



## PSYCHOLOGICAL ASPECTS OF WIDOWHOOD: THEORETICAL AND PRACTICAL DIMENSIONS IN THE CONDITIONS OF WAR

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### Abstract

Relevance. In the context of war, the number of widows and widowers in Ukraine is steadily increasing; however, the issue of adaptation to widowhood remains largely unexplored in Ukrainian academic research. International studies on widowhood mostly focus on elderly people, addressing the role of financial challenges and mental health issues among widows and widowers. However, we have found no research examining widowhood at a young age, which is characteristic of many contemporary Ukrainian widows of fallen soldiers.

The purpose of this paper is to present the theoretical and practical aspects of the issue of widowhood in wartime.

Methodology. The author applied the following theoretical research methods: analysis of scientific sources, systems analysis, synthesis, generalization of theoretical and practical observations, along with classification and specification.

Results. Widowhood brings about numerous economic, social, and psychological challenges, especially within the first year or so following the spouse's death. A woman who has lost her husband undergoes a process of grieving and adaptation that affects all areas of her life. The experience of loss has a specific trajectory, with four primary tasks that need to be addressed during grief: (1) acknowledging the loss; (2) openly experiencing and expressing feelings; (3) developing skills to act independently in areas of life where the deceased had significant influence; and (4) forming new emotional connections.

Conclusions. Key factors in adapting to widowhood and processing grief include the individual psychological characteristics of the woman and the nature of her relationship with her partner. The primary stages of working with widows encompass three phases: the first is individualized psychological support during acute grief; the second is individualized support as the woman transitions out of the acute phase; and the third phase involves group psychological work with women who have moved through acute grief, stabilized, and are ready to engage in mutual support groups with other widows.

**Keywords:** grief, grieving, adaptation to widowhood, widow, post-traumatic growth.



## Relevance

In Ukraine, the war has led to a daily increase in the number of widows. However, despite this, the issue of psychological characteristics, mental health, the grieving process, and therapeutic interventions for widows remains largely unexplored in Ukrainian academic research. The number of Ukrainian studies on this topic is so limited that it is nearly nonexistent.

Meanwhile, international psychological research continues to examine the mental health and well-being of widows and widowers (Carr, 2009; DiGiacomo et al., 2013; Onrust et al., 2006; Zisook et al., 1991; King et al., 2019), various factors affecting their condition (Sasson et al., 2014; Dabergott, 2021; Somhlaba et al., 2008; Carr, 2009), as well as social and socio-psychological aspects (Scannell-Desch, 2003; Trivedi et al., 2009; Dabergott, 2021; Srivastava, 2021; Schmitz, 2021; O'Rourke, 2004), among others.

The present paper aims to study the widows of Ukrainian soldiers – women who have lost their husbands to war – as they represent one of the most psychologically challenging categories for both research and therapeutic interventions.

We will give some grounds why the present research focuses on women. Statistics from various countries indicate that women are more likely to become widows than men. This is due to differences in average life expectancy, health, resilience, lifestyle, and other factors. Furthermore, studies suggest that widowhood has a more significant impact on women's mental health, while men generally adapt to it more easily (Fasoranti et al., 2007).

Let us specify, why we focus on the widows of Ukrainian soldiers. First, the issue of their adaptation in our challenging circumstances is of utmost relevance. Second, this category of widows is notably younger, as most existing research addresses elderly individuals coping with the loss of a spouse. In wartime, widowhood also affects young women, which we believe significantly influences their experience of grief and adaptation. Many young women, particularly those under 45, lack the established resources to cope with loss that older women (those over 50-60) typically possess. Such resources develop during maturity, particularly as parents and friends begin to pass away, making encounters with death more frequent. Furthermore, mature individuals tend to orient themselves toward mortality and adapt to thoughts of death, which fosters a maturity acquired during late adulthood in contact with the archetype of Hecate. And third, we have our own experience of widowhood and the largest number of clients in our psychotherapeutic, systemic family practice for the third year in a row are the widows of Ukrainian soldiers, so we have a lot of research and therapeutic material for observation, presentation and conclusions.

The research covers the psychological aspects of grieving and adapting to widowhood, as these are two parallel processes that initially exhibit significant dynamism, though their intensity may decrease over time. However, these processes

do not end with the time. We find it essential to raise this issue for further psychological research in domestic science, as we all share a bitter yet unique experience against a backdrop of collective trauma. Who, if not us, will help women who lose their husbands in war adapt to their new social and psychological conditions with as little trauma as possible? The purpose of the present research is the coverage of theoretical and practical aspects of the widowhood issue in wartime

### Methodology

To fulfill the set tasks of the research the author applied the following theoretical methods of research: analysis of the scientific sources related to the topic of the research, system analysis, synthesis, generalization of theoretical and practical observations, their classification and concretization.

### Results

The loss of a spouse is one of the most negative events in life, if not to take into account the loss of a child. The scientific research testifies, that disorganization and trauma, which follow the death of a spouse, are more intense among widows than widowers (Fasoranti et al., 2007).

The present paper defines the following main categories, which we will address:

- widow, according to the definition in the Ukrainian explanatory dictionary, is a woman who, after the death of her husband, has not remarried;
- widowhood refers to the unmarried status of a person following the death of their spouse;
- adaptation to widowhood is the process of a person adjusting to new socio-psychological living conditions after the death of their spouse;
- grieving is the natural transformative process that unfolds after a loss, fulfilling difficult but necessary tasks, including accepting the loss, experiencing pain, adapting to life with the loss, forming a new attitude toward the deceased or the lost, and building new relationships with people and the world (Rybyk, 2016).

The definition of the word widow suggests that it refers to a woman's social status: "married", "single", "divorced", "widow." However, in our view, it would be inaccurate to consider widowhood solely as a social status. It also represents a distinct psychological state that impacts all aspects of existence – psychological, physiological, cognitive, personal, professional, and social, among others.

First, a woman who has lost her husband experiences a process of grieving and adaptation that affects her entire way of life. Widowhood brings numerous economic, social, and psychological challenges, particularly within the first year or so after a spouse's death. For both genders, economic hardship is a primary concern. When the husband was the main breadwinner, his widow is now deprived of his income, leaving the family unit broken (Fasoranti et al., 2007).

Second, the term "social status" doesn't quite apply to widows of fallen soldiers, who are often referred to as "the wife of a deceased hero." In this sense, even this



“social status” exists in Ukraine mostly on paper. For the widow herself, this means she is still perceived as “wife”, which deeply impacts her process of adaptation to widowhood and grieving. After all, “wife” implies the husband is still alive, while “widow” indicates that he is gone and she must find a way to move forward – these are two very different paths in coping with loss. It is nearly impossible to accept the husband’s death, acknowledge this loss, adapt to life without him, and form new emotional bonds if she still identifies (or is identified) herself as “wife.” The first step in therapy when working with the widows of military personnel is to help them accept a new identity – “I am a widow.”

Another issue associated with widowhood is loneliness. Many widows suffer from the fear of being alone and experience a decline in self-esteem as a woman, along with a loss of emotional connection and close communication with others. This can lead to avoidance of social interactions and a reduction in emotional responsiveness when in contact with other people (Fasoranti et al., 2007).

According to our observations, young widows often seek casual relationships to “feel alive.” They attempt to fill the absence of the Animus in their lives by seeking physical connection, hoping to draw from this a form of energy they lack to overcome grief, build the necessary resources for healthy grieving, and ultimately reach post-traumatic growth. However, a challenge they face is that Ukrainian women have been raised by Ukrainian mothers, where such relationships are heavily stigmatized, along with the cultural myth that a widow should remain loyal to her deceased husband. Consequently, the grieving process for these women will differ significantly from that of those who do not have such social taboos surrounding these kinds of relationships.

The greatest challenge of widowhood is emotional. People respond differently to loss and go through grief at their own pace. For widows, the most difficult time is immediately following the funeral (Scannell, 2003). In my observations, even if the marriage was abusive or far from ideal, a certain level of idealization of the deceased spouse occurs. This idealization of the late husband is a stage of grieving that all widows go through.

The experience of loss follows a distinct process. It involves the “death” of a collapsed system, where neural connections formed during the relationship are severed, and new ones are formed, creating a new sense of wholeness – “me without him”, “me as the head of the family”, “me and my roles” (this is the essence of adaptation). In a partnership where the husband fulfilled multiple roles and was an equal partner in each, the woman experiences the “death” of each of these roles. She grieves the loss of her lover, her husband in all his partner roles, the father of her children, her friend, and so forth.

Based on our experience, we note that these processes drain a great deal of energy from the neocortex (nearly all cognitive functions, while grieving itself engages the limbic system and the reptilian brain). Thus, in the first weeks and even months

after the funeral, there is often a noticeable decline in thinking, attention, and perception. Even emotions seem “frozen” as all available energy is channeled toward physical survival and adapting to widowhood.

Nevertheless, Worden (2001) identified four tasks that need to be addressed during the grieving process:

1. acknowledging the loss;
2. openly experiencing feelings;
3. developing the skills to act independently in areas of life where the influence of the deceased was most significant;
4. forming new emotional connections.

Grieving is a dynamic process with specific stages. Voytovych (2019) outlines the following periods:

- the first 48 hours – a period of shock and denial;
- the first week – automatism, emotional or physical exhaustion;
- 2-5 weeks – exhaustion, feelings of abandonment, despair;
- from 6 to 12 weeks – through initial denial, then aggression, the realization of the loss of a loved one;
- 3 to 4 months – abrupt shifts from one emotional state to another, from aggression to despair, from emotional pain to some form of activity;
- around 6 months – depression;
- around 12 months – the first emotional and mental breakthrough may occur;
- 12 to 24 months – a gradual return to life.

But we note that despite the attempts of various researchers to highlight

However, we would like note that despite researchers’ efforts to identify specific stages within the grieving process, it remains a highly individual experience, influenced by numerous factors. The most significant of these, in our view, are the woman’s unique psychological characteristics and the nature of her relationship with her late husband.

Based on practical experience, we have identified three main types of women and three distinct patterns of grieving and adaptation to widowhood. We also observed that the progression from grieving to post-traumatic growth varies among these different types of women.

Partnerships are typically characterized by traits such as love, interest in the other person, closeness, and acceptance of the other as an individual. They also involve a strong sense of freedom, well-defined boundaries, comprehensive support, constructive conflict resolution, equality in decision-making, and shared responsibilities in managing the home and raising children. When one partner in such a relationship passes away, the surviving partner experiences a profound loss – not only the loss of a husband (or wife) with all associated social and psychological roles but also the loss of a best friend, a soulmate.

Women who build partnerships typically exhibit a high level of psychological maturity, personal and professional fulfillment; they are active, assertive, and resilient.



Therefore, in the grieving process, these widows immediately take on the “husband’s” role (in Jungian terms, this would be the dominant Animus state), and even experience hormonal shifts with elevated levels of adrenaline and testosterone. They become even more active and responsive, grieving through action. “What should we do?” becomes their guiding question. Their emotional responses are also intense – sadness and grief are constant background feelings, but anger, and at times even rage, is the dominant emotion. Consequently, in the early stages of grief, these widows do not cry – they shout and scream. Many start wearing their deceased husband’s clothing as a way to feel close to him. If the couple did not have children, some of these women decide to go to the front lines and join the fight. We have also observed that these women develop a heightened sense of boundaries and become highly sensitive to aggression or disrespect toward military personnel from others. For these widows, emerging from grief involves reaching a stage of rest and pause, reducing reactivity, and finding emotional balance.

There are also widows who grieve very quietly, withdrawing entirely, becoming isolated and immobilized. The main characteristic of their grieving process is an absence of action, with even minimal social interactions becoming challenging due to a lack of energy. For these widows, the path out of grief is transitioning to a stage of anger and action, but this shift must be gradual and careful.

The next type of relationship is immature (parent-child dynamics, sometimes abusive). These relationships are marked by attachment issues in women, often stemming from complex relationships with their actual parents during childhood, typically resulting in insecure attachment styles, such as anxious or disorganized attachment. These women from the beginning seek not a partner but a parental figure, becoming emotionally and financially dependent on them. Such relationships are based more on fear than love, on anxiety rather than partnership. There is also a pronounced psychological merging with the partner, with the woman seemingly losing herself and adopting her partner’s identity.

These widows resemble lost children being confused, filled with fear and anxiety, asking me, “How do I live without him?” or “What do I do now?” Idealization of the deceased husband is typical for them. Alongside grieving, they undergo a process of separating from him as a parental figure. In therapeutic interventions, it’s important to help these widows see their deceased husbands as partners, to learn to rely on themselves, and to achieve psychological maturity. Without this support, they may either revert to dependent relationships in the future, or the grieving process may become endless, with the role of the husband-father figure taken up by children or relatives. For these women, emerging from grief involves a process of separation and achieving psychological maturity.

We should note that our observations require more detailed research and empirical validation. Our conclusions are largely based on practical experience and

personal insights. It was important for us to draw attention to the issue of widowhood, as the number of widows in Ukraine continues to grow.

### Conclusions

The theoretical aspects of adaptation to widowhood and grieving, which we have outlined above, summarize the limited research on this issue. However, there is also a practical side based on our experience in psychological work with women.

We founded the “Lagertha” NGO, which is dedicated to the development and support of women. One of the organization’s focus areas is the “Women of Fallen Heroes” project, which provides psychological support in the processes of grieving and post-traumatic growth for widows.

The work proceeds in three main stages:

1.The first stage involves individual psychological support for women in a state of acute grief.

2.The second stage continues with individual psychological support as the woman emerges from the acute state.

3.The third stage is group psychological work with those women who have already experienced the acute phase of grief, stabilized, and are ready to work with others in a peer support group format.

We use various approaches in group work, including widow support groups and, for example, bread therapy (Korolovych, 2024). Other groups include: the language workshop “Ukrainian – a Language that Heals”; an advanced online training project on loss and grieving for experienced practical psychologists called “The Power of Grieving”; a retreat called “Recovery”, focused on enhancing resilience and preventing burnout among mediators; and support groups for relatives of missing persons, “Psychological Support for Those Who Wait.”

We believe that extensive research is necessary to examine the unique aspects of adaptation to widowhood among the widows of fallen soldiers, with a detailed analysis of the characteristics, factors, and psychological mechanisms of this process. Additionally, there is a need to develop comprehensive psychological intervention methods to support their grieving and adaptation. These questions will be the subject of our further scientific investigations.

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## ПСИХОЛОГІЧНІ АСПЕКТИ ВДІВСТВА: ТЕОРЕТИЧНИЙ ТА ПРАКТИЧНИЙ ВИМІРИ В УМОВАХ ВІЙНИ

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### Анотація

Актуальність. В умовах війни, в Україні дедалі зростає кількість вдів та вдівців, але проблема адаптації до вдовства не є актуальною у вітчизняній науці. Зарубіжні дослідження загалом стосуються літніх людей, визначенню місця матеріальних проблем у процесі адаптації, проблемам психічного здоров'я вдів та вдівців. Але нами не відомі дослідження, що вивчають вдовство у молодому віці, а саме такими є сучасні українські вдови загиблих військових. Метою цієї статті є викладення теоретичних та практичних аспектів дослідження проблеми вдовства в умовах війни.

Методологія. У роботі над матеріалом публікації було використано теоретичні методи дослідження: аналіз наукових джерел, системний аналіз, синтез, узагальнення теоретичних та практичних спостережень, їх класифікація та конкретизація.

Результати. Показано, що вдовство створює безліч економічних, соціальних і психологічних проблем, особливо в перший рік або близько того після смерті одного з партнерів подружжя. Жінка, яка втратила чоловіка на війні, переживає процеси горювання та адаптації до життя у статусі вдови загиблого, які істотно



впливають на всю її подальшу життєдіяльність. Переживання втрати має досить конкретну динаміку. Основні чотири завдання, які повинні бути вирішені вдовою за час переживання горя це - 1) визнання втрати; 2) відкрите переживання почуттів; 3) вироблення вмінь самостійно діяти в тих сферах життя, де вплив померлого був найбільш помітним; та 4) створення нових емоційних зв'язків. Значущими для перебігу процесів горювання й адаптації до вдовства є індивідуально-психологічні особливості жінки, яка втратила чоловіка та тип стосунків, в яких перебувала пара.

Висновки. У статті обґрунтовано, що основними кроками психотерапевтичної роботи із вдовами є три наступні етапи: першій – індивідуально-психологічний супровід жінки в стані гострого горя; другий – індивідуально-психологічний супровід вдовиці, коли жінка вже вийшла із гострого стану; третій етап - групова психологічна робота з тими жінками, які вже пережили гостру фазу горювання, психологічно стабілізувалися та готові до роботи з іншими жінками в форматі груп взаємопідтримки.

Ключові слова: горе, горювання, адаптація до вдовства, вдова, постравматичне зростання

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