Impact of Social Support on Wellbeing of Hindu and Muslim Widows

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Abstract: A widow is a woman whose spouse has died and she has not married again. This situation creates a kind of solitude in her life that leaves deep scars in her mind and it turns her life pattern into a kind of symbolic death that is mainly given by the society in the form of innumerable restrictions imposed on her and segregation from the society considering her as a bad omen. This kind of inhuman treatment of the society that widows often face in throughout the life has detrimental impact on their wellbeing resulting disturbed physical, social, emotional health. Therefore the present study is designed to ascertain the impact of social support on the wellbeing of widows. For this purpose 100 Hindu and 100 Muslim widows were selected through purposive sampling technique and they were measured on Interpersonal Support Evaluation List developed by Cohen et al., (1985) and Wellbeing scale developed by Jagsharanbir Singh and Dr. Asha Gupta (2001). Data has been analyzed with the help of T-test and simple linear regression model. Result revealed that social support has been emerged as a significant predictor of wellbeing and both the groups were found to differ significantly on the measures of social support and wellbeing.

Keywords: Widow, Social Support and Wellbeing

1. Introduction

Widowhood is considered the most stressful life event (Miller and Rahe, 1997) which influences mental and physical health of the individual negatively. Indeed widowhood is a natural phenomenon but it becomes a curse especially for a female who is already considered a secondary living entity in Indian society where she pursues lesser degree of freedom to run her life by her own will. Demise of husband itself creates a vacuum in her life in the form of scarcity of emotional, mental and social support along with a number of inhuman practices such as avoidance of rich food, bright colour dresses, ornaments, restriction to freely participation in social and religious gatherings and on decision making power etc. which widow has to face throughout her life. These inhuman practices change her normal life as she lived earlier, in case if a widow wants to live life to an optimum level she is not supposed to live as desired because in Indian society widowhood is still considered an epithet that seems to be the main cause of decrement in her wellbeing.

Wellbeing cannot be considered only in the perspective of physical health i.e., free from illness rather it includes mental, social, emotional and spiritual health. Wellbeing is considered in terms of good health with required physical activities and lack of illness that can be transformed in the optimum functioning of the individual with the family and understanding his or her psychological and spiritual need (Jahoda, 1958 and Berg, 1975). Not only adequate level of physical heath but the integration with psychological resources is also essential for having a satisfactory level of wellbeing. Verma, Mahajan and Verma (1989) defined wellbeing in terms of personal feeling of satisfaction, joy, relaxation, active participation in personal and professional setting, feeling of attainment, value and attachment, without having any sort of negative feeling. These positive characteristics of life either inculcated within individual since childhood or he/she may develop it through experiences but in case if the individual encounters any shock or damage in life, his/ her wellbeing disturbs badly. Widowhood is also considered one of the most disturbing life events that change one’s life completely in negative manner. Wilcox et al., (2003) revealed through the study that mental and physical health starts decreasing during bereavement period. Similarly, Schuster and Butler (1989) identified that widowhood impacts negatively on the psychological wellbeing of women.

Social support is referred as a kind of help or assistance which is given by the family, friends, neighbors, fellows, colleague and society in the form of physical, emotional, financial or informational nature to the person who needs it in all circumstances. Lin, Simone, Ensel and Kuo (1979) defined it as availability of assistance from people around. Further Hobfoll and Stake (1988) considered it as actual positive relationship among people, which provides a strong foundation of social, physical and psychological unity (Hobfoll, Freedy, Lane and Geller, 1990). Similarly Shumaker and Brownell (1984) considered supportive behaviour as an exchange of resources between two people which is given with the intention of betterment for receiver. But this behaviour can only be supportive when it is given with the intention of satisfying one’s need (Thoits, 1982). Additionally, Thoits (2010) presented rather a comprehensive definition of social support referring “emotional, informational, or practical assistance from significant others, such as family members, friends, or coworkers; (and that) support actually may be received from others or simply perceived to be available when needed.” Indeed, Social support means any kind of verbal, physical, emotional, tangible or financial assistance provided by the significant one to the individual at the time of necessity to bolster up his morale and to make him able to deal with the situation effectively. Emotional support provides a sense of protection in stressful situation (Cutrona and Russell, 1990). Cohen and Mckay (1984) observed that the network support which is also a component of social support render the
individual robust in decreasing the degree of negative emotions.

**Objectives**

To identify the difference between hindu and muslim widows on social support and wellbeing.

To ascertain the impact of social support on wellbeing of hindu and muslim widows.

**Hypothesis**

It is hypothesized that Hindu and Muslim widows will differ on social support and wellbeing, and social support would influence positively on their wellbeing.

**2. Methodology**

**Participants**

So far as the present study is concerned a sample of 200 widows has been decided among them 100 Hindu widows and 100 Muslim widows living in their home were selected by using purposive sampling technique. All the participants have been selected from urban area.

**3. Measurements**

**The Wellbeing scale**

The wellbeing of participants were measured by using the wellbeing scale developed by Jagsharanbir Singh and Dr. Asha Gupta (2001) comprises of 50 items ranging from very much=5 to not so much=1. Test retest reliability and split half reliability of the scale has been obtained 0.98 and 0.96 respectively. The reliability of this scale was found 0.906 on the participants of this study. The maximum score on this scale is 250 and the minimum score is 50.

**The Social support scale**

In order to measure the participants on social support, Interpersonal Support Evaluation List developed by Pierce, Frone, Russell and Cooper (1996) which is a short version of the 40 item Interpersonal Support Evaluation List developed by Cohen, Marmelstein, Kamarck, and Hoberman (1985) has been used. This scale was found reliable as .89 on the sample of present study. It consists of 15 items with the response category of four point scale from completely true=4 to completely false=1. Participant’s score vary within the range of 60 to 15 score.

**Procedure**

For the present study the researcher approached widows living in home and told them the purpose of the study. After establishing rapport, both scales were administered on them. The minimum time that respondents have taken in filling the scales was about 15-20 minutes. After collecting data from them, T-test and simple linear regression analysis have been applied with the help of SPSS version 2.0 to compare the groups on social support and wellbeing and to see the impact of social support on wellbeing of Hindu and Muslim widows.

**4. Results and Discussion**

**Table 1:** Shows Mean, SD, and T- value of Hindu and Muslim widows on social support and wellbeing

<table>
<thead>
<tr>
<th>Groups</th>
<th>Variables</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>t-value</th>
<th>Sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hindu widows</td>
<td>Social support</td>
<td>100</td>
<td>33.10</td>
<td>9.041</td>
<td>2.451</td>
<td>.015</td>
</tr>
<tr>
<td>Hindu widows</td>
<td>Wellbeing</td>
<td>100</td>
<td>137.99</td>
<td>25.540</td>
<td>2.903</td>
<td>.047</td>
</tr>
<tr>
<td>Muslim widows</td>
<td>Social support</td>
<td>100</td>
<td>36.66</td>
<td>11.364</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muslim widows</td>
<td>Wellbeing</td>
<td>100</td>
<td>145.45</td>
<td>27.120</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above table depicts the mean value of Hindu and Muslim widows on social support and wellbeing. The mean of Hindu widows on social support is 33.10 whereas of Muslim widows is 36.66. The difference between the values of two means on social support is denoted by the t value that is 2.451 which is found significant (p < .015) at 0.05 level. Similarly the mean value of Hindu widows on wellbeing has been found 137.99 which is less than the mean value of Muslim widows on wellbeing i.e., 145.45. The difference between the mean values of both the groups on wellbeing is expressed through t value that is 2.903 which is also found significant (p < .047) at 0.05 level. It indicates that both the groups differ significantly on the measures of social support and wellbeing.

**Table 2:** Represents the simple linear regression analysis to predict the impact of social support on wellbeing of Hindu widows

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R square</th>
<th>Adjusted R square</th>
<th>F</th>
<th>P</th>
<th>Effect size</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>.606</td>
<td>.367</td>
<td>.360</td>
<td>56.788</td>
<td>.000</td>
<td>.579</td>
</tr>
</tbody>
</table>

a. Predictor: (Constant), Social support
b. Dependent Variable: Wellbeing

The above table shows that social support has been found a significant predictor of wellbeing of Hindu widows through the value of R squared =.367 which shows 36.7% of variability in wellbeing is due to the social support. The value of adjusted R square is .360 shows the actual contribution of the predictor variable that is 36% to the criterion variable. The F value 56.788 shows that this model is significantly predicting that social support impacts the wellbeing of Hindu widow.

**Table 2.1:** Represent the coefficient of correlation between social support and wellbeing of Hindu widows.

<table>
<thead>
<tr>
<th>Model</th>
<th>Predictors</th>
<th>Standardized Coefficient</th>
<th>B</th>
<th>T</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Social support</td>
<td>.606</td>
<td>7.536</td>
<td>.000</td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: wellbeing

The above table shows the coefficient value of correlation between the predictor and the criterion variable. The value of correlation is .606 which clearly explains that social support significantly correlated with wellbeing of Hindu home widows. The correlation value has been found positive which indicates that if social support increases, the wellbeing would also increases or vice versa among Hindu widows.
The above table shows the model summary of one predictor variable which clearly depicts that social support has emerged as a significant predictor of wellbeing for Muslim widows. The value of R square is .317 which means that social support causes 31.7% of the variability in wellbeing of Muslim widows. The adjusted R square value clearly mentions that the predictor variable (social support) actually contributes 31% in the wellbeing of Muslim widows and this actual contribution of predictor variable has been found significant on the basis of F value (45.386, p>.000).

Table 3.1: Represents the coefficient value of correlation between social support and wellbeing of Muslim widows.

<table>
<thead>
<tr>
<th>Model</th>
<th>predictors</th>
<th>standardized Coefficient B</th>
<th>t</th>
<th>P</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Social support</td>
<td>.563</td>
<td>6.737</td>
<td>.000</td>
</tr>
</tbody>
</table>

The above table reveals the value of correlation coefficient which is .563 between social support and wellbeing of Muslim home widows. This value has been found positively significant which means that if the social support increases, the wellbeing will also increase at the same pace or vice versa among Muslim home widows.

Therefore on the basis of mean value of social support it is observed that both the groups have scored less (<40%) on measure of social support which indicates that in spite of being from different religious community, both the groups of widow receive less support from the society. The reason behind has been considered by the researcher is the derogatory social status that a widow carries after the death of her husband determines that she herself is responsible for her husband’s death or widowhood is the outcome of her worst fate so she deserves this kind of seclusion from the society. Although Hindu widows and Muslim widows obtained less mean value on the social support, yet both the groups do actually differ in terms of mean value and this difference has been found significant. That can be interpreted that after marriage women come from her parents’ home to the husband’s home where she is given all the social relationship on the name of her husband but when he dies she loses the link with the relatives and get excluded from the society. But this exclusion proves very harsh especially for the widows in Hindu community due to certain religious beliefs. Therefore they receive less social support from society which leads to lesser degree of wellbeing in comparison to their Muslim counterparts who are at better level on the social support and wellbeing due to their sympathetic position in Islam.

So far as the table no. 2 and 2.1 are concerned the value of R square states that social support is that factor which 36% contributes in the wellbeing of Hindu widows whereas among Muslim widows social support contributes only 31% in their wellbeing (see table 3 and 3.1). It can be attributed that Hindu widows experience comparatively more segregation and lack of support from the society so if they receive support from anyone they consider it more valuable and it proves very effective in their wellbeing positively. While on the other hand Muslim widows already survive in a kind and sympathetic environment as compared to Hindu widows but due to have lower socioeconomic status they face, there might be another important issues for them related to survival rather getting support from society.

As it has been studied that behavioural treatment that widow receives from the society is mainly governed by the religion of that society which influences human behaviour directly (Shehu, Onusanya, Uthman and Baba, 2010). Researches has already been proved that social support is essential for widows in dealing with spousal loss (Brubaker, 1985) and especially when it comes from family and friends soon after the death of husband helps them to recover from grief of bereavement and increase their psychological wellbeing (Nolen-Hoeksema and Larson, 1999). Similarly researchers have showed that emotional support which is a component of social support is linked with good mental health, physical health, life satisfaction, motivation and wellbeing (Wan, Jaccard and Ramey, 1996). Therefore on the basis of results of the studies quoted above it can be concluded that providing social support is important for widows to live a reasonably better life. Although social support works in enhancing wellbeing, yet its influence can work better along with the better socioeconomic states as we see in the case of Muslim widows.

5. Limitation and Implication of the study

The whole sample has been selected from specific terrain, only two communities have been included and all the participants were middle class adult women. If the sample could be selected from different communities and from different socioeconomic states, the results might be different. Therefore this study proves that availability of support from the society can eliminate the impact of grief due to widowhood. For this society needs to change mindset and consider women a living being even after the death of her husband. Parents are required to teach the children empathy so that when they grow up they will behave well with the widows. Government should also start some intervention programs at community level so that society can provide belonging support to the widows. This kind of positive approach of the society as well as government towards the widows will definitely improve their wellbeing.

References

communication and social interaction skills (pp.551-595). New York: Routledge.


