Gender difference in bereavement support for older widowed people
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Most research examining social support provided to older widowed people has focused on its impact on adaptation to widowhood (Dimond, Lund & Caserta, 1987; Stroebe et al, 2005). Stroebe and colleagues (2005) found that, although social support reduced incidence of depression in widowed women, there were no recovery or buffering effects. However, relatively little research has explored gender differences in the support offered (Farberow et al, 1992; Thuen, Reime & Skrautvoll, 1997).

Gender stereotyping would suggest that widowed women might receive more informal (and, indeed, more formal) emotional support than men, simply because emotions are often considered women's business. The situation with respect to practical support is less clear-cut. One might, on the basis of traditional roles, expect men to be offered more practical support with domestic chores. But one might also expect women to be offered more practical support with home maintenance tasks.

Farberow and colleagues (1992), in a comparative study of responses to spouses bereaved by suicide and natural death, found that women overall reported receiving more support than men.

Much of the work with widowed people to date has examined social support following the death of the spouse. Much less considers the support offered before the death. Although Carr (2004) did not examine specifically the amount of support offered before bereavement, she did find that those widows and widowers who were most dependent on their spouses prior to their loss gained most psychologically after their loss.

This article draws on findings from a wider study that asked widowed people about whether men and women responded differently to widowhood. The study was supported by the Economic and Social Research Council as part of the Growing Older Programme of 24 projects studying the quality of life of older people. There was a clear view from both men and women in this study that men fared less well than women following the death of a spouse. When asked about this, both men and women agreed that it was because of poorer social skills, poorer domestic skills and bottling up their emotions (Bennett, Hughes & Smith, 2003).

This article explores in greater depth the

Gender difference in bereavement support for older widowed people

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Abstract: Emotional and practical support at and around the time of a spouse’s death is seen as important in helping older bereaved people come to terms with their loss. This article examines gender differences in the support offered to older widowed people. A total of 46 widows and 46 widowers were interviewed about their marriages, their lives immediately following the death of their partners, and their lives now. Contrary to findings in previous research, but in line with the beliefs of the women interviewees, the men received more formal support than the women. The article ends with a discussion of the possible explanations, and some recommendations for further research.

Keywords: Later life, widowhood, gender, social support, formal support

Editor’s note: Whether or not men are incapable of looking after themselves after their wives die, it is sufficient that both men and women commonly believe this to be so. ‘He couldn’t boil an egg’ may simply mean that he has never had to try. In this article, Kate Bennett documents the perceived domestic helplessness of men, which may contribute to the well-documented finding that they are more likely than women to remarry. (CMP)
findings relating to gender differences in social support offered to elderly people following the death of their spouse. It has three main aims: to discover whether widowed men and women believe there are gender differences in the provision of support; to identify whether there actually are gender differences in the provision of support, and to examine the social support provided to men before and after the death of their wives. The article ends with an exploration of the possible reasons for any gender differences in the provision and receipt of support.

The study

The participants were 46 widowers (only 45 of whom were interviewed) and 46 widows, living in the north-west of England. One woman was excluded as she had been widowed for 60 years. The remaining participants were aged between 55 and 95 years (mean = 74), and had been widowed for between three months and 32 years (mean 8.68 years). Participants were recruited via contacts with formal and informal groups for older people, welfare organisations and agencies, social services and sheltered housing schemes. The local ethics committee approved the study, and confidentiality and anonymity were assured. For a discussion of selection issues see Bennett, Hughes and Smith (2005).

The semi-structured interviews were conducted in the respondents’ own homes, and were tape-recorded. The interviews lasted between three-quarters of an hour and an hour-and-a-half. Before beginning the interview, the respondent was given an information sheet to read and asked to sign a consent form; confidentiality and anonymity were assured. The interview was not prescriptive; the aim was to learn from the widowed people what was important to them. The approach was: ‘We are the novices and you have the experience’.

The interview schedule comprised five parts: factual questions concerning age, length of marriage, widowhood and family relations, followed by four sections inquiring about the widowed person’s life during their marriage and following their bereavement. The first section explored the marriage – did they have shared hobbies, who did what in terms of domestic tasks, did they have separate activities and interests, did they argue, and what about? The second section focused on the time around the death of their spouse – what did a typical day look like after the death, did they go out, what support did they receive from family and friends, how did they feel? The third section asked about their lives one year after the death – had their life changed, what was a typical day like at that time, were they doing anything new, had anything changed with regards to work around the home, had their feelings changed, were they lonely or were they enjoying being able to spend time alone? The final section asked about their lives now – what did they do with their time, how did they feel about their widowhood, how had their lives changed, how did they feel emotionally, and how did they now feel about being alone?

The interviews were coded by three members of the team using grounded theory and content analysis methods. For a detailed description of the analytical technique, see Bennett and Vidal-Hall (2000). The primary analysis was qualitative. However, one statistical analysis using chi-square was undertaken to identify whether one gender received more support than the other.

Findings

The key finding for the purposes of this article is that the women believed that men received more support than they did. This finding is contrary to the findings in much of the literature (Farberow et al, 1992; Thuen, Reime & Skrautvoll, 1997). The support received by participants fell into one of three main categories: formal, family, or other informal support. Statistical analysis using chi-square indicated that men were indeed receiving more support, but only in one particular category: the men were receiving more formal support than
the women. There were no gender differences for family and other informal support.

Examples of each of the types of support reported by the men, pre- and post-bereavement, are given below. The names have been changed to preserve anonymity.

**Pre-bereavement**

**Formal support**

Much of the formal support received by men was from nurses, and in particular Macmillan nurses, during the last stages of their wives’ lives.

'We did have a nurse after part of the early chemo – the last fortnight before she went we had a Macmillan nurse in.' (Man 18)

'She came home and er, I asked the hospital could I have er, the Macmillan nurses and they said yes if I told her she was dying.' (Man 15)

This man’s wife had dementia and he nursed her for a long time, but he also had formal support:

'I could never go out or – couldn’t go out shopping unless I had a carer sent. She could never be left on her own and um, so we used to get a care attendant in for two hours and I would shop or whatever had to be done.' (Man 16)

This man also needed additional care for his wife:

'She even used to take Margaret up to the bath and bath her like a mother and Margaret used to revel in it then.' (Man 6)

Women spoke much less often of receiving nursing support, and scarcely at all about receiving what might be termed personal care, such as bathing and dressing.

**Family support**

There was only one clear example of family support in the period leading up to the death of a spouse. One man’s wife’s parents looked after her at their house while she was dying, while he stayed in the family house and looked after the children.

**Other informal support**

There were few clear examples of other types of support received by either widows or widowers in the time running up to the death of their spouse. However, this man did receive support from a neighbour both before and after the death of his wife:

'And she, I was talking to – she was a nice lady – she says, “I’ll come and help you with your wife.” And she came and helped me, helped me, visiting quite a lot, looked after her a lot. And that – and I still am friendly with her now.' (Man 14)

Although examples of this type of support were not frequent, it is not possible to state that this support was not given – only that it was not discussed by the interviewees.

**Post-bereavement support**

**Formal support**

Support from Macmillan nurses ceased following the death of these men’s wives, but they did receive other forms of formal support post-bereavement:

'I’m on meals on wheels which is nice.' (Man 1)

'Now I’ve got to depend on a shopper because my shopping … She does it every week. Same lady does it every week. Well I just have the plain things.' (Man 3)

'I got up this morning and the girl used to come to me but she had a stroke a while ago and she’s in for the lot now and she wants to get back to work and I rung her up just now just before you came actually and she’s going to come down next week and start work again so at least the place will be clean you know.' (Man 44)
It is interesting that in this last example the cleaner had herself been ill, and yet was willing to return to look after him.

**Family support**

Many of the men received a great deal of familial support, frequently from daughters:

'A couple of weeks and most of the time for the first six months I was staying with them, one or the other, but I didn’t want to impede on them and they didn’t mind me staying there. They wanted me to stay there.' (Man 12)

'I go and see her about three times, four times a week. Yes. And if I don’t go, one of the kiddies comes down on the bikes, “Granddad, where’ve you been?” … They’re splendid. They’re lovely kids.' (Man 13)

But sons were also providing their fathers with support, as in this example:

'One of them – well he comes down frequently – see how things are. He’s been a great help.' (Man 17)

Other family members were also providing valuable and welcome support, as in these examples:

'You’ve got a support that you’ve never quite experienced before and I suppose it put – it allowed me to have my own place and yet they were always there.' (Man 15)

'And me granddaughter’s a great help – she’s helped to shop for me if I’ve not been too good you know.' (Man 8)

**Other informal support**

Other forms of informal support that were important to the widowed men included that provided by people in the community – friends or members of clubs or day centres:

'There again I found people who I knew who were very supportive and that became the regular routine and I used to go out to shops.' (Man 15)

'But that woman after Pam’s funeral, about a fortnight after, she rang up and she said “How you doing Bill, you know, you alright?” I said, “Yes alright, fine thanks.” And er, she said, “Are you eating properly?”' (Man 20)

'Oh well, coming here as well, they were supportive.' (Man 18)

It is clear that support for widowed men both before and after their wives died came from a wide range of sources: through formal support, familial support and from other sources that are less easily defined, and sources that have no obligation to provide support.

**Discussion**

The wider study from which these findings are taken asked widowed people about whether men and women responded differently to widowhood. There was a clear view from both men and women that men fared less well than women. When asked about this, both men and women agreed that it was because of poorer social skills, poorer domestic skills and bottling up their emotions (Bennett, Hughes & Smith, 2003). However, the women also suggested that men receive more support than women, and they expressed some dissatisfaction with this. Analysis of the interviews showed there was indeed a significant difference; the women were correct: these men were receiving more support, but only with respect to formal support.

Why should this be the case? Men appear to receive formal support both before and after the death of their wives. The formal support received by men before the death of their wives is primarily nursing or personal care given to the ill wives. The formal support received afterwards is primarily meals on wheels, cleaning or shopping.
cases the support fits into traditional gender roles—men are offered support with ‘women’s work’. But that is not to say that many of the men were not providing a great deal of care for their wives in the period leading up to their death.

Without empirical evidence, it is possible only to speculate why this should be the case. Nevertheless the speculation is interesting and could form the basis of valuable future research. First, are men offered formal support because of the general consensus (supported by both widowed men and women) that older men cannot cope alone with the caring responsibilities of a sick wife, and with the domestic skills needed by someone living alone after their wives have died? Second, is there a common view that women can cope with a sick husband and with the domestic responsibilities associated with living alone, and thus women are not offered formal support? Third, are women perhaps offered formal support but do not feel able to accept it—possibly because they do not wish to relinquish care of their sick husbands, or feel that it would reflect badly on them if they were seen to need support. Fourth, women may be offered formal support but what is offered may not be what they need. The women interviewed in this study certainly said they would like more formal support. This being the case, it would be useful to identify why women receive less formal support than men, and to target appropriate support more effectively, when it is required.


