

---

## Impact of Prolonged Deprivation on Mental Health of Widows and Half-Widows in Kashmir Valley

Mohammad Amin Wani<sup>1\*</sup>, Mohd Shoiab Mir<sup>2</sup>, Dr. R. Sankar<sup>3</sup>,  
Zeba Ziyauddin Khan<sup>4</sup>, Rakshantha, P.<sup>5</sup>

### ABSTRACT

**Objective:** Mental health is not just the evasion of serious mental illness. Individual's mental health is influenced by various factors in his everyday life. Present day's mental illnesses are commonly found among people globally. Researcher's show that one out of every two adults is mentally disturbed, about 45% of adult population in Kashmir has mental distress. This paper is an endeavour to consider the impact of prolonged deprivation and widow type on mental health. **Method:** This study depends on sample of 60 subjects separated into two equivalent group's widow type (widows and half widows) and the period of deprivation (10 years and 15 years of deprivation). Mental health scale developed and standardized by Dr. Jagadish and Dr. A. K. Srivastava was used for data collection. For statistical analysis Mean and Two Way Analysis of Variance (ANOVA) were applied. **Findings:** The results reveal that both experimental variables (widow

---

<sup>1</sup> Ph.D, Research Scholar in Psychology, Annamalai University, Tamil Nadu, India

<sup>2</sup> Ph.D, Research Scholar in Psychology, Annamalai University, Tamil Nadu, India

<sup>3</sup> Assistant Professor, Department of Psychology, Annamalai University, Tamil Nadu, India

<sup>4</sup> Counselor, K.V. School Mahasamund Chhattisgarh, India

<sup>5</sup> Student, M. Sc, Clinical Psychology, Department of Psychology, Annamalai University, India

\*Responding Author

## Impact of Prolonged Deprivation on Mental Health of Widows and Half-Widows in Kashmir Valley

type and period of deprivation) have significant effect on criterion variable (Mental Health). **Conclusion:** On the basis of our findings it is concluded that half widows have poor mental health than widow, simultaneously those widows and half widows who are deprived since 15 years have poor mental health than those deprived since 10 years.

**Keywords:** *Prolonged Deprivation, Mental Health, Widows, Half Widows.*

**M**ental health is characterized as levels of mental prosperity or nonattendance of mental issue. It is a state of enthusiastic and mental flourishing in which an individual can utilize his subjective and also enthusiastic capacity, capacities for his general public and meet their regular day to day existence demands. It is a positive idea identified with the social and passionate wellbeing of individuals and communities. In common language mental health implies free from psychological and mental issues like stress, anxiety, phobias, depression and so on. Mental health is a state of flourishing in which individual comprehend his or her own capacities, abilities, can adapt to ordinary anxieties of life, can work beneficially and productively and can make contribution and commitment to his or her community.

Widow is basic term used to women whose companion is dead. In India as per the census department in 2011 around 4.6% or 5.6 crore was widows among which 40 million widows don't know about their rights while as in Kashmir since 1989 around 22806 widows are in the blink of an eye living. Bindeshwar Pathak, founder of Sulabh International says that in India widows are dealt with as untouchables. They confront parcel of issues in their lives even rich quantities of widows are found to begging outside religious spots, railway stations, transport stations and occupied lanes.

The term “half widow” is unique for Kashmir. It was coined by the local press in Kashmir in early 90s for those women, whose spouses vanished in the fog of violence. Half widows are those whose husbands have been vanished however not yet been proclaimed dead.

## **Impact of Prolonged Deprivation on Mental Health of Widows and Half-Widows in Kashmir Valley**

In a report of APDP (Association of Parents of Disappeared Person) up to 2011 there are more than 1500 half widows in Kashmir, they experience by different challenges in their regular life like they are not eligible for the pension which is given to widows by state social welfare division, they can't get pay given by the legislature to casualties of contention, and they have no privilege to share the property of her spouse as they have no proof of the husband's death, the law is likewise not supportive. Near it they similarly encounter the evil impacts of the steady wretchedness, trans-generational trauma, and PTSD. They have the symptoms of chronic fear, anxiety, stress etc. According to Dr Arshad Hussain, Psychiatrist from Institute of Mental Health and Neuro Sciences, Srinagar, the relatives of the vanished, especially the half-widows, frequently experience complicated grief, unresolved grief, and post traumatic stress disorder. The prolonged absence of their husbands opens these ladies to examination and policing by their general public and also dangers and control by people with noteworthy impact. The psychiatric disease hospital Srinagar shows 15% of women are suffering from stress and prolonged trauma 70 to 80 % has acute depression 16% have PTSD. Rita Pal (2003) Luis Ponte projects coordinator of MSF in Kashmir say patients visit to MSF counselling centres are 20 to 40 years old and 65 to 70 % among are women.

In the present day world the condition of widows and half widows is excessively hopeless and miserable that expansive number of scientists approaches to compose on them and behaviour different looks into. In this study the investigator notice few of the studies which highlights the conceptions of widows and half widows like, Soudiya (2012) conducted a study on women victims of armed conflict, half widows in Jammu and Kashmir. In this study the investigator highlights the problems and issues confronted by the half widows in their regular life. Menton (2007) uncovered that poverty is more likely to be seen as a dynamic construct that encompasses deprivation across material, social and cultural resources and necessities in one's life. Meraj & Arshad (2004) revealed that widows

## **Impact of Prolonged Deprivation on Mental Health of Widows and Half-Widows in Kashmir Valley**

and half widows are always subjected to sexual harassment by control agencies furthermore degenerate officers ask percentage from the payment which they receive from government. Chen *et al.*, (1999) also found higher levels of traumatic grief, depressive and anxiety symptoms among widows as compared to widowers. Wani (2014) highlighted there is significant difference in mental health scores between male and female.

### **METHODOLOGY**

#### ***Objectives:***

1. To find out the effect of widow type on mental health.
2. To find out the effect of period of deprivation on mental health.
3. To find out the interaction effect between widow type and period of deprivation on mental health.

#### ***Hypotheses:***

1. Widow type has significant effect on mental health.
2. Period of deprivation have significant effect on mental health.
3. There would be significant interaction effect between widow type and period of deprivation on mental health.

#### ***Variables:***

The effect of two experimental variables (Widow Type and Period of Deprivation) was study on single criterion variable that is mental health.

#### ***Sample:***

In the present study 60 samples were selected through purposive sampling technique. Further all the 60 subjects were equally divided into two group's on the basis of widow type (widows and half-widows), these two groups were also equally divided in to two more subgroups according to the period of deprivation (10 and 15 years).

***Measuring Tool:***

Mental health scale developed and standardized by Dr. Jagadish and Dr. A. K. Srivastava was used for data collection. The scale consists of 44 items with 16 positive and 28 negative items with 4 point scale (Always, Often, Rarely and Never). Positive items are scored as 1,2,3,4 and negative are scored as 4,3,2,1 respectively. The reliability of the scale is measured by Split-half method and was found 0.73.

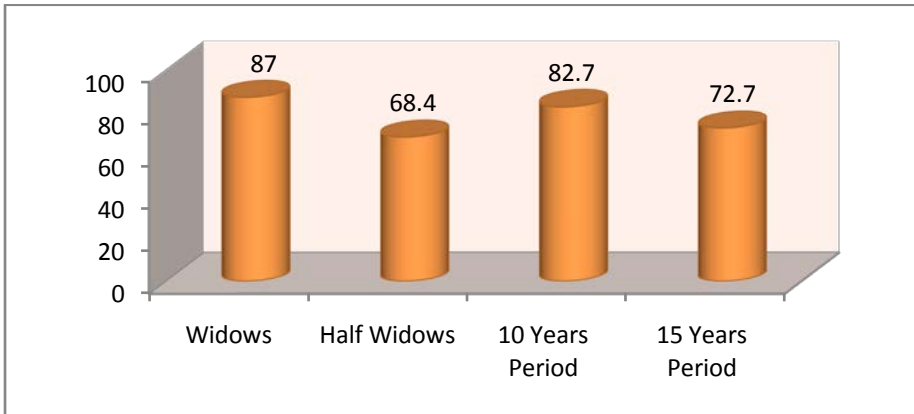
***Procedure***

The study was conducted between the month of May and June 2016 in Baramulla district of Jammu and Kashmir state 60 subjects were randomly selected. During data collection investigator meets the subjects personally and told them about the purpose of meeting. After the willingness of subject the mental health scale was handover to her and was asked to read the instructions carefully before submitting their responses. Investigator also read and helps the subject to understand the instructions and statements properly. Nearly after 20-25 minutes the scale was taken from the subject, hence the data was collected. Then obtained data was carefully systematically analyzed to find the effect of experimental variables on criterion variables. Obtained data was arranged accordingly and put in the respective groups (widows, half widows, 10 years period and 15 years period of deprivation). Experimental variables (widow type and period of deprivation) was designed as A and B respectively, simultaneously two levels of widow type were designed as widows (A1) and half widows (A2) while as deprivation period was designed as 10 years period (B1) and 15 years period (B2) respectively. All obtained scores were arranged in tabular form according to their groups then 'Mean' and 'Two Way Analysis of Variance' (ANOVA) was applied to find the main as well as interaction effects.

**RESULTS**

The obtained results of the present study are shown in graph and tables given underneath.

*Graph- 1, Showing the mean scores of widows, half widows, 10 years period and 15 years period deprivation period*



*Table- 1, Showing mean of widow type*

Widow type	N	Total scores	( $\bar{X}$ )
Widow	30	2610	87
Half-widow	30	2052	68.4

*Table- 2, Showing mean of period of deprivation*

Period of deprivation	N	Total scores	( $\bar{X}$ )
10 Years Period	30	2481	82.7
15 Years Period	30	2181	72.7

*Table- 3, Summary of ANOVA*

Source of variation	S.S	df	M.S	F-ratio
(A) Widow Type	5159.4	1	5159.4	28.88*
(B) Period of Deprivation	1500	1	1500	8.39*
(AB) Interactional Effect	147	1	147	0.82
Within Group Error	10003.6	56	178.63	0

\*significance 0.05 level

## DISCUSSION

The results of present study exhibited that both the independent variables have sway on mental health. The significant differences were found between the mean scores of widows and half widows. The mean score of widows (A1) were found 87 and half widows (A2) 68.4 respectively. Results also show significant differences between the mean scores of 10 year and 15 year of deprivation. The mean scores 10 year deprivation (B1) were found 82.7 and 15 years deprivation (B2) was found 72.7 simultaneously. Our findings proposed that widows have better mental health as contrast with half widows. Additionally subjects with 10 years period of deprivation also have better mental health than subjects with 15 years period of deprivation.

A close look at the ANOVA table indicates that obtained F-ratio of widow type [ $F(56, 1) = 28.88$ ] was found significant at 0.05 level of significance. This leads us to conclude that widow type is intense variable in appreciation of mental health. Subsequently our first hypothesis is partially accepted. Our findings bear a few similitudes with those of past studies like Abdallah and Ogbeide (2002) who found that there is higher rate of mental illness among the widowed than their married counterparts. While taking about the second independent variable i.e. period of deprivation the F-ratio [ $F(56, 1) = 8.39$ ] was found significant at 0.05 level of significance, which implies that period of deprivation is also an infantile variable in mental health. This finding is likewise bolstered by the study done by Goldman *et al.*, (1995) they found that widows from 14 years had higher rates of disability than 6 years later but were not at increased risk for mortality. Thus on the basis of our findings we can say that there is significant effect of 10 and 15 years period of deprivation on mental health. Along these lines our second hypothesis is also accepted.

Interaction between widow type and period of deprivation indicate that the obtained F-ratio [ $F(56, 1) = 0.82$ ] was found in significant at 0.05 level of significance. Thus our third hypothesis (there is significant interaction effect between widow type and period of deprivation on mental health) is rejected.

## CONCLUSION

To sum up, considering the findings of the present study, we may presume that widow type and period of deprivation are the significant factors in mental health. Mental health is a serious issue in Jammu And Kashmir State, about 45% of adult population in Kashmir is mentally disturbed mostly females. Reports shows out of 1, 30,000 patients (who visited different psychiatry units associated with government medical hospital Srinagar in 2015) more than 50 % was females. As widows and half widows in Kashmir are psychologically and economical faced various problems. Government at central as well as state level should come forward to provide platform to NGO's, social workers, psychologists, psychiatrists and mental health professionals to help this target group of society. They should provide all the basic needs (Food, Shelter and Cloths) free of cost. Government should also establish some institutions where they can learn some basic tasks like tailoring, handicrafts, computer education etc. for both educated and illiterate group. So they earn their livelihoods and live a prosperous life.

## REFERENCES

- Abdallah D., & Ogbeide D., O. (2002). Prevalence of mental illness among Saudi adult primary care patients in Central Saudi Arabia. *Saudi Medical Journal*, 23(6), P.721-724.
- Athar P. (2014). Fatwa Comes Too Late for Kashmir's half-Widows. Inter Press Service.
- Annual report (2014-2015). Indian social institute centre for research, training and action for socio economic development and human rights New Delhi.
- APDP (2011). Association of Parents of Disappeared Person report on half widows in Kashmir Tuesday, 29 November.
- Chen J., H., Bierhals A., J., Prigerson H., G., Kasl S., V., Mazure C., M., & Jacobs S. (1999). Gender differences in the effects of bereavement-related psychological distress in health outcomes. *Psychol Med.*, 29(2), P.367-380.



**Impact of Prolonged Deprivation on Mental Health of Widows and Half-Widows in Kashmir Valley**

- Goldman N., Korenman S., & Weinstein, R. (1995). Marital status and health among the elderly. *Social Science and Medicine*, 40, P. 1717-1730.
- Menton, C. (2007). An investigation of the measurement of poverty in Ireland, Dublin. Institute of public administration.
- Soudiya Q. (2012). Women Victims of Armed Conflict: Half-widows in Jammu and Kashmir. *Sociological Bulletin*, 61, (2), P. 255-278.
- Meraj & Arshad (2004). Indian held Kashmir, 80% war widows have suicidal tendencies. Kashmir human rights site.
- Rita P. (2013). Post Traumatic Stress Disorder the Kashmir scenario – IBTC.
- Wani M., A. (2014). Study of mental health among the people affected by terrorism in Kashmir. *International Journal of Social Science and Language*, 1, 1, P. 67-72.