas of Mohali, people are socially connected to each other. The study shows social life plays important role in making

widows feel more connected to society in Mohali than Chandigarh.

**Coping mechanisms to deal with psychological problems**

Widows use different coping mechanisms to handle psychological issues. Without stable mental situation they are not able to play their dual roles efficiently. An effort has been made to find out the coping mechanisms used by the respondents.

**Table 3.1 Distribution showing respondents’ coping mechanisms to deal with psychological problems**

Coping mechanisms	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Substance abuse	22	17	12	9	34	13
Meditation	19	15	28	22	47	18
Visit relatives, neighbours	57	44	42	32	99	38
Visit religious places	21	16	27	21	48	18
Ask parents to visit	11	8	20	15	31	12
Didn’t respond	0	0	1	1	1	1
<b>Total</b>	<b>130</b>	<b>100</b>	<b>130</b>	<b>100</b>	<b>260</b>	<b>100</b>

\*Percentage has been rounded off to the nearest digit.

Data portrays coping mechanisms adopted by respondents in dealing with psychological problems. Higher percentage of respondents i.e. 38 percent took moral support by visiting relatives, neighbours whereas 13 percent respondents took to substance abuse, amongst them higher percentage was from Chandigarh. There were 18 percent respondents who admitted that they visited religious places for coping with psychological problems. There were 12 percent respondents who paid regular visits to their parents for emotional support, in these cases percentage of respondents from Mohali was higher than that of Chandigarh. Only 1 percent respondents in Mohali

did not react when enquired about coping methods.

**Social challenges**

In Indian society social norms and regulations restrain widows from normal life. Following karma philosophy society attributed widowhood to bad karmas the of past births. It is an irony that this karma philosophy is not applicable to widowers. Widows were considered carrier of bad luck and generally not welcomed on auspicious occasions. Widows themselves hesitate to participate in social activities and ceremonies owing to fear of social stigma. An effort has been made to find out perception of widows on social challenges.

**Table 4 Distribution showing social challenges faced by respondents**

Response	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Yes	67	51	40	31	107	41
No	63	49	90	69	153	59
<b>Total</b>	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Table 4 displays that majority of the respondents i.e. 59 percent were not hesitant in going out in social gatherings all alone. There were 69 percent respondents from Mohali and 49 percent respondents from Chandigarh who were able to actively participate in social activities. There were 41 percent respondents who experienced difficulty in going out all alone. There were 51 percent respondents from Chandigarh and 31 percent respondents from Mohali who were hesitant in participating social

gatherings. The present study results are in line with the findings of Ranjan (2001) who maintained that this stage brings a series of social, economic and cultural deprivations in a woman's life.

**Coping mechanisms**

Widows face many challenges in their day-to-day life. It is difficult to live with challenges therefore widows evolve different coping mechanisms. An effort has been made to find out the coping mechanisms used by respondents to deal with social challenges.

**Table 4.1 Distribution showing respondents' coping mechanisms to deal with social challenges**

Coping mechanisms	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Ignore others	26	20	17	13	43	17
Meditation	13	10	21	16	34	13
Visit relatives	3	2	18	14	21	8
Keep themselves busy in work	59	46	44	34	103	40
Busy in children	21	16	16	12	37	14
Learnt new skill	6	5	11	9	17	6
Didn't respond	2	1	3	2	5	2
<b>Total</b>	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Data shows the coping mechanisms used by respondents to cope up with social challenges. There were 40 percent respondents who keep themselves busy in their work while 14 percent respondents remained busy with their children, amongst them higher percentage was that of Chandigarh. The percentage of

respondents who occasionally visited their relatives to strengthen social bonds and who joined meditation courses was 8 percent and 13 percent respectively, in both cases higher percentage was of respondents from Mohali. There were 17 percent respondents who ignored irrelevant comments and maintained silence in



response to keep social network intact wherein the percentage of respondents from Chandigarh was higher than that of respondents from Mohali. There were 6 percent respondents who learnt new skills to stand financially on their own feet while 2 percent did not give any response when asked about their coping mechanisms, amongst them higher percentage was of respondents from Mohali.

**Physical wellbeing of respondents**

Physical safety remains the major concern for widows after losing their

husbands. Researchers show that sexual advances are passed to widows. Lack of support from parents and in-laws make them vulnerable. Young widows feel unsafe even in their own families. She is considered as inauspicious and avoided by female relatives as they fear that they will cast ‘evil eyes’ to male members. Respondents were asked to respond about their physical wellbeing after the death of their husbands.

**Table 5 Distribution showing physical well-being by respondents**

Response	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Yes	69	53	33	25	102	39
No	61	47	97	75	158	61
<b>Total</b>	130	100	130	100	260	100

\*Percentage has been rounded off to the nearest digit.

Table 5 shows that most of the respondents i.e. 61 percent did not face issues after widowhood. There were 75 percent respondents from Mohali followed by 47 percent respondents from Chandigarh who did not have safety issues. However, 39 percent respondents had unsafe experiences. There were 53 percent respondents from Chandigarh and 25 percent respondents from Mohali who had safety issues. The study shows that respondents of Chandigarh had been

settled here from different areas, hence they did not feel safe in the city.

**Coping mechanisms to deal with problems of physical wellbeing**

Socially, husband’s death is a matter of the wife especially in Indian set up. The behaviour of kith and kin changes towards her and she seldom has companions to share her feelings with. She becomes vulnerable and in order to maintain her integrity she has to work hard. It is in this context an effort was made to find out coping mechanisms used by respondents.

**Table 5.1 Distribution showing respondents’ coping mechanisms to deal with problems of physical wellbeing**

Coping mechanisms	Chandigarh		Mohali		Total	
	f	%	f	%	f	%
Support from parents	34	26	20	15	54	21
Support from in-laws	25	19	54	42	79	30
Support from neighbours	28	22	30	23	58	23
Became independent	35	27	15	12	50	19
Didn’t respond	8	6	11	8	19	7
<b>Total</b>	130	100	130	100	260	100

**\*Percentage has been rounded off to the nearest digit.**

Table 5.1 shows the coping strategies adopted by the respondents to deal with physical well-being. Most of the respondents get support from their parents, in-laws and neighbours when they faced any issue with regard to their physical wellbeing. There were 30 percent respondents who sought support from in-laws while dealing with safety issues while 23 percent respondents obtained help of neighbours to safeguard themselves, more respondents were from Mohali. There were 21 percent respondents who took support of their parents whereas 19 percent respondents mentioned that they mustered enough courage to safeguard themselves and their children, in both cases percentage of respondents from Chandigarh was higher than percentage of respondents from Mohali. There were 7 percent respondents who didn't answer.

**Discussion**

Results show that most of the respondents reported psychological problems followed by social challenges and then physical well-being. Psychological problems commonly experienced by widows, included self-blame for their husbands' death, contemplating the end of life in widowhood, feelings of loneliness and isolation, avoidance of social situations, suicidal thoughts, and changes in personality. Coping mechanisms used by respondents were seeking support from relatives and neighbors, engaging in meditation practices, and visiting religious places for managing these challenges. Respondents faced various social challenges, including the perception of widowhood as a curse, being blamed

by society for their widowhood, experiencing changes in the level of respect shown towards them, facing nonacceptance during auspicious occasions, reduced interactions with in-laws after becoming widowed, feelings of loneliness, and decreased participation in social gatherings. The findings reveal that respondents faced physical well-being challenges, such as feeling unsafe, experiencing sexual exploitation, being perceived as a sexual threat by other women, facing oppression due to their widowed status, and being exploited because of having female children. In response to these challenges, respondents primarily sought support from their in-laws, followed by seeking support from their parents and neighbors. To cope with these challenges, respondents primarily kept themselves occupied with work, followed by focusing on their children and disregarding the opinions of others. There were only 15 percent respondents who had been suffering from health issues before widowhood this percentage get doubled i.e. 30 percent after widowhood. Higher percentage of respondents remained stress owing to insecure future of themselves and their children. Interestingly financial problems didn't emerge as a major problem as reported by most of the researchers. There were very less percentage of respondents who felt financial burden. Those who reported financial issues mentioned lack of financial resources for children disturbs them. Selling jewellery and taking loan from friends and neighbours is the coping mechanisms used by them for dealing with financial problems.

## Conclusion

The present study highlights multitude of challenges widows confront, where psychological, social, and physical safety concerns loom large. Stripped of their partner's support, they often grapple with overwhelming grief and isolation, compounded by societal stigma and ostracization. Societal expectations and norms that often marginalize them. Moreover, the lack of financial independence makes them vulnerable, leaving them susceptible to exploitation and abuse. Ensuring their physical safety becomes a paramount concern, as widows may face threats ranging from domestic violence to property disputes. Addressing these multifaceted challenges requires a holistic approach, encompassing social support systems, legal protections, and initiatives aimed at empowering widows to reclaim agency over their lives.

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