

**PSYCHOLOGICAL RESPONSE TO LATER LIFE
WIDOWHOOD: COPING AND THE EFFECTS
OF GENDER***

KATE MARY BENNETT

GEORGINA M. HUGHES

University of Liverpool, England

PHILIP T. SMITH

University of Reading

ABSTRACT

The study examined the effects of psychological response and gender on coping with late life widowhood. Forty-six men and 46 women (55 years +) were interviewed about their experiences of widowhood. Participants were classified as to whether they were coping well or less well. Data were analyzed using grounded theory, content analysis, and three-way loglinear analyses. Loglinear analyses revealed three-way interactions for Gender, Coping, and Response. Men who report feeling upset or selfish are more likely to be coping, as are women who report being comfortable alone. There were two-way interactions between Coping and Response and Gender and Response. Participants who talk to their dead spouse are more likely to be coping than those who do not. Those who “keep themselves to themselves” are more likely not to be coping than those who do not. Gender differences were found in psychological response. Differences were also found between those who coped and those who coped less well. The study has enabled the synthesis of quantitative and qualitative data to present a more complete view of late life widowhood than has previously been possible. In addition, the article draws attention to the importance of distinguishing between the effects of bereavement and those of widowhood.

*This research study was supported by the Economic and Social Research Council (Award No. L480254034) and is part of the Growing Older Programme of 24 projects studying the quality of life of older people. However, the findings reported here are entirely the responsibility of the researchers.

INTRODUCTION

Losing a spouse in later life is known to have profound effects on well-being and is an event which provokes important life changes (see Stroebe, Stroebe, & Schut, 2001, for a review). It is acknowledged that bereavement requires individuals to utilize all their strengths and abilities in order to re-establish their lives. This process of re-establishment has been examined in two ways in the literature. The first focuses on the processes specifically associated with bereavement (Stroebe & Schut, 1999). The second draws on theories of coping, particularly in the field of stress (Nolen-Hoeksema, McBride, & Larson, 1997). However, these two theoretical approaches are often discussed independently and as a consequence our understanding of bereavement may not be complete. Efforts to understand widowhood are further challenged by the interchangeable use of the terms bereavement and widowhood. We believe it is important to emphasize that these are two distinct but related concepts which are often implicit but need to be made more explicit. The first is bereavement; this is the experience of the death of a loved one (in this case, a spouse) and may be associated with grief and mourning. The second is widowhood, which may be conceptualized as a change (albeit reluctantly) from married status to a *new* status and social identity, that of being a widowed person. Our interest lies in the experiences of widowed people with a greater emphasis on the longer-term effects of widowhood, rather than on the shorter-term effects of bereavement.

The majority of studies of coping with spousal loss have focused on bereavement rather than on widowhood. The study of coping in bereavement has a long tradition covering stage theories (for early work see, Kübler-Ross, 1969), grief work (see the seminal work of Lindemann, 1944), stress and coping theorists (Parkes & Weiss, 1983). One of the difficulties with this field is that there are disparities between traditional approaches to coping and approaches to bereavement. In a review of the literature, van Heck and de Ridder (2001) found that there was a mismatch between existing methods of assessing coping and bereavement specific methods. However, recently a number of researchers have been independently developing new approaches to coping and bereavement. Stroebe and Schut (1999) have developed “The Dual Process Model of Coping with Bereavement.” This model addresses three concepts—loss-oriented coping, restoration-oriented coping, and oscillation between them. The first refers to “processing of some aspect of the loss experience itself” (p. 212). The second comprises “what needs to be dealt with . . . , and how it is dealt with” (p. 214). The third refers to “the alternation between loss- and restoration-oriented coping” (p. 215). Stroebe and Schut contend that loss-orientation is typically used more in the early days of bereavement, with more restoration-orientation as time progresses. Folkman (2001) has further developed the stress and coping theory (Lazarus & Folkman, 1984) in order to account for the experiences of those bereaved by AIDS. This reconsideration includes positive

indicators of adjustment and recovery and an inclusion of the processes which support these indicators.

The focus of these approaches is on bereavement and indeed on “recovery.” This is restrictive for two reasons. First, such an approach does not reflect the feelings and experiences of widowed people who do not see the loss of their spouse as an illness from which to recover (Bennett & Bennett, 2001; Lopata, 1996). Second, it focuses on short-term experiences (often in the two years following the loss) and not on the longer term experiences of widowhood, which bring with them additional coping challenges, such as coping with a new social status, learning to live alone, as well as longer-term emotional consequences of losing their spouse (Bennett, 1997). In terms of coping, the literature deals with short-term stressful events (e.g., Pearlin & Schooler, 1978). Widowhood is not easily conceptualized as a short-term stressor, since its effects are often much longer-term. However, it is possible to argue that bereavement might represent an acute stressor, so often discussed in the stress and coping literature, while widowhood might represent a chronic stressor, which is much less studied.

There are many contextual factors which may influence coping including gender, the age at which bereaved, economic status, and family structure (O’Bryant & Morgan, 1989, 1990; Parkes & Weiss, 1983). In this article it is gender which is of the most interest. Researchers have tended to focus, as Carr (2004) argues, on who suffers more, men or women. In a review, Stroebe et al. (2001) suggest that men suffer more from widowhood with respect to health, mental health, and social support. They suggest that women have more confrontative and expressive coping styles than men, which may be protective. De Ridder (2000) suggests that women’s higher reactivity to stressful situations may be useful in coping with chronic stressors, though not with transient stressors. Thus, widows might have a coping advantage in long-term adjustment to bereavement. Studies have also suggested gender differences in social support and interaction that are known to influence coping. For example, Peters and Liefbroer (1997) found that widowed men receive less social support than women, while others have suggested social participation in men significantly declines following bereavement (Mouser, Powers, Keith, & Goudy, 1985). Returning to the work of Carr, she found that there were within-gender differences which were as important in explaining coping following bereavement than those between genders. These differences could be explained by factors such as self-esteem, previous experiences of domestic management, and dependency. Further, she found that there were some psychological rewards following bereavement such as personal growth. Similarly, Lund and Caserta (2001) have suggested that there is much diversity in coping among widowers, but that they often cope better than they think they do. It also appeared to be the case in their study that the younger a widower was, the better he was likely to cope.

This current study aims to identify the manner in which people respond to widowhood, taking into account gender and recognizing that widowhood is a

long-term situation with periods of acute stress. The manner in which widowed people respond to widowhood we have termed “psychological response.” We developed our conceptualization based on the work of Carver, Scheier, and Weintraub (1989) and their typology of coping strategies in relationship to stressful events. In addition, we also took account of the theories of coping in the bereavement literature (e.g., those of Stroebe & Schut, 1999). We define “psychological response” as behaviors and emotions which occurred as a consequence of their bereavement and widow(er)hood. This definition encompasses the notions of processes of coping and the efficacy of the responses. It also takes into account the role of personal, social, and environmental resources. Finally, it encompasses the notion that coping may be situation-specific, and that coping resources may change over time.

Not only are there theoretical challenges in understanding responses to widowhood in later life, there are also methodological challenges. On the whole there are two methodological approaches, as outlined by Neimeyer and Hogan (2001). The first examines widowhood in a quantitative manner, using questionnaire assessments, standardized measures, and numerical quantification (see for example, Nolen-Hoeksema et al., 1997). The second utilizes qualitative interviews, ethnographic approaches, and avoids quantification (Pickard, 1994). Both these approaches are valuable. Generalizable findings may be gained from the former in the form of significance values and power calculations. The latter provides the detail, nuances of widowhood, and the individuality of experience. Few studies have utilized both methods, usually presenting the analyses separately (Gass, 1989). Folkman (2001) successfully integrated both methods and was thus able to further develop the stress and coping theory to account for bereavement-related experience. We also believe that it is possible and valuable to integrate more fully these two approaches: the detail of the interview but the sense of generalizability that quantification brings. We use loglinear analysis in order to do this. This technique is described in more detail later.

Much of the work discussed has been conducted in North America, with the exception of the work of Margaret Stroebe and her colleagues, Pickard, and ourselves. It is worth acknowledging that there are cultural differences associated with bereavement between North America and Britain in particular. For example, British men are well known for their “stiff upper lip” and that is thought to have an impact on male bereavement (see for example, Pickard, 1994). The current study adds breadth to our understanding of widowhood and bereavement in a cultural context. The aim of this study is to address the issue of coping and gender in terms of “psychological response,” and utilizes both types of methodology. We asked whether it was possible to determine which people coped and which did not. If so, were there particular psychological responses among those who coped and those who did not, and finally were they influenced by gender?

METHOD

Participants

The participants were 46 widowed men (only 45 of whom were interviewed) and 46 women. In the analyses presented here, one woman was excluded since she had been widowed for 60 years. The remaining participants were aged between 55 and 95 years (mean = 74), living in the North West of England. They had been widowed between 3 months to 32 years (mean 8.68 years). Demographic details are summarized in Table 1 and include information concerning the excluded woman for consistency with other papers published from the larger study.

Recruitment

The aims of the Older Widowed Men and Women Project were communicated to a diverse range of formal and informal groups of older people. Contact was also made with other welfare organizations and agencies, social services, and sheltered housing schemes, through which links with widowed people were established. Interested individuals returned an “expression of interest” form and were then sent further information and invited to talk about their experience of widowhood at interview. The range of individuals who participated was diverse and included a number who were socially isolated. Two expressions of

Table 1. Demographic Data by Gender

	Mean	Standard deviation	Range
Women (<i>n</i> = 46)			
Age	73.29	8.93	57–95
Years married	35.75	13.49	2–63
Years bereaved	10.94	10.7	1–60
Children	2.28	1.72	0–10
Grandchildren	3.65	2.98	0–11
Great grandchildren	0.61	1.39	0–5
Men (<i>n</i> = 46)			
Age	75.02	7.88	55–93
Years married	39.37	12.97	5–63
Years bereaved	8.18	6.72	0.25–25
Children	2.57	1.47	0–6
Grandchildren	3.93	3.35	0–13
Great grandchildren	0.67	1.7	0–8

interest did not result in participation, and one male respondent completed the questionnaires only. The local ethics committee approved the study and confidentiality and anonymity were assured. Names have been changed to preserve anonymity.

Selection Issues

Studies of widowhood, especially those using interviews, present a number of methodological challenges concerning selection. First, this type of work is only possible, and indeed ethical, with volunteers. Second, there is a danger that those who volunteer are not representative of the widowed population as a whole. For instance, participants who volunteer for interview studies may be those who are more articulate or who may have a particular agenda of their own regarding widowhood. Third, the sample size for qualitative interview studies is usually smaller than for quantitative work, and as a consequence the claims made by such studies are different. Finally, widowed people do not represent a homogeneous social group. We considered these issues carefully and have addressed them as far as is possible. Addressing the first two issues together, we engaged in extensive out-reach work to ensure that we did not recruit only those widowed people who always participate. Indeed, virtually all of our participants had not taken part in research before, many were recruited by word of mouth, or encouraged to participate by friends or support networks. It is clear from our transcripts that many of our participants were not highly articulate or well-educated. With respect to sample size, the sample was small enough for in-depth analysis of interview data but was large enough for detailed statistical analyses (although these are not relevant to this article). Participants came from a wide range of social and economic backgrounds, representing the diversity of Merseyside. Indeed, we carried out a comparison of socioeconomic status of our participants with General Household Survey 2001 norms and found no significant differences (ONS, 2001). We were able to recruit equal numbers of men and women, this was despite the general difficulties found by researchers in this field to recruit men. Unfortunately our sample did not reflect ethnic diversity. We had attempted to recruit from minority ethnic communities but were, on this occasion, unable to do so (this is an issue which we intend to address in further work). The heterogeneity of the sample is, we believe, a strength. The sample reflected all socioeconomic statuses and was also diverse with respect to age and length of time widowed. This diversity has meant that in work presented elsewhere, we have been able to examine factors such as age and length of bereavement and their influence on the experience of widowhood (see for example, Bennett, Hughes, & Smith, 2005; Smith, Bennett, & Hughes, 2003). In the context of the current article, factors such as age, length of widowhood, (un)successful coping, and gender were considered in preliminary phases of the analysis, but were found not to be significant and so are not presented here.

The Interview

The interviews were conducted by one of three interviewers and were tape-recorded. They took place at the respondents' homes, at a day center, or at the University of Liverpool and lasted between one and two hours. Before beginning the interview, the respondents were given an information sheet to read and asked to sign a consent form; confidentiality and anonymity were assured. The interviews were semi-structured and were designed to elicit information on life-style and affect by asking what the participants did and how they felt at specific times. The interview schedule consisted of seven parts.

The first part contained factual questions concerning age, length of marriage, widowhood, and family relations, followed by four sections inquiring about the widowed person's life at various times. The first of these addressed married life before the death of the spouse, asking questions about hobbies, division of labor in the house, and the quality of the marriage. The second section asked about the time around the death of the spouse. For example, they were asked to describe what a typical day had been like after the death, whether they went out, what support they had had from family and friends, how they had felt, and what emotions they had experienced. The next section asked them what they did and how they felt one year on, but was omitted if they had been bereaved for less than a year. They were asked how their lives had changed by then, what a typical day was like at that stage, whether they were now doing anything new, whether anything had changed with regard to work around the home, and in what ways (if any) their feelings had changed. The fifth section asked what their lives were like at the present time. Questions related to what they did with their time, how they felt about their widowhood, how their lives had changed, and what their emotions were.

The penultimate section consisted of questionnaires which assessed cognitive failures and mood. These are not discussed in this article. For further information on these methods see Bennett, Hughes, and Smith (2005). Finally, the participants were asked four general questions: what advice they would give someone in the same situation as themselves; whether they thought widowhood was different for a man than for a woman; if anything would make life easier for them; and whether they thought the government or local authority could do anything to help widowed people. These are not discussed here.

Analysis

The interviews were coded using grounded theory and content analysis methods by three members of the team (see Bennett & Vidal-Hall, 2000, for a detailed description of the analytical technique). A total of 304 codes emerged from analysis of the 91 interviews. These codes were then further examined for broader themes, which included: death-related narratives; social participation; psychological well-being; and coping. The focus of this article is on the last of

these, coping. In order to establish reliability, two of the authors (KMB and GMH) and a researcher (JD) each coded independently 10% of the interviews coded by each other (e.g., KMB coded independently 10% of the interviews coded by GMH, and in turn GMH coded independently 10% of those coded originally by KMB). Coding was then compared between coders, and the numbers of either missing or additional codes were calculated. This was compared to the total number of codes used within the original coded interview. Using this process, reliability was assessed and agreement was found to be 80% between the coders.

A concise definition for each code was assigned. In the selection of codes to be analyzed for this article the authors were guided by the work of Carver et al. (1989) and their conceptualization of coping and by those outlined in bereavement-related literature (e.g., those of Stroebe & Schut, 1999). The authors examined whether codes reflected coping responses suggested by these two literatures. Again this was done by KMB and GMH independently. From this examination, 40 codes were identified for further analysis. The full list with definitions can be seen in Appendix 1.

Coping was assessed by expert reading of the interviews and assessment of non-verbal aspects of the interview. For example, coders looked for reports of medication, contact with primary care, not coping, and the non-verbal content of the interviews were taken into account. If a participant mentioned specifically that they were not coping, they were classified as such. They were classified either as coping well or not coping well, these are referred to as Coper (C) or Non-Coper (NC), respectively. Characteristically, Copers had developed a life without their spouse, were not unduly distressed during the interview, were able to discuss the issues surrounding their bereavement and widowhood in positive as well as negative terms and described the events surrounding their bereavement with a degree of distance (see also Bennett et al. (2005), for a discussion of this method in relationship to depressive feelings). This assessment was made independently by two members of the team (GMH and KMB), again by reading the transcripts independently, and agreement was found to be 95%. The interviews where there was not agreement were sent to the third member of the team (PTS) for final decision.

Loglinear analysis enables us to assess associations between various categories. Three-way interactions involving Coping, Gender, and Response imply that a particular Response led to more relatively successful Coping for one gender rather than the other. For example, women who remarked that they felt comfortable on their own were more likely to belong to the Coping category than men who made this same remark. Two-way interactions between Coping and Response indicate a particular response is associated with Coping, equally for both genders. For example, talking to the deceased was more likely to be associated with Coping, and this was true for men and for women. Two-way interactions between Gender and Response indicate a particular response is associated with a

particular Gender, and this is true whether the respondent is Coping or not. For example, men discuss issues of remarriage more frequently than women do, but discussing remarriage does not discriminate Copers from Non-Copers. Note the “do not use” category simply refers to the fact that the code was not present in a transcript. Any significant results were checked with Fisher’s exact test, because occasionally some of the expected values in the contingency tables were small and the corresponding chi-squared values can be inflated in these circumstances. Fisher’s exact test is a valuable technique when the samples are small and is one of the most powerful tests for data of this sort (Siegal & Castellan, 1988).

RESULTS

There were 12 men and 14 women who were identified as not coping well. There were 33 men and 32 women who were identified as coping well.

Table 2 shows the significant interactions and the direction of the result. The first column identifies the type of interaction. The second column identifies the name of the code. The third column identifies which group reported use of the code significantly most.

Table 2. Loglinear Analyses: Significant Interactions for Gender, Coping, and Response

Interaction	Code	Reported most by
Coping × Response × Gender	Alone	Women Copers
	Selfish	Men Copers
	Upset	Men Copers
Coping × Response	Talking	Copers
	Kept self to self	Non-Copers
Gender × Response	Depression	Men
	Formal support	Men
	Remarriage	Men
	Resigned	Men
	Support	Men
	Anger	Women
	Stoicism	Women
	Friendship changes	Women
	Helping	Women
	Voluntary work	Women

There were three significant three-way interactions involving Coping, Gender, and Response, implying that a particular Response led to more relatively successful Coping for one gender rather than the other. These were: “aloneness,” “selfish,” and “upset.” Women who remarked that they felt comfortable on their own (“aloneness”) were significantly more likely to belong to the Coping category than men who made this same remark. Men who reported that they were “selfish” were significantly more likely to be coping than women who commented that they were so. Similarly, men who reported feeling “upset” were significantly more likely to be in the coping group than women. Examples of the interviews and a fuller discussion are found in the Discussion below.

There were two significant Coping \times Response interactions: “talking to one’s dead spouse” and “kept self to self.” Copers were significantly more often reported talking to their spouse. On the other hand, those who “kept self to self” were significantly more often those who were coping less well. Again, examples of the interviews and a fuller discussion can be found below.

We also found a number of significant Gender \times Response interactions, which we will mention only briefly since they are not the focus of this article. Men reported significantly more often than women “depression” (see Bennett et al., 2005), “support,” “remarriage,” and “resignation.” Women were significantly more likely than men to report: “anger,” “stoicism,” “friendship changes,” and “voluntary work.”

Table 3 shows the number of Copers/Non-Copers by gender for each significant response (we do not present figures for the Gender \times Response interactions, for simplicity).

DISCUSSION

The results demonstrate that it is possible to identify significant psychological responses which distinguish between those who cope and those who do not. In addition, different psychological responses to bereavement and widowhood are shown in men and women. Further, there are differences between men and women as to which psychological responses are associated with successful coping.

In our analysis we found three significant three-way interactions between Gender, Coping, and Response. Two of these results, for “selfish” and “upset,” it was men who were coping who reported this response. The code “upset” was used when men talked about feeling upset, and it is contrary to the notion of “bottling it up.” As this man says:

But um—you know I wouldn’t cry in front of them now. You get upset sometimes when you’re sitting at home by yourself and things remind you, you know. You get a bit upset. (M11, C, Age 77, Widowed 25 years)

Table 3. Contingency Table of Coping Status by Response by Gender

Code	Coping status	Number reporting response	
		Men	Women
Aloneness	Non-Coping	5	2
	Coping	6	13
Selfish	Non-Coping	0	2
	Coping	9	1
Upset	Non-Coping	1	4
	Coping	10	2
Talking to dead spouse	Non-Coping	3	5
	Coping	18	17
Kept self to self	Non-Coping	2	4
	Coping	1	2

This next man is open about the fact that he gets upset and cries frequently, but there is also a sense that for him this is not a problem, and may indeed be positive.

Well there's hardly a day goes by without having a good cry. (M16, C, Age 74, Widowed 4 years)

As Man 3 below suggests, it is the little reminders which upset him, in this case away from the house. On the other hand, it is the reminders in the house which were the cause of the upset for Man 11.

I'd be walking around and looking in a shop window, I got upset. (M3, C, Age 75, Widowed 8 years)

Finally, as M28 explicitly says, and as Man 3 implies (by use of the past tense), for some men it is something that passes as time passes.

I was very upset yes—but then you get over it. (M28, C, Age 80, Widowed 20 years)

There is much evidence from the therapeutic and counseling literature that emotional expression is helpful (e.g., Greenberg, Wortman, & Stone, 1996). This study seems to bear this out.

The other significant three-way interaction concerned the response "selfish." It was used as a code when people themselves reported it. One often thinks of being selfish as a negative personality or behavioral trait. However, in our reading

of the interviews it did not suggest that, rather it was more positive in nature. It referred to people being able to make independent choices, to please themselves, and to be freed from the burden of duty and obligation which marriage implies.

You do get a little selfish. You know. Living alone now and pleasing oneself.
(M10, C, Age 70, Widowed 19 years)

In a way that—when I say selfish you only have to think of yourself. (M33,
C, Age 62, Widowed 18 years)

This next man also suggests that it was an important thing for him to do, even if it might be perceived by others (and by himself) as negative.

It's er probably it was a selfish as well as a necessary thing to do. (M38, C,
Age 75, Widowed 4.5 years)

The theme of selfishness has been explored in more detail by Davidson (2001). However, she found that selfish was discussed more often by widows than by widowers. When widowers did discuss selfishness, it was often in the context of feeling angry at the loss of their spouse.

For women who cope there was only one significant three-way interaction, for “aloneness.” This refers to the notion of being comfortable with oneself and one’s own company. Although people may be more or less content being alone, this appeared to be different from a personality dimension. It was concerned with a progression toward a more comfortable feeling in widowhood. It is in marked contrast to those widowed people who feel that they cannot return home alone or who seek the solace of crowds. In its mildest form, this woman expresses it simply:

I don't mind me own company. . . . (W4, C, Age 74, Widowed 20 years)

Woman 11 recognizes the difference between being lonely, which she is, and being alone. The first implies a negative emotion, while the latter is not expressing negative feelings.

I'm lonely. But I am also alone but that's totally different. (W 11, C, Age 57,
Widowed 3 years)

Both these next women appreciate being on their own, especially in their own homes. Indeed, for the latter of these two women it was important to have the space to think.

I've got used to being on my own. I don't think I would like anybody intruding on my space. (W15, C, Age 70, Widowed 13 years)

I wanted to come in, shut the door, and be by myself. Yes. And think by myself. (W19, C, Age 81, Widowed 20 years)

Both of these women had been widowed for a number of years, as had the first. So, as we mentioned above, feeling comfortable with one’s own company may

come with time. But the time scale is not rigid, for some women it may come later, for others, like Woman 3, it may come sooner. It is also the case that for some women (maybe for many women) being comfortable with one's own company does not preclude being lonely, especially lonely with respect to one's absent husband.

We found two significant interactions between Coping and Response. One response was associated with poor coping ("kept self to self") while the other was associated with good coping ("talking to one's dead spouse"). Examining the first of these, it is possible that keeping oneself to oneself is akin to bottling it up. While we suggest that bottling it up is something that men on the whole do, it was evident from those who kept self to self that this was not a successful response for either men or women. The widow(er)s who responded in this way were certainly talking about an emotional response rather than a behavioral one. They were choosing not to share their feelings, either because they did not feel able to or because they did not want to burden others with their grief. In practice this meant that their grief essentially remained private. For example, this woman talks about keeping her feelings to herself in a neutral way:

You know you don't show it kind of thing. (W42, NC, Age 59, Widowed 1.5 years)

On the other hand, this woman, a widow of many years, is much more forthright in her desire to keep herself to herself. She told people to leave her alone.

[I] said look I don't want anything, I don't want anything . . . just leave me. (W39, Age 70, Widowed 22 years)

This man kept things to himself for sometime until he met a counselor on a train, s/he suggested that the widower might find talking to someone useful. He has found it to be so, but is still a Non-Coper.

I really kept these things—perhaps wrongly—pretty well to myself and it was only when I started going to this counseling. I found it very beneficial. (M6, NC, Age 73, Widowed 6 years)

It is interesting that the range of years bereaved is long, from only a year and a half to more than 20 years. It highlights the variability in experiences of widowhood, especially with respect to time.

Those who we identified as Copers were those who talked more to their dead spouse. These were people who continued to have conversations with their partners long after they had died. It might be a simple good night as in this case:

Well still say goodnight to her. (M16, C, Age 74, Widowed 4 years)

Or something more extended like these:

And I sort of have a little talk to him. (W18, C, Age 65, Widowed 11 years)

I talk to the wife—I've got photographs in the front room . . . and I talk to them all the time. (M23, C, Age 77, Widowed 1.5 years)

This woman exemplifies those who call on their dead spouse for assistance in times of difficulty, in the case a small difficulty, for others in crises. It also illustrates that not all the conversations with the dead are of a peaceful nature. This woman, while she had a loving relationship with her husband, can still express the irritation with her husband (even though in this case it is not his fault) that she must have felt at times with him when he was alive (note his name has been changed for reasons of confidentiality):

I lose things. . . . I'll say to him in the name of heaven David wherever you've put it, will you please put it back. (W15, C, Age 70, Widowed 13 years)

While talking to the dead spouse was present significantly more often among those who were coping, it was not confined to them, as this quote illustrates:

[Do you talk to her?] Sometimes [what sort of things?] Just ordinary things. (M12, NC, Age 79, Widowed 1.25 years)

The idea of maintaining a relationship with a dead spouse has been explored a great deal recently. In an earlier work by Bennett and Bennett (1999), we found that these conversations ranged from simply saying "I still love you" to saying "You ought to be back here you know" when things were going wrong (p. 98). Other authors have explored the notion of continuing bonds. This is explored in-depth in Klass, Silverman, and Nickman's *Continuing Bonds* (1996). For example, in that volume, Moss and Moss (1996) argue that even when widows remarry there is a triadic relationship between the new couple and the dead spouse. It is becoming clear, therefore, that it is important in terms of good coping for the relationship with the spouse to continue after death. Of course, for some of those who are not coping well with their bereavement and widowhood, it may simply be too painful to continue that relationship but that as time passes the relationship may be taken up again.

Many of the significant results concerned interactions between Response and Gender. As we have said, these findings are not the main ones of interest for this article. Nevertheless, they are of some interest, so we will briefly discuss them here. For example, men were found to receive more support. It was also interesting that this difference was perceived by the widowed people themselves, especially by the widows, when asked about gender differences in widowhood. On the other hand, the data revealed that women gave more support in terms of helping others and voluntary work than men. Women also experienced significantly more changes in friendship. They argued that they were frequently dropped by their married friends. The women believed that this was because they were now viewed as a threat to married women, either sexually or because widowhood was in some way catching. Others found solace in the company of

other widows. Discussions of the issues around remarriage also demonstrated marked gender differences, with men expressing interest, while women were not keen. We have discussed this in more detail elsewhere (Bennett, Hughes, & Smith, 2003). Davidson (2001) also argues that widowed men are more likely to repartner than widowed women. One explanation for this trend is the idea that men and women see marriage in different lights. Pickard (1994) notes that men missed the roles and institutions that their wives occupied as much as the individuals that their spouses were. Widowed men also expressed more resignation than widowed women, and widowed women expressed more coping and stoicism than widowed men. These may be expression of related ideas. We defined "resignation" as being resigned to events such as death and marriage and it suggests to us a more passive acceptance. On the other hand, "stoicism" was more common among women. It was defined as keeping going following the death. This suggests a more active attitude toward events. Finally, there were significant gender differences in the reporting of "depression." Men reported these feelings significantly more than women. These findings are reported elsewhere in more detail (Bennett et al., 2005).

CONCLUSION

At the outset of this article we discussed our findings in terms of psychological responses to widowhood rather than talking about strategies. We find "psychological response" a more accurate reflection of our findings as it includes not only "coping strategies" in an active coping sense, but also those responses which are not necessarily articulated but are nevertheless present in the interviews. On the whole, people do not talk about doing this or that in order to cope, rather they talk about the things they do and the things they feel and the way that these were reactions or responses to events. It is also important to note that most of the participants were not consciously or actively using these strategies in coping with their widowhood, rather they were reporting what they were doing and feeling in their daily lives. Nonetheless, in analyzing the interviews we have identified certain psychological responses which appear to relate to a coping typology. It therefore seems to us that these responses may not in fact be conscious, although the use of particular responses seems quite logical given the experience that widow(er)s are facing.

The nature of the work does not permit any precise discussion of cause and effect. We cannot say with any definite certainty that a particular response determined whether someone coped better or worse. This is largely due to the fact that lack of reporting did not necessarily mean a particular psychological response was not used, only that it was not apparent in this study. In order to ascertain cause and effect, it would also be necessary to study the effects of response over time. Nonetheless, from the type of approach we have adopted, we

have been able to identify valuable insights into the experience of widowhood which we think require further investigation.

There is some evidence that different psychological responses are associated more with men or more with women. This suggests a differential response to widowhood. It is possible to argue that it is not always the case that what is good for men is good for women. In some cases the psychological responses served different purposes for men and women. This goes some way to supporting the view that widowers cope differently from widows (Carr, 2004; Stroebe et al., 2001).

Finally, the evidence shows that it was possible to distinguish those widows who coped well with their widowhood from those who coped less well. The evidence from the loglinear analysis provides confirmatory validity for those conclusions. We did not, for example, find any significant results which we were unable to explain or which were illogical or nonsensical. We are hopeful that the findings of this study will prove useful in the ongoing debate on the nature of widowhood. A further study to assess longitudinal effects would be of value, and is currently underway.

APPENDIX 1 **Codes Analyzed and Definitions**

<u>Code</u>	<u>Definition</u>
Aloneness	This is used where people talk about being alone in a positive sense—choosing to be on their own
Anger	Where people express anger—not just about death but about their lives in general
Burden	Not wanting to be a burden on family, for example
Church	Attending church services or meetings
Companionship	Reports having someone to do things with and having company—reference to spouse or friends
Confident	Feeling more confident as a widowed person than they had as a married one
Depressed	Emotional response includes suicidal thoughts, carelessness of life, devastated, desperate, heartbroken
Difficult	Experiencing practical difficulties—either because spouse was ill or living conditions difficult
Education	Where people go on courses

Faith	Used about religious faith/belief as distinct from church attendance or support
Friendship changes	Used for discussions of the ways in which friendship changes after death
Grief	Where participants discuss the grief they felt, using the term “grief”
Happy	Feeling happy
Helping others	Where the widow (or deceased) is involved in community work or similar
Independence	Where someone comments or demonstrates independence—often after the death
Irreplaceable	No one could replace spouse
Joining	Where someone joins a club, etc., usually after the death
Keeping busy	Where someone does a lot of things—often in the sense of keeping grief at bay
Kept self to self	Where someone has not shared their feelings with others and especially when the phrase itself is used
Low	Emotional response
Missing	Where the widow talks about missing the deceased
Moving on	Where respondents discuss having to move on and make a new life
Regret	Where participants express regret at some event associated with their spouses death, often with respect to something they feel they should have done
Relief	Relief after the death
Remarriage	Where people discuss the issue of remarriage
Resignation	Resigned to events, especially death of their spouse
Returning	Returning home—often not feeling comfortable coming home
Sad	Participants who feel sad
Selfish	Participants who say that they are “selfish,” used only when they themselves use the term
Shock	Respondents reporting feeling in shock following the death

Staying in	Following a death staying at home more than in the past and going out less than when married
Staying out	Staying out and not wanting to go home following death
Stoical	Keeping going following the death
Support	Receiving family, social, formal, and informal support
Talking	Used about talking to the deceased after they have died
Terrible/dreadful	Respondents reporting feeling dreadful or terrible following their spouses death
True friends	Mentions of a very supportive friend, described by participant as "true friend"
Upset	Getting upset following death
Voluntary work	When a participant undertakes voluntary work

ACKNOWLEDGMENTS

Thanks are due to the people who participated in this study and to those organizations that assisted us. Thanks are also due to Janette Davies (JD) and Alexis Halliwell.

REFERENCES

- Bennett, G., & Bennett, K. M. (1999). Witness, bereavement, and the sense of presence. In G. Bennett (Ed.), *Alas, Poor Ghost!: Traditions of belief in story and discourse*. Utah: Utah University Press.
- Bennett, K. M. (1997). Widowhood in elderly women: The medium- and long-term effects on mental and physical health. *Mortality*, 2(2), 137-148.
- Bennett, K. M., & Bennett, G. (2000-2001). "And there's always this great hole inside that hurts": An empirical study of bereavement in later life. *Omega*, 42(3), 237-251.
- Bennett, K. M., Hughes, G. M., & Smith, P. T. (2003). "I think a woman can take it": Widowed men's views and experiences of gender differences in bereavement. *Ageing International*, 28(4), 408-424.
- Bennett, K. M., Hughes, G. M., & Smith, P. T. (2005). Coping, depressive feelings and gender differences in late life widowhood. *Ageing and Mental Health*, 9(3), 1-6.
- Bennett, K. M., & Vidal-Hall, S. (2000). Narratives of death: A qualitative study of widowhood in later life. *Ageing and Society*, 20, 413-428.
- Carr, D. (2004). Gender, preloss marital dependence, and older adults' adjustment to widowhood. *Journal of Marriage and the Family*, 66, 220-235.
- Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56(2), 267-283.
- Davidson, K. (2001). Late life widowhood, selfishness and new partnership choices: A gendered perspective. *Ageing and Society*, 21, 297-317.

- de Ridder, D. T. D. (2000). Gender stress and coping: Do women handle stressful situations differently from men? In L. Sherr & J. S. St. Lawrence (Eds.), *Women, health and the mind* (pp. 115-135). Chichester: Wiley.
- Folkman, S. (2001). Revised coping theory and the process of bereavement. In M. S. Stroebe, R. O. Hansson, W. Stroebe, & H. Schut (Eds.), *Handbook of bereavement research: Consequences, coping and care* (pp. 563-584). Washington, DC: American Psychological Association.
- Gass, K. (1989). Appraisal, coping, and resources: Markers associated with the health of aged widows and widowers. In D. Lund (Ed.), *Older bereaved spouses* (pp. 79-94). New York: Hemisphere.
- Greenberg, M. A., Wortman, C. B., & Stone, A. A. (1996). Emotional expression and physical health: Revising traumatic memories or fostering self-regulation? *Journal of Personality and Social Psychology*, 71(3), 588-602.
- Klass, D., Silverman, P. R., & Nickman, S. L. (1996). *Continuing bonds: New understandings of grief*. Washington DC: Taylor and Francis.
- Kubler-Ross, E. (1969). *On death & dying*. New York: Macmillan.
- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal and coping*. New York: Springer.
- Lindemann, E. (1944). Symptomatology and management of acute grief. *American Journal of Psychiatry*, 101, 141-148.
- Lopata, H. Z. (1996). *Current widowhood: Myths and realities*. London: Sage.
- Lund, D. A., & Caserta, M. S. (2001). When the unexpected happens: Husbands coping with the deaths of their wives. In D. A. Lund (Ed.), *Men coping with grief* (pp. 147-167). New York: Baywood.
- Moss, M. S., & Moss, S. Z. (1996). Remarriage of widowed persons: A triadic relationship. In D. Klass, P. R. Silverman, & S. L. Nickman (Eds.), *Continuing bonds: New understandings of grief* (pp. 163-178). Washington, DC: Taylor and Francis.
- Mouser, N. F., Powers, E. A., Keith, P. M., & Goudy, W. J. (1985). Marital status and life satisfaction: A study of older men. In W. A. Peterson & J. Quadagno (Eds.), *Social bonds in later life: Ageing and interdependence* (pp. 71-90). Beverly Hills: Sage.
- Neimeyer, R. A., & Hogan, N. S. (2001). Quantitative or qualitative? Measurement issues in the study of grief. In M. S. Stroebe, R. O. Hansson, W. Stroebe, & H. Schut (Eds.), *Handbook of bereavement research: Consequences, coping and care* (pp. 89-118). Washington, DC: American Psychological Association.
- Nolen-Hoeksema, S., McBride, A., & Larson, J. (1997). Rumination and psychological distress among bereaved partners. *Journal of Personality and Social Psychology*, 72(4), 855-862.
- O'Bryant, S. L., & Morgan, L. A. (1989). Financial experience and well-being among mature widowed women. *The Gerontologist*, 29(2), 245-251.
- O'Bryant, S. L., & Morgan, L. A. (1990). Recent widows' kin support and orientations to self-sufficiency. *Gerontologist*, 30(3), 391-398.
- Office for National Statistics (ONS) (2001). *Living in Britain 2001*. London: The Stationery Office.
- Parkes, C. M., & Weiss, R. S. (1983). *Recovery from bereavement*. New York: Basic Books.
- Pearlin, L. I., & Schooler, C. (1978). The structure of coping. *Journal of Health and Social Behavior*, 19(1), 2-21.

- Peters, A., & Liefbroer, A. C. (1997). Beyond marital status: Partner history and well-being in old age. *Journal of Marriage and the Family*, 59, 687-699.
- Pickard, S. (1994). Life after a death: The experience of bereavement in South Wales. *Ageing and Society*, 14, 191-217.
- Siegel, S., & Castellan, N. J. (1988). *Nonparametric statistics for the behavioural scientists*. New York: McGraw-Hill.
- Smith, P. T., Bennett, K. M., & Hughes, G. M. (2003). Anxiety, depression and cognitive failures in older bereaved people. *Proceedings of the British Psychological Society*, 11(1), 154.
- Stroebe, M., & Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23, 197-224.
- Stroebe, M., Stroebe, W., & Schut, H. (2001). Gender differences in adjustment to bereavement: An empirical and theoretical review. *Review of General Psychology*, 5(1), 62-83.
- van Heck, G. L., & de Ridder, D. T. D. (2001). Assessment of coping with loss; Dimensions and measurement. In M. S. Stroebe, R. O. Hansson, W. Stroebe, & H. Schut (Eds.), *Handbook of bereavement research: Consequences, coping and care* (pp. 449-469). Washington, DC: American Psychological Association.

Direct reprint requests to:

Dr. Kate M. Bennett
The University of Liverpool
Eleanor Rathbone Building
Bedford Street South
Liverpool, L69 7ZA, England