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## Abuse against Widowhood in India

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### ABSTRACT

Bereavement in all cultures is a compound crisis. It is a painful emotional shock, a sharp change in social status, often an economic catastrophe and usually an introspective challenge to the widow. She is subjected to total segregation and stigma. The various abuses in widowhood goes unreported without protective and therapeutic assistance, rather they are left to suffer in silence. The present article discusses the nature and incidence of abuse in widowhood in India and presents an overview of research findings to date. The implications for counsellors and clinicians working with abused women in India are highlighted. Avenues for intervention for removing the stigma include challenging cultural beliefs, accepting role and being resilient. Furthermore, efforts to address victimization should focus on empowering survivors, promoting healthy coping, and addressing their individual needs.

**Keywords:** *Widowhood, Abuse, India. Intervention, Counseling*

**W**idowhood is not just transition from one marital status to another after the death of the husband. Entering in to widowhood is more hazardous, painful and humiliating to women than to a widower

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because of the discrimination, ritual sanctions of the society against the widows. With the result, widows in India not only suffer with social and economic sanctions but also face many psychological consequences, loneliness and in many cases deprivation causing emotional disturbances and imbalance (Scannell, 2003; Stroebe et al., 2001; Charlton et al., 2001; Chen, 2000; *United Nations*, 2001, 2002; *Mohindra*, 2009; Mehta et al., 2006).

Full implementation of the human rights of women and girls is essential to the progress and prosperity of the world (Unicef, 2000). This paper explores the nature and incidence of widow abuse in India and summarizes the research findings to date. Factors that put widow and her children at risk are discussed. Challenges for counselors are presented for adequately addressing and handling abuse.

### ***Overview of Widow Abuse in India:***

#### **Estimated Incidence Rates of Widow Abuse**

The concept of 'abuse' is very much relative and depends on socio-economic and cultural context. India's mortality rates are found 86 per cent higher among widows than among married women in the same age vulnerable to abuse, neglect and high levels of deprivation (Chen, 1995), particularly vulnerable were 55% of widow women over 60 years since having a male guardian can be important for their safety and status within the Indian social context (Madhurima, 2008; Dong and Simon, 2008; Kim et al, 2005). The incidence of widowhood rises sharply with age. The proportion of widows is as high as 64 per cent among women aged 60 and above, and 80 per cent among women aged 70 and above (Owen, 1996, 2000). In other words, an Indian woman who survives to old age is almost certain to become a widow.

The incidence of widowhood is lower in most of the northern states than in south India (Riessman, 2000; Miller; 1981; Mohindra et al., 2012, Chen & Dreze, 1992; Ulrich, 1988; Sohini, 2015). However, there appears to be a gross under-reporting of crimes against widows in India. The older widows are being evicted and abandoned to the temple or mosque or ashrams, some of them have been abused sexually and emotionally since early childhood as child widows

(Skirbekk & James, 2014; Sahoo, 2014; Ministry of Women and Child Development, 2009; Priyabadini, 2007; Reddy, 2004). This is of great concern, given the sheer number of widows in India and that 41.6 percent of widows are living in extreme poverty (United Nations, 2001, 2002, Loomba foundation, 2011).

In rural India, the condition of widows is more pathetic (Chen, 1998) and majority of them are deprived of their inheritance rights (Agarwal, 1998; *Chaudhuri, 2012*; Panda and Agarwal, 2005) and those staying with unmarried children are struggling with acute insecurity, deprivation and violence (Reddy, 2004; Anji and Velumani, 2013) with consequences ranging from exposure to serious diseases and over-work, to targeted murder, forced marriage, child marriage, children's loss of schooling, child labour, and multiple child safety risks (trafficking and street living), including child rape (Jensen, 2005; Priyabadini, 2007; Loomba foundation, 2011).

Mourning and Burial rites in Hindu religion are one of the major socio-cultural impositions which may include “ritual cleansing by sex”, inauspicious accusations, (Chandra, 2011), enforced dress, appearance and behaviour, diet, mobility restrictions, social ostracism due to their low social status (Mallick, 2008) and economic insecurities (Chen, 1998, 2000; Korang-Okrah, 2007/08; Sossou, 2002) that can lead to depression and suicide (Li et al., 2001; Lee et al., 2005; Patnaik, 2007; Patel et al, 2006; Owen, 1996, 2000; Trivedi et al, 2009; Kumari, 2014). However, the status and treatment of women by Muslims is even worse as they reportedly experience more global distress. This is consistent with the greater subjugation of widows in Muslim culture compared with Hindu culture (Saiyad et al., 2013; Sugirtharajah, 2003).

Widow Remarriage may be forbidden in the higher castes; and where permitted, may be restricted to a family member. If a widow marries away, her spouse turned out to be an elderly widower or a divorcee (Reddy, 2004; Johnson and Shymala, 2012). If she keeps her children with her, she may fear they would be ill-treated in a second marriage.

These practices constitute human rights violations and compound the physical and emotional trauma that the death of a loved one already brings. It is also important to remember that widow abuse in the Indian context is likely to be different than other countries (Sabri et al., 2016; Shear, 2010) due to patriarchy, strict cultural and religious norms, superstitions, poverty, dependency, lack of education/skill for job and lack of empathy, understanding and social support that increases vulnerability towards discrimination, exploitation, abuse, violence and so on (Niaz & Hassan, 2006; Davar, 1999; Vatuk, 1998).

### **The Current State of Knowledge about Widow Abuse in India**

Reviewing the various potent researches of the past the researcher have made tentative conclusions about effect of widow abuse in India-many of which parallel findings from studies in the United States (Wilcox et al, 2003; Trivedi et al., 2009). First, empirical research is providing evidence that the incidence rates of widow abuse in India are much higher than have been typically acknowledged in the general society. The daughters of widows may suffer multiple deprivations, increasing their vulnerability to abuse (Ministry of Women and Child Development, 2009; United Nations, 2002).

Second, there may be variations in widow abuse across states and regions in India (Chen and Dreze, 1992; Matey, 2009). Third, middle and old aged widows are targeted for property related violence by children and considered as a burden on the family whereas young widows are subjected to physical abuse, exploitation and both remain highly vulnerable to neglect (Lamb, 1999). Further, her ability to engage in income-earning activities is restricted due to patriarchal norms and the division of labour by gender (Chen and Dreze, 1995) that exacerbate the depressive episodes, anxiety disorder symptoms after the death of a spouse (Dev, 2016; Zisook and Shuchter, 1991; Niaz and Hassan, 2006; Bansal et al, 2010; Nandi et al., 1997; Li et al., 2001; Lee et al., 2005; Umberson et al, 1992).

Fourth, the social and economic marginalization in widowhood is manifest in poor health and high mortality levels that has a strong bearing on their health and well-being (Jensen, 2005; Schuster and

Butler, 1989; Thompson *et al.*, 1989; Davar, 1999).Fifth, physical abuse often goes hand in hand with other forms of abuse in the family (Choudhuri and Deb, 2015; Skirbekk and James, 2014; Kaur et al., 2015). Sixth, the prevalence of abuse in widowhood is common across all socioeconomic levels and religions. Seventh, prevention of widow abuse requires needed changes at the family, community, state, and national level, starting from individual's heart and minds that marriage does not have to complete a women or her identity, nor does widowhood or rape have to reduce her. Then adult children need to be sensitized to the problems and feelings of the old aged widows, instead of neglecting them as non living beings to prevent social exclusion (Sohini, 2015).

Eight, government organizations and NGO's need to play a larger role in intervention services and the prevention of widow abuse in India through effective welfare strategies as income support, health care, and free education and child care (UN, 2002, Unicef, 2002).

Ninth, counselling for widow victims is extremely important and has been shown to be effective in helping her children too after physical abuse or violence has been reported or discovered. Finally, there must be much greater attention regarding the secrecy of abuse in families throughout India, and these family secrets must be made taboo by all sectors of society for the protection and welfare of women community.

Thus the most significant challenge in addressing all types of abuse and crime against women arises due to gender inequality, stereotypes, superstition, poverty, illiteracy, ignorance, cultural beliefs and practices, poor service delivery in times of crises and under reporting of cases due to practice of secrecy in the family that in fact serves to protect the perpetrator and allows the cycle of abuse to continue (Baradha, 2006, Patnaik, 2007) that prevents too the victim from getting therapeutic help when needed (Priyabadini, 2007). Therefore, mental health professionals in India are indispensable part of any prevention plan, however, may be stymied in their efforts by lack of resources and cultural prejudices prevalent in the society.

Therefore, cultural competence is inevitable in prevention program suitable to fit in a culture.

**Challenges for the counselors during treatment process:**

The findings underline the need to develop counselling techniques and infrastructure where the social support is lacking. In contrast to men, women allowed greater latitude in expressing emotional turmoil during significant loss. They are more defined by relationships which prohibit them to return to their normal functioning quickly. It is therefore recommended that women may be encouraged to equip themselves with the skill oriented education and training to meet economic uncertainties consequent to the spousal death.

The counselor or mental health professional and the survivor work in a collaborative manner both actively involved in the survivor's healing process through empowerment in mind in order to recover and gain a sense of control. A counselor should show respect and reiterate that the being a widow was not her fault and that her emotions are normal. The society's cultural myths centred on being a widow should also be dispelled. This should be done in a nonjudgmental way, with the counselor acting as a sounding board and not providing personal opinions on the basis of their cultural, racial, religious, or socioeconomic differences. Counselors need to learn as much as possible about cultures that are different from their own, and be thinking about how differences may have an impact on the healing process and should continually offer support in trying new, positive ways of coping. Hope substantiates victims to live on (Kübler-Ross, 1969) by the hope of reunion in a future life through the teachings of impermanence, cause-and-effect, and the cycle of death and rebirth (Cheng, 2015), so that she accepts her husband's passing away, and learned to enjoy the present moment (Fawcett, 2013) with self-loving-kindness. This significant idea from the survivor dimension urges counsellors not only to non-judgementally listen to their clients but also to facilitate them to live well without the deceased (Worden, 1991). However, counselors prevent clients from mistakenly creating superstitious hope.

Another potent condition found instrumental in understanding and handling crisis and abuse pertains to providing survivors with the opportunity for reflection on, and resolution of, their reactions to the high stress of assault. When survivors share trauma in the form of the narrative, they are actively involved in the process of moving towards closure by becoming free from habitually thinking about the trauma in such a way that causes distress (Klempner, 2000).

Finally, integrating the abusive experience gradually into one's life is the last portion of trauma recovery that would help 'demystify' the experience of abuse for them and emotionally work through the trauma. Respect for the individual's unique needs, abilities, and pace is essential. The counselor must be self-aware and reflective – to understand her own feelings about assault, her relationships, the legal system, and other areas, and to separate these personal feelings from the survivor's emotions, life, and needs.

A change in mindset of the society is required before these women get their rightful place, for which a strong will is needed in the minds of the people, and in law-governing bodies (Trivedi et al, 2009). Existing preventive and supportive interventions needs to be expanded for the victims of gender based violence. While attempts should be made to strengthen women's economic capabilities by improving women's access and control over income and assets to reduce the stigma associated with widowhood.

### **Widowhood with a Meaning in Life**

Indian widowhood has long been associated with victimization and vulnerability, but traditional attitudes toward widowhood are changing and reflect the higher level of sensitization towards them (Mehta et al., 2006) by their enhanced formal social participation and involvement in personal networks (Utz, 2002; Bharathi et al, 2015). Women in our culture have always being portrayed as the courageous ones. Resilience is one of her greatest strength (Ryckebosch-Dayez et al., 2016; DiGiacomo et al., 2015; Koren et al., 2016) and was found much higher in older widows (Lamb, 1999; Mallick, 2008) and even the ways to recover were quite different from younger group

(Chaudhary and Chadha, 2014) incorporating the component of spiritual involvement and beliefs (George, 2010; Mhaske, 2014; Kaneez, 2015; Behera and Bhardwaj, 2015). Either she goes with the swag their of ill-treatment, becomes a prey to social maladies and domestic violence or she fights for herself, her dignity and rights and ultimately leads a life of health, success and well-being she truly deserves depends on how well she reflects back with her overlapping identities of being an abused 'victim', 'widow, and a 'mother' within conflict contexts (Verma, 2015). Motherhood was a much more salient theme (Lamb, 2001; Bhana, 2009) in narrative analysis among the widowed mothers with higher levels of post-traumatic growth, learned optimism, proactive coping, social support, and resilience was found in comparison to divorced mothers (Dullat, 2015; Verma, 2015; Michael et al, 2003; Richardson & Balaswamy, 2001).

Progress will not be made in any plan until widows themselves are the agents of change so that they can act strong, stand tall and look everyone in the eyes rather than filled with guilt, shame and be as a sufferer for the whole part of life (Mohindra et al, 2012). Latter creates a vicious cycle of sufferings as abuse is reinforced through victim compliance and submission. Widows' associations, in addition, must be encouraged and empowered to (Hossain, 2012; Loomba Foundation, 2011) provide therapeutic support for the ones who are not able to cope with the challenges of bereavement (Matey, 2009; Ryckebosch-Dayez,2016; Scannell, 2003) and help them to be self-dependent, broaden their level of understanding, empathy, cooperation, coping skills, knowledge and wisdom.

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