

University of San Diego

Digital USD

---

Dissertations

Theses and Dissertations

---

1999-03-01

## Lifting the Veil off Widowhood: Portraits of Transformation

Louise A. Stanger EdD  
*University of San Diego*

Follow this and additional works at: <https://digital.sandiego.edu/dissertations>



Part of the [Leadership Studies Commons](#)

---

### Digital USD Citation

Stanger, Louise A. EdD, "Lifting the Veil off Widowhood: Portraits of Transformation" (1999). *Dissertations*. 660.

<https://digital.sandiego.edu/dissertations/660>

This Dissertation: Open Access is brought to you for free and open access by the Theses and Dissertations at Digital USD. It has been accepted for inclusion in Dissertations by an authorized administrator of Digital USD. For more information, please contact [digital@sandiego.edu](mailto:digital@sandiego.edu).

**LIFTING THE VEIL OFF WIDOWHOOD:  
PORTRAITS OF TRANSFORMATION**

by

**Louise A. Stanger**

**A dissertation submitted in partial fulfillment  
of the requirements for the degree of  
Doctor of Education**

**University of San Diego**

**March, 1999**

**Dissertation Committee**

**Johanna S. Hunsaker, Ph.D.**

**Edward Kujawa, Jr., Ph.D.**

**Carolyn Balkwell, Ph.D.**

**John D. Clapp, Ph.D.**

**Copyright © 1999**

**by**

**Louise A. Stanger**

**All rights reserved**

## **ABSTRACT**

**This qualitative research study has explored the lives of 13 women who were widowed before the age of 55, who are professionals, educators, businesswomen, and community activists, to learn how their lives have been transformed since the death of their spouse. For this study, the death of a spouse was seen as a transforming event in the life of a married woman. The nature of this transformation varied with each respondent. Portraiture was the primary biographical methodology used. Purposive sampling provided the opportunity to interview women from diverse backgrounds. Five global, open-ended interview questions were used and demographic data were gathered. The data collected suggest each widow's experience is unique and universal and no two journeys through widowhood are exactly the same. Life is a narrative in which marriage, for the 13 participants in this study, has been a major part of their conversations. The death of their spouses represented punctuation marks in their lives, leaving them with many question and exclamation marks. The death of a spouse has signified the end of her married life, a time in which she has been forced to reexamine what was, is, and yet to come. It is evident that these women in varying degrees still carry the conversation of their married life with them through the eyes of their children and the continuing relationships they have with their deceased spouses.**

**Given the multidimensional reality of these 13 women's lives, which at times has transcended traditional boundaries of time and space, these are exceptional yet ordinary women. The participants used a myriad of coping strategies to wade through**



the initial analyses of shock, anger, sorrow, and disbelief to come to where they stand today. In doing so, the winds of time became the threads which propelled them forward. Each thread knotted with their own determination and the support of other widows, friends, family, educational pursuits, work, and a commitment to children has served as the backdrop for their successes. Each has painted her own portrait of courage and determination.

## DEDICATION

This dissertation pays tribute to the memory of my maternal grandmother Fannie Rosenthal Schwartz and my mother Dorothy Schwartz Wallach Levine, who taught me about the dimensionality and complexity of goodness. Both women knew well the perils of widowhood. This work salutes the artistry and creativity of their lives.

As always my three daughters Sydney Dara, Felicia Rayne, and Shelby Brooke are the wings beneath my feet.

## PREFACE

I wonder why I am having such angst beginning this discourse, this dissertation on widows, widowhood, and beyond. I who am always loquacious, I who am always ready to write now am silenced. Is it the enormity of the subject? Is it because I know widowhood all too well. After all, I am a third generation widow, following in the footsteps of my grandmother who was widowed at age 50 and my mother who was twice widowed at ages 40 and 73. And then there is me, widowed suddenly and unexpectedly at age 44. Am I fearful to put on paper the anguish of so many? Am I afraid to write of the triumphs widowhood might bring? I wonder what my three daughters might have in store for them, or am I merely overwhelmed by the rigors of research. Perhaps it is all of these and none of these, for as I write with sun glistening on my back while the sound of a pen glides across my yellow notebook pad, I know I must begin. For the tales of widows are most noteworthy. Their stories demand to be told. They teach us about love, loneliness, joy, sorrow, anger, hate, discrimination, negativism, of laughter, humor, challenge, and transformation. It is with this knowledge I begin.

## ACKNOWLEDGMENTS

To thirteen magnificent women:

My heartfelt gratitude to the stunning women who participated in this study. I am awed by your courage and humbled by the confidence you have placed in me. I am forever enriched by your lives.

To Committee Members:

Dr. Edward Kujawa--Ed, you were the first professor I had the privilege of taking a course from when I entered the doctoral program at the University of San Diego. Then, as now, you are topnotch! You welcomed and ushered me through the evaluation seminar with the same enthusiasm and insight you have demonstrated throughout this dissertation. I thank you for the wise deliberation and thoughtful consideration you have given me throughout this process.

Dr. Carolyn Balkwell--Carolyn, as the acting director of the Department of Child and Family Development at San Diego State University I know how busy you have been, and yet you have always found time for my research. Early on you were quick to share your own research as well as introduce me to the scholarly works of Helen Lopata, Steven Shuchter, and Sidney Zisook. Ever mindful of how difficult it was to find women who met the research criteria you were quick to refer me to prospective participants. Your enthusiasm for this research and insightful comments are valued.

Dr. John Clapp--John, some years ago Dr. Sheldon Kopp wrote a book entitled, If You Meet the Buddha on the Road, Kill Him. What Dr. Kopp meant by that statement was the greatest gift any teacher can have is for his student to become his teacher and vice versa. We have had the singular opportunity to have such an exceptional relationship. Your keen eye for detail, logical mind and methodological expertise have been a tremendous asset to this research. Thanks teach!

Friends were an important asset to this project. They forced me to examine and encouraged me to grow.

Dr. Glenn O. Haworth, Professor Emeritus, San Diego State University School of Social Work and Joanne Haworth. For almost thirty years you both have been a source of love and joy. Glenn, you guided me through my master's essay and read with pride this dissertation. Your questions on transformation helped me navigate my way. Joanne, you have been incredible. Thank you for always believing in me.

Dr. Esther Jones Langston--Esther Ruth, life gives us a few golden apples. My dearest friend, you are the most golden apple of them all. Who knew 29 years ago our lives would take us on such a hilarious, joyous, uplifting yet arduous journey. I am eternally grateful to the God who brought us together. YOU GO GIRL!

To the Real Stars:

Genevieve Offner--Genny, I like so many others have benefitted greatly from your skill and expertise. Throughout my doctoral program you have been an outstanding transcriptionist, ally, and friend. No writer could ask for more. I salute you. You continually nourished my soul.

Dr. Johanna Hunsaker:

Dear Jo:

You are one of a kind, a pioneer. Hong Kong was a momentous experience, my first exposure to a foreign country and to the works of Sara Lawrence-Lightfoot. It was here the seeds of this research project were born. I applaud you for developing such courses as Women and Leadership, and for shepherding students such as myself in new forms of scholarship that demand academic rigor and which challenge traditional research methodologies. You are vigorous, creative, innovative, energizing, imaginative, benevolent, stimulating, powerful, gentle, and instructive. You are in every sense of the word, a Leader!

John Walter Wadas:

Dear John:

I thank the moon, stars, and sky for you. Not only did you have enough love in your heart and ego integrity in your soul to guide me through this process, you have been with me every step of the way. Whether it is going on the internet, letting me read aloud each portrait or listening to me whine, you always say the right stuff. My heart is full. Life is good, my love!

## TABLE OF CONTENTS

<b>CHAPTER 1: INTRODUCTION</b> . . . . .	<b>1</b>
Statement of the Problem . . . . .	1
Purpose of the Study . . . . .	6
Significance of the Study . . . . .	6
Research Questions . . . . .	7
Definition of Terms . . . . .	8
Organization of the Study . . . . .	12
<b>CHAPTER 2: REVIEW OF THE LITERATURE</b> . . . . .	<b>14</b>
Introduction . . . . .	14
Psychological Perspectives . . . . .	15
Sociological Perspectives . . . . .	23
Widows Under the Age of 55 . . . . .	26
Widows and Transformation . . . . .	32
Growing Through Widowhood . . . . .	35
Growing Beyond Widowhood . . . . .	36
Sex, Dating and Remarriage: Common Transformational Tasks . . . . .	38
Summary . . . . .	42
<b>CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY</b> . . . . .	<b>43</b>
Introduction . . . . .	43
Qualitative Research . . . . .	44
Methodology Portraiture . . . . .	46
Research Design . . . . .	50
Selection of Participants . . . . .	53
Protection of Participants . . . . .	54
Data Analysis . . . . .	55
Researcher as a Positioned Subject . . . . .	59
Researcher as a Collaborator . . . . .	60
Final Thoughts on Narrative and Portraiture . . . . .	60
<b>CHAPTER 4: PORTRAITURE</b> . . . . .	<b>62</b>
Demographic Information . . . . .	62
Portraits . . . . .	62

Denise . . . . .	65
Belice . . . . .	76
Roslyn . . . . .	85
Julie . . . . .	94
Chloe . . . . .	101
Helen . . . . .	113
Barbara . . . . .	120
Joan . . . . .	130
Angela . . . . .	138
Meg . . . . .	147
Lee . . . . .	160
Lila and Ruthie Lee . . . . .	170
Ruthie Lee . . . . .	180
Summary . . . . .	187
 CHAPTER 5: DISCUSSION . . . . .	 188
Other Matters of Consequence, Issues of Bereavement, Mourning and Grief . . . . .	201
Dating, Sex, and Remarriage . . . . .	203
Other Life Changes: Bedrooms, Clothing, and Wedding Rings . . . . .	204
Summary and Conclusions . . . . .	205
Recommendations . . . . .	209
Afterthoughts to the Reader . . . . .	211
 REFERENCES . . . . .	 213
 APPENDICES	
A. Questions . . . . .	223
B. Consent Form . . . . .	224
C. Thank You Letter to Participants . . . . .	226



## LIST OF TABLES

<b>Table 1: Demographics of Participants . . . . .</b>	<b>63</b>
--	-----------

## CHAPTER 1

### INTRODUCTION

It was the morning after Easter. A time of celebration, of renewal. Everyone was well rested, having spent the weekend lounging in the warmth of the desert. All of us felt deliciously spoiled. Easter at the Ritz, a second home with a lake stocked with fish, beautiful swimming pools, and tennis courts, the solitude of the La Quinta Mountains with hot air balloons decorating the backdrop. The girls gladly left for school, eager to be reunited with friends, fresh to share their adventures. We were not our usual hurried selves. We talked. I know not of what--we hugged--we said goodbye. I traveled off to the University to teach. He went off to his favorite places--his dental office and the Price Club. We never spoke again. Ten hours later I would discover his brand new, unscathed car fishtailed on the freeway. The car had glided to a gentle stop. A policeman stood in the middle of the freeway directing me to the right shoulder of the road. My husband of 23 years, my college friend was dead. He was 48 years old. I was 44. His death became the catalyst which catapulted me into a new way of being. Nothing would ever be the same.

#### Statement of the Problem

Today there are approximately 101,414,000 women 18 years of age or older in the United States. Of these, over half (58,748,000--58%) are married, 20% (20,503,000) have never been married, and a little over 10% (11,056,000) are widowed. Of the married group, it is impossible to know how many have been

widowed and have since remarried. Of those women who are widowed, only 9.4% (1,039,000) are under the age of 55. Almost 89% of all widows are over the age of 65 (U.S. Bureau of the Census, 1997). These figures are similar to the 1995 and 1996 data from the U.S. Department of Commerce. The number of younger widows is increasing. In 1980, only 8% of all widows were under the age of 65, while in 1993, 20% of all American widows were between the ages of 55 and 64, and 12% were under the age of 55 (Lopata, 1996). While the "median age for white widows is 56 years, for African American widows 49 years, and for women of Hispanic origin 48 years, many women lose their spouses at an earlier age" (Digiulio, 1992, p. 97). The widow 55 years or younger is often overlooked in the research. Ironically, a closer look at the data suggested that "one-third of all women who are widowed do so [sic] while still under the age of 40" (Lopata, 1996, p. 49). These data give credence to the importance of investigating widows 55 years of age and younger.

While the number of widows has risen over the decades, the proportion of widowed women has actually decreased since 1970 (a high of 13.9%) as the proportion of married women decreased due to an increase in the percentage of single and divorced women. For example, in 1996 and 1997, there was almost an equal amount of widowed and divorced women (U.S. Bureau of the Census, 1997). This is in sharp contrast to the mid 19th century where "most dissolutions in a given year were by death of a spouse, whereas by the mid 1970s for the first time in our nation's history, more marriages ended in divorce" (Lopata, 1996, p. 70). Thus, women who are widowed before the age of 55 represent only 1% of the total female population.

Of that number, it is difficult to know how many widowed women are considered to be working and/or professional women, retired, and or "displaced homemakers."

Research concerning widows and widowhood has included sociological, psychological, and psychiatric studies. Sociologists for the most part were interested in demographic variables associated with widows and widowhood (Balkwell, 1981; Ball, 1977; Chevan, 1995; Kramarow, 1995; Lopata, 1987; O'Bryant, 1991; Ozawa & Downs, 1986). Questions asked were: Who is a widow? What is her age? Where does she live? What are the events which led to widowhood? Where did the event take place? What are the socioeconomic consequences of widowhood? What social supports are available? Major sociological findings indicated that most widows are over 65, suffer extreme economic hardship, tend to live alone and depend more on older daughters than sons, more on friends than relatives (Balkwell, 1981; Lopata, 1996).

The discipline of psychiatry has been more interested in the processes of grief, bereavement, and mourning (Parkes, 1970, 1988, 1990; Shapiro, 1994; Shuchter, 1986; Shuchter & Zisook, 1990; Stroebe & Stroebe, 1993; Zisook & Shuchter, 1992, 1993). Operating from a medical model, psychiatry has sought to determine if grief and the process of bereavement is a pathological or nonpathological event. In doing so, psychiatric researchers have studied these processes using the clinical diagnosis of depression as a framework for examining widowhood. Findings suggested that bereavement is a holistic, multidimensional, natural process. Grief may intermittently last for years and is a normal phenomena, as is the creation and maintenance of some

sort of relationship with the deceased. Sex, dating, and/or remarriage are viewed as healthy responses. Allied health disciplines such as nursing, psychology, and social work examined such topics as postvention services (Chamberlin, Chandler, Jarman, & Lofgren, 1982; Lawrence, 1992; Lyon & Moore, 1990; Nudel, 1986; Potocky, 1993; Saunders, 1979), therapeutic considerations (Ball, 1977; Gass-Sternas, 1995; Lawrence, 1992; Saunders, 1979; Shapiro, 1994), the role of Social Security benefits, and work considerations (Gueron, 1995; Ozawa & Downs, 1986).

Historical data on widows have been gathered cross-culturally (Blom, 1991; Mirror, 1992). With the advent of feminist research, a smattering of qualitative historical projects examined the lives of widows and the legal ramifications of widowhood related to inheritance laws (Beecher, Madsen, & Anderson, 1988; Blom, 1991; Carter, 1988; Scadron, 1988; Wilson, 1992). These studies suggest that the demands of culture affect widowhood. The fact that women "could transcend the debilitating affects of widowhood speaks more for the individuality of women than for the enlightenment of society" (Beecher, Madsen, & Anderson, 1988, p. 134).

The related disciplines of gerontology and social biology have also enriched this field. Neugarten's (1968; Neugarten & Datan, 1973) work regarding "on and off time" has led others to question whether the age of the spouse at death or mode of death is a factor in adapting to the death of a spouse (Balkwell, 1985; Ball, 1977; Doka, 1996; Lopata, 1987, 1996; Saunders, 1979; Smith & Zick, 1996). Researchers, however, have not been able to determine if either the age of the spouse or the cause of death is a factor in how a woman adapts to the death of her spouse.

Journals and other personal writings have long been recognized as a source of valuable qualitative data (Mirror, 1992; Scadron, 1988; Wilson, 1992). First person narratives are not a new phenomenon; women have published first person accounts of their widowhood experiences. Caine (1974) paved the way with her now classic book Widow. Today there are a handful of books on widowhood written by women who have experienced this phenomena (Cumming, 1981; Ericsson, 1993; Foehner & Cozart, 1988; Gates, 1990; Jensen, 1977; Thompson, 1992).

Beyond traditionally published works, the Internet provides a rich source for the newly-widowed to communicate or obtain information. Support group messages and chat centers are available through America Online and Netscape. Today, in the land of virtual reality, widows meet and share their experiences; their descriptions are rich and varied. Newspapers and magazines from time to time carry accounts of prominent or successful widows or offer advice to widows (Fitzsimmons, 1995; Friedman, 1994; Jackson, 1997; Marin & Chang, 1998; Nemy, 1992; Sefton, 1998).

Self-help books and articles have been written by human service professionals (Campbell & Silverman, 1996; Chamberlin et al., 1982; Doka, 1996; Nudel, 1986; Shuchter, 1986; Silverman, 1986; Ufema, 1994), widows and widowers (Caine, 1974; Di Giulio, 1989; Ericsson, 1993; Foehner & Cozart, 1988; Gates, 1990), reporters looking for a special story (Lief, 1997; Munk, 1995; Sloan, 1993; Witchel, 1995), and insurance companies (USSA Educational Foundation, 1991, 1994). These publications have focused on helping widows with bereavement tasks and have addressed such sensitive topics as personal belongings, wedding rings, and bedrooms.

Novelists have also used young windows as the foci of their books (Irving, 1988; Shreve, 1998).

### Purpose of the Study

This study explored the experiences and challenges of 13 women who were widowed before the age of 55, who were widowed for at least two years, and who were or are employed professionals and/or businesswomen. Interviews with Hispanic, White, Black, Asian, and Pacific Islander women are included. Descriptions of their lives before the death of their spouse have been obtained. Further, the events surrounding their husband's death and the transactions which followed were examined to learn in what way their lives have been transformed since the death of their husband. I created, with their words, portraits of these women to be shared with others.

The study excluded widows whose husbands committed suicide or who were widows of police officers or victims of homicide. The literature suggested that these women may have special emotional problems which are beyond the scope of this research (Zisook & Shuchter, 1996).

### Significance of the Study

Focusing on relatively uncharted terrain, this research centered on widows who were married for at least five years, who are or have been in the work force (professionals and/or businesswomen), who were widowed before the age of 55, and who have been widowed for at least two years. Although surviving widowhood has been seen as an adaptational response (Lopata, 1987; Shuchter, 1986; Zisook,

Shuchter, & Mulvihill, 1990), little research has focused on widowhood as a transformational event (Digiulio, 1992; Ericsson, 1993; Adlersberg, & Thorne, 1990).

Resiliency has been defined in traditional, adaptational ways as a widow's ability to rebound from the death of her partner as if they were recovering from an illness. Resiliency in this usage is seen as a mechanism of survival.

A resilient widowed woman is able to work through her grief, cutting ties with the deceased, accepting life without him, modifying existing roles and building new ones and reconstructing the self into an independent whole human being. (Lopata, 1996, pp. 221-222)

Most scholarly research has focused on the process of mourning and the first year of bereavement. By listening to widows who are not currently in the throes of mourning, we can begin to learn of their challenges and successes. By viewing widowhood as a transformational event, new frontiers may be charted.

### Research Questions

The purpose of this study was to learn the ways in which widowhood is a transformational event. The major research question was: "How, if at all, has the life of a woman changed since the death of her husband?" Global questions were addressed in one open-ended interview. The interview questions evolved out of reviewing questionnaires developed by Zisook and Shuchter (1986, 1990), Lopata (1979), and the writings of Di Giulio (1989) and Adlersberg and Thorne (1990). These interview questions are summarized as follows:



1. In what ways has being a widow transformed you?
2. In what ways has being a widow transformed your relationships?
3. In what ways has being a widow transformed your career?
4. In what ways has being a widow transformed your life economically?
5. Imagine you are being asked to contribute to the first book written about women who were widowed under the age of 55. What would you like your readers to know?

In keeping with Lopata's (1979, 1986, 1996) life work, demographic data (age, means of death of spouse, duration of widowhood, number of children, religious preference, ethnicity, occupation, and education) were obtained.

#### Definition of Terms

Bereavement. "The objective situation of having lost someone" (Stroebe, Stroebe, & Hansson, 1993, p. 5); "to deprive or make desolate, especially by death" (Flexna & Hauer, 1987, p. 196).

Grief. "Keen mental suffering or distress over affliction or loss, sharp sorrow or painful regret" (Flexna & Hauer, 1987, p. 140); "an emotional state following death" (Stroebe, Stroebe, & Hansson, 1993, p. 5). Ericsson (1993, p. 7) brings grief to life:

Grief is a tidal wave that overtakes you, smashes down upon you with unimaginable force, sweeps you up into its darkness, where you tumble and crash against unidentifiable surfaces, only to be thrown out on an unknown beach, bruised, reshaped.

Grief means not being able to read more than two sentences at a time. It is walking into rooms with intention that suddenly vanishes.

Grief is three o'clock in the morning sweats that won't stop. It is dreadful Sundays, and Mondays that are no better. It makes you look for a face in a crowd knowing full well the face we want cannot be found in that crowd. . . .

Grief makes what others think of you most. It shears away the masks of normal life and forces brutal honesty out of your mouth before propriety can stop you. It shoves away friends, scares away so-called friends, and rewrites your address book for you.

Grief makes you laugh at people who cry over spilled milk, right to their faces. It tells the world that you are untouchable at the very moment when touch is the only contact that might reach you. It makes lepers out of upstanding citizens.

Grief discriminates against no one. It kills. Maims. And cripples. It is the ashes from which the phoenix rises, and the mettle of rebirth. It returns life to the living dead. It teaches that there is nothing absolutely true or untrue. It assures the living that we know nothing for certain. It humbles. It shrouds. It blackens. It enlightens.

Grief will make a new person out of you, if it doesn't kill you in the making.

**Mourning.** The act of a person who mourns. The conventional manifestation of sorrow for a person's death, especially by wearing black clothes; the formal period or interval during which a person grieves or formally expresses grief (Flexna & Hauer, 1987, p. 257). Stroebe and Stroebe (1993) were more succinct: "Mourning denotes the actions and manner of expressing grief which often reflects the mourning practices and beyond" (p. 5).

**Portraiture.** A qualitative research methodology which combines the "traditions and values of the phenomenological paradigm" with the goals of ethnography, coupled with the art and science of human experience (Lawrence-Lightfoot & Davis, 1997, p. 13). As a methodology the researcher enters the world of her subjects as a co-collaborator and together they create portraits which give voice to a people's experience, thus fostering a "people's scholarship" (Featherstone, 1989). Like other types of oral histories, self-stories, or personal narratives (Denzin, 1989b; Strauss, 1993; Lieblich & Josselyn, 1994; Tesch, 1984; Weiss, 1994), portraiture as espoused by Lawrence-Lightfoot and Davis (1997) is hermeneutic in that the research which emerges is done so out of joint constructions (Guba & Lincoln, 1989; Lawrence-Lightfoot, 1994; Secrist, 1996).

**Transformation.** Change in form, appearance or character, metamorphosis (Flexna & Hauer, 1987). In bereavement literature, Di Giulio (1989) defined transformation as a stage in which the widow's past marriage is integrated into the flow of life events. For this study, the death of a spouse was seen as a transforming

event in the life of a married woman. The nature of this transformation varied from respondent to respondent.

Uncomplicated bereavement. Normal reaction to the death of a loved one. The person with "uncomplicated bereavement" generally regards the feelings of depressed mood as "normal," although he or she may seek professional help for relief of such associated symptoms as insomnia or anorexia (American Psychiatric Association, 1995, p. 361).

Voice. A metaphor that has been used by women scholars that "applies to varied aspects of female experience, development and point of view" (Secrist, 1996, p. 11). In qualitative inquiry it has been used in a myriad of ways in both research and literature. These have been summarized as epistemological (Britzman, 1991; Belenky, Clinchy, Goldberger, & Tarule, 1986; Gilligan, 1992), socio-political (Freedman, Jackson, & Boles, 1983), and as methodological (Carter, 1993; Freedman, 1996; Lawrence-Lightfoot & Davis, 1997). Voice in portraiture as a research methodology encompasses these viewpoints and adds six additional ways in which voice is used in qualitative research to develop text and emergent themes. Voice is expanded to include: voice as witness, voice as interpretation, voice as preoccupation, voice as autobiography, listening for voice, and voice as dialogue (Lawrence-Lightfoot & Davis, 1997).

Widow. The word "widow" is commonly used to describe a woman whose husband is deceased (Flexna & Hauer, 1987). In this study, the word "widow" will

also refer to a woman whose first husband is deceased and who is currently remarried, although she still considers herself both a widow and a remarried woman.

Widowhood. Commonly described as "the state of being widowed" (Flexna & Hauer 1987). Ironically, that definition implied that there is a social role of widows. Lopata (1996) argued against this concept. She maintained,

the role of a widow is a transitory one with a definite circle with duties and rights surrounding the funeral. . . . It is then dropped at some indefinite and varied time becoming a characteristic of the woman that enters more or less significantly into her social role such as friend, mother or neighbor. The fact that a woman is widowed may affect her friendships or her role as a mother, etc., but there is no translation into role of wife in role of widow. (p. 14)

Widows Under 55. There is no standard definition of widowhood as it relates to age. Stroebe and Stroebe (1993) defined young widows as anyone under 65. In contrast, Shuchter (personal communication, October 1997) indicated any widow 40 years and under, while Zisook (personal communication, October 1997) thought a good sample would be women who were widowed between 40-50 years of age. Ball (1977) developed two age groups: young, 18-46, middle-age, 47-59. For purposes of this study, widows under the age of 55 were considered younger widows, while widows over the age of 55 were considered older widows.

### Organization of the Study

This chapter discussed the statement of the problem, the importance of studying widows under the age of 55, the major research questions, and definitions of

terms. Chapter 2 is a review of pertinent literature and includes psychological, sociological perspectives of widows as well as characteristics of women who were widowed before the age of 55. Transformational tasks of widowhood are identified and explored.

Chapter 3 presents the purpose and importance of qualitative research in general and its specific application to this study. Portraiture and narrative as research methods are highlighted along with an analysis of the data. The protection of human subjects is articulated in accordance with the University of San Diego's Committee on the Protection of Human Subjects. A discussion of the researcher as a positioned subject is also presented.

In accordance with the research methodology, Chapter 4 presents a portrait of each participant. While synonyms have been used to assure confidentiality, each portrait is sketched using the participant's own words so her voice can be heard.

Chapter 5 includes an overall discussion of this study. In doing so, this chapter illuminates findings on which there was convergence, such as all participants experienced life style changes and, to some extent, maintained a continuing relationship with their deceased spouses. The relationship, however, varied with each respondent. Divergent findings are also examined. This chapter summarizes the research project and discusses the strengths and weaknesses of the study. Future research considerations also are articulated.

## CHAPTER 2

### REVIEW OF THE LITERATURE

#### Introduction

The purpose of this study was to explore the experiences and challenges of women who were widowed before the age of 55, who were widowed for at least two years, and who were professionals, businesswomen, or community activists.

Literature was reviewed within the context of transformation, which is defined as change in form, appearance, character, and metamorphosis (Flexner & Hauer, 1987). For this study, the death of a spouse was seen as a transforming event in the life of a married woman. The nature of the transformation varied with each respondent. The impetus for this study originated from my own experiences as a 44-year-old widow, from experiencing as a child the lives of both my mother and grandmother as young widows, and from talking with other young widows. In all instances, the death of their spouses altered the life course of these women who, for the most part, "were going about the business of everyday life in the safe state of routine, like driving a car on automatic pilot discovered that one ordinary moment was not like any other in its implications" (Shapiro, 1994, p. 46). Their voices demand to be heard.

This chapter specifically reviewed literature within the context of this transformation. Psychological and sociological perspectives, the characteristics of women who were widowed before the age of 55, widows and transformation, and common transformational tasks such as dating and remarriage have been examined.

### Psychological Perspectives

"Widows are unique in that they suffer not only object loss but role loss as well" (Ball, 1977, p. 39). Early psychological studies focused on stages of grief (Lindemann, 1944), depression (Blanchard, Blanchard, & Becker, 1976), and object loss (Bowlby, 1980; Parkes, 1970, 1988, 1990). Later studies saw grief as a multidimensional process (Shuchter, 1986; Shuchter & Zisook, 1990; Stroebe & Stroebe, 1993; Zisook & Shuchter, 1986, 1991a, 1991b, 1992). Stage theorists saw psychological development in a step-like fashion, whereby an individual must successfully climb one step before going to the next. In contrast, a multidimensional, holistic approach viewed an individual as undulating back and forth along many dimensions. Health was then defined within those parameters.

Bereavement in a multidimensional framework was seen as a natural part of life and not a pathological condition. Distinctions were made in the literature between the two (Jacobs & Kim, 1990; Parkes, 1990; Raphael, Franz, & Middleton, 1990). Raphael et al. (1990) wrote about pathological grief and attempted to draw behavioral distinctions between complicated and uncomplicated grief. Complicated grief was seen as a series of clinically unresolved depressive episodes with other symptomology, whereas uncomplicated grief acknowledged there may be depressive symptoms which are normal, given the grieving process. Jacobs and Kim (1990, p. 314) argued that depression is often overlooked in bereaved persons because of "societal reluctance to accept the possibility that psychiatric disorders complicate the grief process" and because psychoanalysis and emotional crisis theory have been eclipsed by biological



psychiatry, as illuminated by Shuchter and Zisook (1990), which speaks to the issues of uncomplicated bereavement.

Since Lindemann's (1944) report of bereavement, which emerged largely from his work with 101 friends or relatives of those who lost their lives in Boston's Coconut Grove fire, the interest of the scientific community in the study of bereavement has been sustained from his interviews. Lindemann identified six symptoms of normal grief: (a) somatic distress, (b) tendencies to avoid remembering the deceased, (c) guilt, (d) irritability and anger toward others, (e) loss of patterns of normal self, and (f) tendencies to take over the traits of the deceased. He stated that survivors of the death of a significant other must do "grief work" (p. 141), which involves a readjustment to the environment and a formation of new relationships. Successful resolutions of grief included a return of feelings of well being, a regained capacity to deal with everyday life, and a decline in the preoccupation with grief.

Freud (1953) first wrote about grief in his work on mourning and melancholia. Differentiating grief from depression, primarily on the basis of self-esteem, Freud found mourning to be time limited, not pathologic and not associated with a disturbance in self-regard (Zisook & Shuchter 1988, p. 365). According to Zisook and Shuchter, Freud's work, coupled with Clayton's (1972) landmark studies in depression and widowhood, laid the groundwork for the description of uncomplicated bereavement in the Diagnostic and Statistical Manual of Mental Disorders (DSM III-R) (American Psychiatric Association, 1995). Moreover, Bowlby's (1980) and Parkes' (1970) work was centered on the dynamics of attachment theory. Simply

stated, attachment theory might postulate that widows have been attached to their spouses on both unconscious and conscious levels. Following death, the widowed suffer object loss and they must separate themselves from the lost object which causes separation anxiety and regression behaviors. The bereaved must engage in a variety of adaptations to resolve this loss. The process of bereavement is characterized by numbness, yearning, protection, disorganization, and reorganization. Grief becomes a process not a state (Parkes, 1970). Hallucinations, sleep disturbances, and somatic complaints are commonplace.

These suppositions were confirmed in Parkes' longitudinal study of 22 London widows who were under the age of 55 and who were interviewed at least five times during the 13 months following the death of their spouse. In this study, grief was framed as a "complex and time consuming process in which a person gradually changes her view of the world" (p. 145). In the course of grief, it is expected attempts will be made not to believe the event, to attempt "to search for the lost person and to achieve in dream and fantasy the reunion which cannot be achieved" (p. 145). During this process the griever experiences bouts of aimlessness, depression, and separation anxiety. After the first year Parkes found the younger widow to be without definite plans, still depressed but able to function in her new role as the intensity of separation anxiety was diminishing; in other words, she is adapting. Later, Parkes (1988) amplified on this point and characterized bereavement as a psychological transition which is an adaptational response to change.

During the late 1980s, biopsychiatrists Shuchter and Zisook began publishing results of the San Diego Widowhood Project, and the construct of grief was viewed as multidimensional and uncomplicated. Within this construct, multidimensional means multifaceted and uncomplicated means within normal range. Digressing, it is interesting to note that their research in widowhood grew out of their interest not only in depression and widowhood but, more importantly, from a new widow who met Shuchter and asked if he would start a bereavement group.

Their first longitudinal study spanned the first two years of widowhood. Identifying through death certificates 350 men and women whose spouses had recently died, 50 widows and widowers were self-selected to complete a multidimensional questionnaire and in-depth interviews two months following the death of a spouse. Of that number, 259 widows/widowers completed the questionnaire at 2, 7, 13 and 25 months. Questionnaires contained specific items corresponding to the DSM-III R (American Psychiatric Association, 1995) criteria for depressive episodes as well as other widely used measures, such as the "Zung Self-Rating Depression Scale (SDS)" and the 53-item "Hopkins Symptom Checklist" (Zisook & Shuchter, 1993). Earlier panel studies by the researchers allowed them to interview and question a similar though smaller population at 2, 4, 7, 10, 13, 16, 22, 25, 37, and 49 months following the death of their spouse (Zisook & Shuchter, 1986). From their first study, Shuchter (1986) developed a theoretical framework which stressed the dimensions of grief as opposed to stages of grief. This represented a departure from previous orientations and a novel approach to widowhood.

Commencing from a phenomenological as well as humanitarian approach, Shuchter (1986) took the position that a clinician who works with the bereaved must understand the many dimensions of grief. Additionally, clinicians must know the desirable goals and outcomes of each of these dimensions and the methods of achieving these goals. He identified six dimensions of grief:

1. Emotional and mental responses to the loss of a spouse. In this dimension shock, numbness, and grief occur intermittently, and at times the affects appear suddenly or unexpectedly. Women often speak of being overcome by waves of grief. Special events such as birthdays, anniversaries, etc., may heighten these responses. Additionally, anger, frustration and guilt are characteristics of this dimension. There may be a heightened sense of fearfulness about real or imagined threats, intrusive thoughts of the deceased which create overwhelming distress. While over time these responses become less intense, it is possible to experience intense reactions for years. This dimension is reminiscent of descriptions by Parkes' (1970) study of young London widows, Saunders' (1979) study of Los Angeles widows, Lopata's (1979) emotional category, and Shapiro's (1994) description of the photographic imprinting which occurs following the death of a spouse.

2. Coping with emotional pain. Here the bereaved learn coping strategies to deal with their emotional pain by rationalization and/or intellectualization, i.e., "he's better off that way." Avoidance of stimuli that triggers the event is commonplace. Keeping busy may be another mechanism of avoidance. Maladaptive behaviors such

as excessive tobacco, alcohol, and other drug use or compulsive sex may occur (Shuchter, 1986; Zisook, Shuchter, & Mulvihill, 1990).

3. Continuing relationship with a dead spouse. Some widows visualize the deceased. They may see him shopping, running, and walking (Caine, 1974; Cuming, 1981; Nudel, 1986). Some visit the grave to talk to their spouse; others may write letters or take on characteristics of their spouse. Saunders (1979) found three types of presence felt by widows in their continuing relationship with their spouse: (a) friendly—here the spouse is seen as caring; (b) constraining—punitive, angry, judgmental presence; (c) consulting guide—widows have conversations with the deceased, review how to handle a situation, and act as if they have consulted with him. Some may create living legacies, as was the case of Gates (1990) whose garden serves as a living tribute. Others may dedicate buildings in honor of the deceased or endow scholarships. Symbolic representations such as clothing (Cuming, 1981; Ericsson) 1993), wedding rings (Caine, 1974; Cuming, 1981; Nudel, 1986) and beds (Caine, 1974; Cuming, 1981; Ericsson, 1993; Gates, 1990; Jensen, 1977) all become powerful sources of pain and conflict. Memories, which are sometimes painful and other times comfortable, remain the most tangible and available sources of continuing relationships.

4. Changes in functioning. This dimension is viewed from an ecological perspective. Health problems may be triggered and an increase in somatic complaints were reported (Balkwell, 1981; Hall, 1992; Parkes, 1970). Alcohol, tobacco, and other drug problems may occur. (Zisook, Shuchter, & Mulvihill, 1990). Work

performance may be impaired and disorganization are often noticed. Almost all authors in this field, albeit researchers or widows, write or report an intense loneliness which permeates the bereaved. This loneliness affects interactions with friends and family. Withdrawal, social inhibition, and isolation may occur. Some may have difficulties with routine tasks such as writing checks, driving a car, or caring for children.

5. Changes in relationships. This is a dimension in which significant relationship changes occur between the widowed and her children, parents, in-laws, and friends. There are changes in sexual relationships as well. Within all of these relationships there are opportunities for growth, conflict, and challenge.

6. Changes in identity. This may be the most profound change of all. "The bereaved are given the opportunity to think, feel, and behave in new foreign ways they might never have experienced" (Shuchter, 1986, p. 10). While initially they may experience increased regression and helplessness, over time negativity gives way to mastery and a positive world view. Realizing how fragile life is their world view is shattered, but after year two they may become more appreciative of daily living, more patient, and more giving. Additionally, they may develop new careers, enjoy themselves or find new outlets for creativity. These findings are similar to Di Giulio's (1989).

This multidimensional approach defines "optimal" or "desirable" tasks for each of these dimensions instead of seeing bereavement in a pathological fashion (Shuchter (1986, p. 12). The determination of a need for treatment then depends on how the

bereaved are able to achieve the task as defined in each dimension. In all instances, the demands on the helping professional—albeit psychiatrist, psychotherapist, social worker, nurse, etc.—are also multidimensional, requiring flexibility and the capacity to shift roles as the needs of the bereaved demand. The tasks which Shuchter developed were the "products of clinical interpretation and not validated through independent studies" (p. 12). The following six tasks emerged from the various dimensions of grief:

1. Learning to experience, express and integrate painful events.
2. Finding the most adaptive means of modulating painful affects.
3. Integrating the continuing relationship with the dead spouse.
4. Maintaining health and continued functioning.
5. Adapting successfully to altered relationships.
6. Developing an integrated healthy self-concept. (pp. 14-15)

In addition, Zisook and Shuchter (1991a) found that younger widows/widowers ( $57 \pm 9.95$  years) were more likely to meet the criteria for depression than older ones. However, having a past personal history of depression was significantly related to depression, but a family history of depression was not. This finding was significant because it suggests clinicians do not have to assume they will find depressive episodes in bereaved persons who have a family history of depression, rather, individual life experiences are more important in the etiology of depression.

Zisook and Shuchter (1986) are advocates for the widowed and they speak out on their behalf. They suggested grief is a normal life span event and that

widows/widowers deserve our thoughtful compassion and wise understanding. They teach human service/mental health professionals that grief may well look the same at both 2 and 7 months. Depression can manifest itself at any time. In particular, anger, guilt, depression and anxiety tend to diminish over time, but often remain present even four or more years after the death (p. 290). Expressions of anger, guilt, depression, and anxiety, however, do not constitute pathology. "Despite the presence of psychological distress in a significant minority, most bereaved individuals report good health, satisfactory work performance and good adaptation to widowhood" (Zisook & Shuchter, 1991b, p. 320). Thus, human service/mental health professionals must prepare themselves for a potentially long-term and intermittent relationship with the bereaved, compassionately validating their grief and fostering growth (Shuchter & Zisook, 1990).

### Sociological Perspectives

In her early work, Lopata (1979) studied widowed women in metropolitan Chicago who were 50 years of age or older. Her findings suggested that "widowhood generally disorganizes prior supports and social engagements of human beings and often necessitates the modification of old in the forming of new social relations and roles" (p. 3).

Lopata (1996) defined "social role" as a "set of functionally interdependent, negotiated relations between a social person and a social circle involving duties and obligations, rights and privileges" (p. 17). She concluded that "there was no role of widow in modern American society" (p. 17). While many other societies isolate



widows from other women and provide them with many specific functions, modern America and other Western societies provide only a transitory role surrounding a funeral and having an indefinite ending (Lopata, 1987b, 1987c). Widowhood then becomes a "pervasive identity or characteristic of a woman entering her social roles to varying degrees" (Lopata, 1996, p. 18). In many social roles this identity may not be an important component of her relations with friends and family. The "wider and more complex a woman's life space, the less likely is her identity as a widow to enter the social relationships of each role" (p. 19). For example, relationships with past associates must be changed, partly because others see the widow as a different person and change the way they relate to her. Relations with other members of all social circles the husband and wife were involved in must be changed "to reflect the man's withdrawal in death" (p. 104). Thus, the role of mother is changed by the absence of father. Modifications in friendships are necessitated as she is now single, partnerless in the "companion" social world to which she belonged. She can remain as she always was, "only in those roles in which the husband was not a member of the social circle or in which widowhood does not enter as a pervasive identity" (p. 104). That may explain why work and education become grounding for widows as they allow for new identity formation.

The temporary role of "widow" following the death of the husband goes through a variety of processes. First, the widow and her social circle accomplish the funeral rituals, "including the anchoring of the social person of the deceased in the memory of the participants, disposing the body, mourning, and initial grieving"

(Lopata, 1996, p. 221). These processes take a varied amount of time. One of the difficulties of the role of the American widow is the "deinstitutionalization of so many death rituals and its indefinite ending" (p. 221). The circle surrounding the widow may dissolve before she is ready or insist on treating her as a widow "long after she wishes to give up her role" (p. 221).

Lopata (1979, 1987c, 1996) further suggested there are four types of support a widow might need.

1. Economic support, which may be paid work, barter, gifts, inheritance, benefits from an individual or organized charity, from public programs such as Social Security, insurance systems, and pension plans.

2. Service support, which includes paid and nonpaid help such as housekeepers, child care, shopping, transportation, legal and financial assistance.

3. Social support, which includes inclusion in celebrations, family gatherings, holidays, outreach, and friends who are willing to listen.

4. Emotional support, which helps with loneliness, self-perception and self-definition.

More recently, Lopata (1996) is open to looking at aspects of identity and acknowledges the importance of listening to the voices of widows. She stated, "the picture of widowhood that now emerges is much more complicated and varied than I had first been able to grasp in my first study in 1960" (p. xiv). The feminist movement has allowed for a reexamination of women in general, and that has led to a

reconstruction of reality for widows as well. Today, Lopata suggests that what happens to a woman whose husband dies depends on the degree of her dependence on being married to that particular person and the degree of disorganization in her various roles and support systems. What a widow does with the rest of her life depends on numerous factors, including inheritance laws, defining and protecting her property, participation in paid labor force, geographic mobility, organizational affiliation, and the role available to her at her particular stage of life.

### Widows Under the Age of 55

Research on widows under the age of 55 is sparse. Death of a spouse is an "off time event" (Hagstead & Neugarten, 1976; Neugarten & Datan, 1973). Off time deaths are those which occur outside the normal course of events. Hence, a younger person's death is seen as an off time event. On time deaths are those that appear to be in sync with the natural flow of development. The death of an 80-year-old person is viewed much differently than those who die in their early fifties or younger. The transition from wife to widowhood thus becomes an "unexpected passage" that one is ill prepared to handle (Digiulio, 1992, p. 99). There are few young widows to turn to for role models and a paucity of services available to them.

Balkwell (1981) asserted that older widows are better adjusted than younger widows. This assumption was illuminated by her 1985 study which sought to answer if the timing of widowhood affected morale. Looking at cross-cultural interview data from the Social and Cultural Contexts of Aging Implications for Social Policy Databank, Balkwell discovered age is a minor variable when compared to the

availability of widowed peers with which to communicate (p. 577). Thus, for Anglos, Mexican Americans, and Blacks, postvention services would do well to include support groups. To Ericsson (1993), a young widow, the word "widow" conjured up the following poetic definition:

Widow--black widow--the spider who has sex with a male then kills him.

Widow's peak--an eerie growth of hair over the forehead--Dracula's coiffure.

Widow's walk--a lookout cupola on New England rooftops, meant to house the poor widow so she can bay at the moon for her sailor husband lost at sea.

Merry widow--who is glad her old dead-beat husband is gone, and his bank account isn't.

Golf widow--someone who is left alone for a sports activity. It reveals so much--it pries into your past and announces your private affairs . . . it signals to people you are different. It scares wives who live in shaky marriages . . . it conjures lip images of old women sitting alone in the dark, dressed in black. It erases your name from dinner party lists. It tells the world you are no longer part of a whole. It makes you scary. (pp. 104-105)

Health risks are commonplace among women of this age group during bereavement. An increase in the use of tobacco, alcohol, and other drugs such as sleeping pills and tranquilizers have been documented (Parkes, 1990; Brown, 1978;

Zisook, Shuchter & Mulvihill, 1990). Physical distress and an increase in somatic complaints are commonplace during the first year of bereavement for women who were widowed before the age of 55 (Bowlby, 1980; Caine, 1974, 1988; Nudel, 1986; Stoll, 1990).

Lopata (1979, 1987, 1996) wrote that young widows have problems associated with child care, finances, and isolation. On July 27, 1997, a young widow wondered on the Widows' Support Group II at AOL.COM:

How do you deal with suddenly losing about two-thirds of your income? Not only did I lose all of Ian's pay, but MY income has gone down due to the health insurance being taken out of my check. The pathetic, laughable life insurance is gone, and I still have the stupid van to pay on.

Writing from the vantage point of a clinician, Nudel (1986), who was the Director of Bereavement Services at Mt. Sinai Hospital in New York, found younger widows are different than their married peers. Their friends will go on and build houses, and they will celebrate birthdays, anniversaries, and other occasions. The younger widow has a different life experience. This sentiment is poignantly reiterated by a new widow reaching out for help on the internet August 7, 1997:

I have never done this before, but I thought I would give it a try. I NEED TO TALK WITH SOMEONE WHO HAS LOST HER HUSBAND! Help please. My husband turned 44 on March 1st of this year. On March 31st, 2 hours after our daughter's 14th birthday, he died of cardiomyopathy. . . . We did not know he was sick, nor did he. He was an athlete all his life (he was 6 ft. 10

in. and weighed 280 lbs). Cardiomyopathy is congenital and not one doctor all of his life ever found it. They said his heart started enlarging when he was a teen, and he should have never played basketball. He played high school and college ball. I am trying to go on but don't know how. We had just moved into our dream home, one that we designed ourselves, 3 weeks before he died. I have 5 acres of land to care for plus a 3,000 sq. ft. house. I don't know what to do. He is supposed to be here . . . to help me. . . . It's only been 4 months and I keep reliving the night he died every single night when I go to bed. Has anyone else had this experience? (8-7-97 Support Groups II Widows AOL.COM)

If, as Lopata (1979, 1987c, 1996) suggested, widowhood is a roleless phenomena, the world often becomes a cruel place for the young widow invalidating her past status as a wife. Again a widow on an Online support group noted:

I remember . . . when people with (the best) of intentions would make the most asinine remarks. . . . I remember having to get on welfare right away and the only category they could put me in was divorced or other. Seems like they hadn't met any widowed mothers who needed help. (7-31-97 Support Groups II Widows AOL.COM)

The younger widow may be childless or employed and not eligible for Social Security benefits. Others in their forties and fifties may see themselves as too old for the work force or lack appropriate training. More often than not their friends are

married, separated, divorced, or have never married. Few if any are widowed. In fact, she may be the only widowed person on the block.

Time may also be perceived in a different way in terms of specific life events. It is logical in our time-centered world that the younger widow wondered:

When will I get better? How long will it take? [The unexpected intensity of grief leaves the young widow unnerved (Nudel, 1986)]. Having lived in a world where microwave meals can be prepared in less than 60 seconds, time goes awry. Questions as to what do I do on Saturdays? Who do I make breakfast for? How will I care for the kids? Will I ever love again--WHEN? These are commonplace questions. (AOL, July 1, 1997, 9/8/97).

Feelings of isolation and loneliness are commonplace (Caine, 1974; Ericsson, 1993; Gates, 1990; Nudel, 1986; Walter, 1997). This aloneness is often intensified if family and friends distance themselves. Some people want to block out death. They do not want to believe a younger person can die.

Their presence as a survivor is a testimonial to other people's vulnerabilities. "If it can happen to a younger person, it can happen to me. If they don't think about it, they don't have to be reminded of their own spouse's mortality. Some of them render the bereaved invisible" (Nudel, 1986 p.1). One way to do this is not to call or invite the widow out. Another way is to blame the young widow for her own personal misfortune.

Shortly after my husband died of an unexpected heart attack a so-called friend stopped me in the grocery store and blamed her recent separation on my

husband's demise. She explained that after my husband's death her spouse had an awakening and needed to try new venues. In other words, he used the death of my husband to rationalize his current affair. Another unthinking soul thanked me for my husband's death as it forced her husband to have a medical check up and to increase his life insurance policy and to redo his will. Well meaning comments such as these left me feeling like a furious outcast who could inadvertently harm others.

Older widows, in contrast, may have lived long enough to know that life is finite. They probably have experienced the death of parents or friends. The widow who is 70 has a smaller network of social interaction. Older widows may have more memories than younger widows. They may be in better financial shape. They probably are retired and have different interests. Their children are grown and they may have grandchildren (Nudel, 1986). Digiulio (1992) indicated that when widowed mothers are compared with a matched sample of divorced mothers, widows had lower levels of "personal well being and the divorced had lower economic levels" (p. 98).

Divorced persons are different than the widowed. They are capable of having a continuing relationship with an ex-spouse. Widowed persons have a continuing relationship with a "presence" (Ericsson, 1993; Saunders, 1979; Shuchter, 1986). There are more children of divorced parents in schools than children of the widowed. Children of divorced parents often discuss the advantages and disadvantages of having two homes. Children of the widowed have no choice of whose house to live in. Moreover, not being able to have the deceased parent at a school event albeit athletic,



social, or scholarly, often leaves both the child and the widowed feeling isolated and out of place (Caine, 1974; Cuming, 1981; Jensen, 1977; Nudel, 1986).

Business magazines from time to time have featured successful widows (Lief, 1997; Munk, 1995). Newspapers have featured celebrity widows and occasionally run self-help stories (Fitzsimmons, 1995; Friedman, 1994; Jackson, 1997; McLaren, 1988; Nemy, 1992). Surprisingly, they often deal with such sensitive issues as caskets, funerals, personal belongings, and sex and are an educated resource for the newly bereaved (Marin & Chang, 1998).

### Widows and Transformation

Most researchers see widowhood as an adaptational response to the death of a spouse. In this section, the research of Adlersberg and Thorne (1990), Shuchter (1986), Zisook and Shuchter (1991b), and Di Giulio (1989) will be considered. I will posit a theoretical need to go beyond seeing transformation solely in terms of identity and suggest widowhood is a transformational event which catapults the widow and her surroundings into a new being.

Adlersberg's and Thorne's (1990) qualitative research of older widows discovered that the transition to widowhood forces widows to reconsider their own world view. "This process of reflection and reconsideration was a powerful experience in the transition from being a wife to creating a new identity" (p. 5). They found widowhood is not always an "unwelcome transition," even with widows who report happy marriages are of critical importance. This is contrary to the literature which assumes "all marriages are happy, all widows grieve for their husbands, and

that married life is preferable to being unmarried" (p. 4). Intervention strategies such as "bereavement, work, financial counseling, support network development, and household management skills acquisition," while helpful as postvention services, rarely takes this framework into account (p. 4). This transition allows women to look back to a time before they were married and to consider who they would be had they not married these particular men. Some women/widows now see their lives as being free from abuse or alcoholism. Others are finally exempt from the role of caretaker to an ill spouse. Still others see simple changes. "For example, one woman married a man who did not believe in dancing. She, however, fantasized about being a dancer" (p. 6). As she reconstructed her life, she added the freedom of dancing and confidence into her being. Rediscovering new desires and aspirations can be frustrating as well (p. 6). Many feel it is difficult to report "relief or satisfaction with the role of widowhood" (p. 7), as that goes against the cultural myth that all marriages are happy. The researchers found that widowhood "forced them out of their chrysalis. For some of the women it triggered a metamorphosis into a new activism and involvement" (p. 7).

In discussing widowhood with both Shuchter and Zisook (personal communication, October-November 1997), they agreed that framing widowhood as a transformational event may allow practitioners to view this transition in a more positive light. Thus, when the widowed are ready to move beyond the immediacy of grief, possibilities, and programming, focusing on their strengths may prove invaluable.

Notions of transformation are embedded in Shuchter's (1986) sixth dimension of grief, "identity changes" (p. 10). Some of the most profound changes that occur in the bereaved are those that reflect their personal identity. "For most people spousal bereavement is likely to be the most threatening and challenging experience of their lives" (p. 10). Under these circumstances the bereaved "are given the opportunity to think, feel and behave in ways that may be new and foreign ways that they otherwise might never have experienced" (p. 11). Moreover, the bereaved may also go through a significant and at times radical alteration of their world view, the set of beliefs from which they operate. Old beliefs give way to new ones which reflect "the finiteness and fragility of life and the limits of control" (p. 11). As a result the bereaved may become more appreciative of daily life. "They may develop new careers or change them, enjoy themselves with more gusto or find new outlets for creativity" (p. 11). Lopata (1996) echoed these sentiments when she wrote: "These changes can be dramatic, in self-concepts, sentiments and emotions; in relationships with everyone from the past; in entrance into new social roles and individual relationships; in life style and in life space" (p. 125).

Perhaps it takes the widowed themselves to argue that widowhood is a transformational experience. As I journey through the literature, I am affirmed to meet someone similar to myself. Di Giulio (1989) introduced himself as "both author-educator and widowed father" (p. xiv). His goal was to provide his readership a perspective which goes beyond widowhood. He believed an "emphasis on merely adjusting to widowhood may lead to a resignation of oneself to fate. . . . For the

essence of growth beyond widowhood is to move . . . beyond the need to be merely an adjusted widow" (pp. iv-v). Based on eight years of qualitative research he formulated four stages of widowhood characterized by growing through widowhood or growing beyond widowhood. Di Giulio does not indicate how many widows and widowers were interviewed nor does he tell you when they were interviewed. These four stages are summarized.

#### Growing Through Widowhood

Stage 1: Encounter. This stage is characterized by "fusion (oneness with deceased spouse)," numbness, shock, anger, depression, feelings of guilt, self-blame, sadness, denial, rage, physical symptoms, presence of deceased spouse, mystical-spiritual experiences, passive or aggressive behavior, searching for the deceased spouse (Di Giulio, 1989, pp. 61-72).

This stage is similar to the initial acute grief reactions which Shuchter (1986) described in his first dimension of grief, "emotional and mental responses to grief." These acute reactions have been described previously by Lindemann (1944), Parkes (1970, 1988, 1990), and Shapiro (1994). Unlike Di Giulio, however, Shuchter (1986), Zisook and Shuchter (1992, 1993), and Shapiro (1994) see grief as a fluid, multidimensional process and not as stages through which someone passes.

Stage 2: Respondence. This stage continues the grieving process, emphasizing a continuing relationship with the deceased spouse in terms of sanctification, continued numbness, and other grief reactions (Di Giulio, 1989, pp. 72-82). Here,

however, a "beginning of separation of marital identity from self-identity" takes place (Shuchter, 1986, p. 106).

### Growing Beyond Widowhood

Stage 3: Emergence. This stage is characterized by an end of searching and a decision to remarry. There is an acknowledgment that their spouse is dead. Anguish is more limited, moments of doubt are less, there are thoughts of the future and a completion of unmarriage (Di Giulio, 1989).

Shuchter (1986), on the other hand, has posited that the bereaved may over time find themselves able to tolerate their grief, carry on their tasks, and learn new ways of dealing with the world. "The bereaved develop a growing sense of strength, autonomy and independence, assertiveness and maturity" (p. 10). Shuchter also discovered that even when widows successfully remarry, "the experiences of grief do not end" (p. 10). This finding contradicts Di Giulio's (1989) notion of emergence.

Lopata (1996) stated that a woman experiences several changes as she leaves the role of wife and temporarily enters the role of widow. In that role she may "see herself and be treated by others as the suffering heroine, the center of attention" (p. 121). Once the role of widow is over and the circle drawn to it recedes, she is left in a "limbo situation" as far as her marital status is concerned. "She cannot remain in the identity of wife or reenter into the identity of a single woman. She must "reconstruct her identity" (p. 121) rather than unmarry the deceased, as Di Giulio (1989) suggested. The differences in perception between Lopata and Di Giulio may

well be reflective of gender differences (i.e., a male's view of widowhood versus a female's view).

Stage 4: Transformation. This stage is characterized by "metamorphosis and rebirth" (Di Giulio, 1986, p. 106). There is a cessation of seeing oneself as a widow, a closure of mourning, and a concern with the present and future. The woman's "past marriage is integrated into the flow of life experiences, and she accepts her role as a single adult (p. 106).

Adlersberg and Thorne (1990) concur that widows undergo a transformation, a rebirth; however, they suggested that transformation is interwoven with new freedoms and new ways of being. Rather than acceptance and adjustment being the dominant modality, freedom to be becomes the mantra of transformation.

Shuchter is not a stage theorist. He has developed a fluid, flexible, multidimensional framework. While he agreed a new identity is forged, he acknowledged the possibility that grief reactions can still occur even in remarriage. Further grief reactions in and of themselves are not signs of pathology.

The idea that widowhood is transformational is a powerful concept. While Di Giulio, Shuchter, Lopata, and Adlersberg and Thorne highlighted different aspects of transformation and their semantics vary, what they all have in common is that they maintain widows have been able to put their past "into perspectives neither hindering or hampering them as they created new identities" (Shuchter, 1986, p. 97). For Di Giulio (1989), a positioned researcher, widowhood is "an expedition that can be

helpful, inspired by the momentous challenge to move . . . toward the realization that today my life is good" (p. xviii).

### Sex, Dating and Remarriage: Common Transformational Tasks

Widows have often been described in mythical ways, either as an asexual being or as a woman ready to pounce on her neighbor's husband (Caine, 1974; Gates, 1990; Lopata, 1996; Nudel, 1986; Saunders, 1979). First person accounts and qualitative research vividly attend to the trials and tribulations of dating as opposed to the more antiseptic nature of the sociologist's research (Caine, 1974; Cuming, 1981; Digiulio, 1992; Ericsson, 1993; Nudel, 1986; Saunders, 1979; Schneider, Shuchter, Sledge & Zisook, 1996; Shuchter, 1986). However, "relatively few studies have looked at patterns of developing new romances or remarrying" (Schneider et al., 1996, p. 51). Using panel information from the San Diego Widowhood Project (Schneider et al., 1996), researchers discovered that by 25 months following the death of their spouse, 61% of all males and 19% of all females were remarried or involved in a new romance. Cherlin (1992), Scadron (1988), Di Giulio (1989), and Lopata (1996) suggested that dating and remarriage are influenced by the ratio of males to females in a given population. Using a national representative sample of widows and widowers from the Panel of Income Dynamics (cited in Lopata, 1996), the data concluded that younger people and men remarry sooner than women. Men tend to remarry within the first two years, while women remarry within the first four years following the death of a spouse. Also, men tend to remarry at the same rate as men who are divorced, i.e., 71% of all widowed men remarry while fewer than half of

widowed women (49%) remarry, and that percentage decreases with age. Fewer than 5% of widows over the age of 55 remarry (Di Giulio, 1989, p. 130).

Remarriage is often seen as too complicated an issue. Munk (1995), writing in Forbes magazine, featured successful widows who had transformed their deceased spouses' dwindling finances into multimillion or million dollar concerns. These women scoffed at the notion of remarriage by jocularly pointing out they needed a wife to manage their day-to-day personal affairs. Viewed in a slightly different manner, remarriage often is a complicated affair in terms of estate planning and inheritance laws. Estate attorneys today indicate that remarriage can create inheritance problems for the children of each of the partners who can make life miserable for the new couple if they fear loss of what they rightfully believe is theirs. Formal prenuptial agreements are often suggested as each partner comes in with different assets and liabilities such as debts that need to be specified. Remarriage can affect tax filing, Social Security, and other pension rights and home ownership. Educational and other financial needs of children have to be taken into account as well as any spousal support which may affect the remarriage (Gates, personal communication, October 15, 1997; personal communication, Timothy Burke, Esq., October 4, 1997). Other widows, while enjoying male companionship, prefer their independence and privacy and did not want the responsibilities of marriage (Lopata, 1996). "Younger widows frequently mention the importance of having a father, even if it is a stepfather for the children" (p. 177). This finding is contrasted with Di Giulio (1989) who found



younger widows were reluctant to endorse remarriage as they were afraid of the effects of that relationship on their children.

Others have looked at remarriage as an opportunity for "widowed persons to achieve a fulfilling relationship for the first time" (Di Giulio, 1989, p. 106). Here the widow's previous marriage is seen as a deleterious life event characterized by some sort of abuse and subservient stature. Remarriage offers the widow the opportunity to experience for the first time a caring and expressive relationship. Theoreticians argued they must have a well integrated personality and moved to the formation of a new identity (Di Giulio, 1989; Schneider et. al, 1996, Shuchter, 1986; personal communication Zisook, October 16, 1997).

Dating may be further complicated by the complexities of their children's grief. Garrison (1998), in her poem, "The Widow's Sex Life," described these difficulties as she recounted how she and her sister dealt with their father's death and their mother's dating:

Two summers after he died, it began. She had coffee with a man from the other side of the tracks. . . . We hated his hick talk. My sister was still young enough to cry, to slam the bedroom door and rage for the ironical ghost of our father. . . . Poor mother, we didn't make it easy for her. She couldn't spend a night away. (pp. 26-27).

Unlike Garrison, I welcomed my mother's dating and subsequent remarriage. I wanted a father to hug me and protect me. As the 8-year-old child of a young widow,

I carried an idealized dream of what my father should be and hoped my mother's remarriage would fulfill my wish.

While remarriage is seen as a positive adaptational response to widowhood, some widowed persons are reluctant to remarry (Schneider et al., 1996). They often seek to avoid caring for a mate as they did previously. Others prefer companionship without the legal, financial, social, emotional, and environmental entanglements that come with the commitment of marriage. That, too, may represent the workings of a well integrated identity.

Dating is an option for the widowed. For the newly bereaved it is sometimes a confusing event. Widows often reported that they felt unfaithful or guilty as if engaging in dating was a betrayal of their dead spouse. This, of course, is erroneous thinking which support groups and mental health professionals work to dispel (Caine, 1988; Nudel, 1986; Shuchter, 1986; Silverman, 1986). In addition, dating was seen as synonymous with sexual activity. "If you are dating, you are facing the question of sex" (Caine, 1988, p. 163). Another woman stated, "Sex? In my head I'm still a 14-year-old who is a virgin" (Nudel, 1986, p. 143). Still, another widow stated, "There's no such thing as a date anymore. It's all a long, one-night stand. The thought of starting from square one was terrifying to me" (Caine, 1988, p. 162).

In sum sex, dating, and remarriage are seen as healthy life style activities. "Widows and widowers do not have to feel disloyal about romantic thoughts and feelings, and therapists working with the bereaved can interpret this as a healthy phase of widowhood" (Schneider et al., 1996, p. 57).

### Summary

This chapter reviewed literature on widowhood within the context of transformation. Major psychological and sociological perspectives were explored. The characteristics of women who were widowed before the age of 55 were identified. The concept of transformation was defined from several theoretical perspectives which included the sociological perspectives of Lopata (1996), psychological perspectives of Shuchter and Zisook (1990), Shapiro (1994), and Di Giulio (1989), and the nursing orientation of Adlersberg and Thorne (1990). Lastly, common transformational tasks such as dating and remarriage were explored in relationship to women who were widowed before the age of 55.

Chapter 3 describes the purpose of qualitative research in general and how it relates specifically to women who were widowed before the age of 55. Research methods used will be outlined along with data analysis and the researcher as a positioned subject are elaborated upon. The protection of participants in accordance with the rules and regulations set forth by the University of San Diego's Committee on the Protection of Human Subjects is articulated.

## CHAPTER 3

### RESEARCH DESIGN AND METHODOLOGY

#### Introduction

The purpose of this qualitative research study was to gain a better understanding of women who were widowed before the age of 55 and to learn how, if at all, their lives were altered by the death of their spouse. Portraiture was selected as the primary research methodology for two reasons. First, portraiture speaks to the commonality and uniqueness of the single case. In this research, each individual interviewed may be viewed as ordinary in the sense she is a woman who was widowed before age 55 and as extraordinary in the sense her particular narrative is unique. Second, portraiture allows the reader to discover the universality of each individual through identification with common refrains which are embedded within the individual portrait and with which the reader identifies. Thus, it is possible, in fact highly probable, for a reader to be moved by one refrain while another reader will be moved by a different one within the same portrait. The discovery of these resonant, universal themes enhance identification with the subject matter (Lawrence-Lightfoot, 1983, 1994; Lawrence-Lightfoot & Davis, 1997).

This chapter discussed the purpose of qualitative research, outlined methodological strategies of narrative and portraiture, the processes for data collection, and data analysis. The University of San Diego Protection of Human

Subjects policy/procedure is explained. Also discussed is the importance of the researcher as a positioned subject (Rosaldo, 1989) and co-collaborator in this exploration of widowhood (Lawrence-Lightfoot, 1994; Lawrence-Lightfoot & Davis, 1997; Lieblich & Josselyn, 1994).

Qualitative research methods have been used in studies of bereavement and widowhood (Di Giulio, 1989; Parkes, 1970; Porter, 1994; Saunders, 1979; Shuchter, 1986, Weiss, 1994). I chose qualitative research methods because there is a paucity of research in the area of women who were widowed before the age of 55 and little which describes their lives in detail. By using qualitative methods, I hoped to add to the general subject matter on widowhood and to women widowed before the age of 55 in particular.

### Qualitative Research

The purpose of qualitative research is to describe and develop in general a special understanding of a particular social situation. The assumptions which underlie qualitative research are that reality is holistic, multidimensional, and ever changing. As such, the phenomenon under investigation is characterized by "thick description" which was defined by the anthropologist Geertz (1973) as "the researcher's constructions of other people's constructions of what they are up to" (p. 9). Thick description has two basic characteristics. First, it "attempts to rescue the meanings, actions and feelings that are present in an interaction" (Denzin, 1989b, p. 159). Second, thick description is interpretive as it captures the meanings that people bring to their experience. "Thick descriptions create the conditions for thick interpretations"

(p. 159). Thick interpretations, according to Geertz (1973), are an attempt to uncover the "conceptual structures that inform our subjects' acts" (p. 27). The research which follows is thus naturalistic in the sense the researcher, like the anthropologist, enters the world of the participant and obtains information without attempting to alter her participant's situation (Locke, Spirduso, & Silverman, 1987). The data are used to give readers a chance to feel they are present in the same sense the researcher has been there (Strauss, 1993). In doing so, the participants' descriptions form the basis for analysis. Understanding the content and construction of such multiple and contingent truths becomes the task of the researcher. Thus, the attention in qualitative research focuses on the perceptions and experiences of the participants with the primary assumption that people make sense out of their own experiences and create their own reality (Locke et al., 1987; Guba & Lincoln, 1989).

The process is collaborative in that the research which emerges does so out of the evolving relationship between the researcher and the participant who functions as co-creator (Guba & Lincoln, 1989; Lawrence-Lightfoot, 1994; Secrist, 1996).

The message and the meaning of these stories comes from the interaction, our duet, the convergence of our experience. I am both audience and mirror, witness and provacteur, inquirer and scribe. Sometimes I am also the storyteller . . . to achieve the intimacy and trust that will inspire the confidences of my collaboration. I must be willing to share my own experience. (Lawrence-Lightfoot, 1994, p. 620)

### Methodology Portraiture

I chose portraiture as the primary qualitative method for this study because it was the best suited biographical research method available to capture the lives of the women I studied. Portraiture, like other narrative methods (case study, self-study, personal experience story, personal history, etc.), is based on the assumption that "everyone is an oral historian of his or her own life . . . and their stories are personal narratives" (Denzin, 1989a, p. 186).

In general, narratives have to do with how people interpret things (Denzin, 1989a; Lieblich & Josselyn, 1994; Tesch, 1984; Weiss, 1994). The narrative approach has given prominence to "human agency and imagination" (Riessman, 1993, p. 5), making it well suited to echo the voices of women who became widowed before the age of 55. It has been suggested that narratives allow for "precisely this intersection . . . of an individual's life course and specific historical moment that provides insight into the ways that particular lives take shape the way they do" (Narratives Group, 1989, p. 21). Storytelling and narrative had important methodological considerations for this research because

lives, like stories, are the way we fashion ourselves, encountering and temporarily surmounting the projected demons that would diminish us. This is what a narrative perspective allows us to notice, not only the way we talk, but the way we live. (Lieblich & Josselyn, 1994, p. 143)

Narratives further "evoke the quality of vividness in detailing unique and particular aspects of a life that could be yours or my life" (Lieblich & Josselyn, 1994,

p. 91). In that way the realities of the researcher and the subject merge. Lawrence-Lightfoot and Davis (1997) underscore this point when they discuss Geertz's contribution to this type of research. Geertz (1973) stated: "The researcher's imagination is a fundamental aspect of cultural depiction. The researcher uses the power of scientific imagination to bring us in touch with the lives of strangers" (p. 16). In doing so the researcher admits the "centrality of interpretation, imagination and creativity" as part of the research process (Lawrence-Lightfoot & Davis, 1997, p. 8). These "humanistic dimensions" are balanced by the "rigorous and systematic attention to the details of social reality and human experience" (p. 8).

Portraiture expands on these dimensions. While portraiture is "framed by the traditions and values of the phenomenological paradigm" and shares many of the techniques and goals of ethnography, "it pushes these in an attempt to combine the empirical and aesthetic" (Lawrence-Lightfoot & Davis, 1997, p. 13). Portraitists see context as a resource for understanding physical settings, cultural rituals, norms, values, and historical periods. All serve an important function in attempting to understand the participants' experiences. The context serves as a backdrop for the narrative which emerges. "The portraitist standard, then, is one of authenticity, capturing the essence and resonance of the actor's experience and perspective through the details of action and thought revealed in context" (p. 12). Thus, as the researcher, I followed a careful, deliberative process in creating the individual portraits of each woman which "required a difficult, sometimes paradoxical vigilance to empirical description and aesthetic expression" (p. 12).



As the portraitist I took an active stance in which I searched out the story in each of the women interviewed. This is a major concept in portraiture and is one of the key contrasts between ethnography and portraiture. "Ethnographers assume a more passive, receptive stance and listen to a story, while portraitists listen for a story" (pp. 12-13).

Moreover, I was interested in a research scholarship that focused on health and resilience rather than pathology and disease. As a methodology, "portraiture resists this tradition-laden effort to document failure. It is an intentionally generous and eclectic process that begins by searching for what is good and healthy and assumes that the expression of goodness will also be laced with imperfections" (Lawrence-Lightfoot & Davis, 1997, p. 9). Thus, I began by asking each woman I interviewed how, if at all, her life had changed since the death of her husband. I did not begin by asking how their life had failed since the death of their husband. This does not mean to suggest that I was not interested in the woman's strengths and vulnerabilities, trials and tribulations, rather I started from the premise of goodness. In examining the "dimensionality and complexity of goodness there will, of course, be ample evidence of vulnerability and weakness" (p. 12).

Furthermore, as the portraitist I was ever mindful of its explicit recognition of the use of self as the primary research instrument. "With portraiture, the person of the researcher . . . even when vigorously controlled—is more evident and more visible than in any other research form" (Lawrence-Lightfoot, 1997, p. 13). I was mindful of my responsibilities as the researcher in navigating my relationships with each woman

I interviewed, "in witnessing and interpreting the action, in tracing the emergent themes" and in creating the individual portraits of each woman (p. 13). I was aware portraiture is considered a "people's scholarship, a scholarship in which scientific facts gathered in the field give voice to a people's experience" (p. 10). In that way, as the researcher I had an obligation to carefully and vigilantly sketch each woman's story in her own voice and present it in such a manner that the text allows readers to think more deeply about the issues which these women faced. I was further reassured that my training as a professional social worker supported my research intentions.

In Geertz's (1973) terminology, "portraits are designed to deepen the conversation" (p. 14). Thus, as the researcher I joined other portraitists in having the "goal of speaking to broader audiences beyond the academy (thereby linking inquiry to public discourse and social transformation" (p. 14). Finally, I was interested in recording the subtle details of the women I interviewed. I attempted to capture a detailed description of each woman's life, documenting and illuminating the complexity of her unique experiences. This was done so the reader had the opportunity to gain an appreciation of each participant's life. Reflecting on these women the reader may also see parts of her own life or the lives of those they know. This process was done in contrast to classical social science methods "where the investigator uses codified methods for generalizing from specific findings to a universe and where there is little interest in findings that reflect only the characteristics of the sample" (p. 14). In sum, I was interested in recording the lives of women who were widowed before the age of 55 as a way of adding to the research

literature and as a way of informing others. Portraiture was selected as the research methodology as the portraitist "is very interested in the single case because she believes that embedded in the single case the reader will discover resonant universal themes. The more specific, the more subtle the description, the more likely it is to evoke identification" (p. 14).

### Research Design

This is a qualitative exploratory research study using face-to-face interviews and portraiture as the primary research methodology. The purpose of this research study was to explore the experiences and challenges of women who were widowed before the age of 55, who had been married for a minimum of 5 years, who had been widowed for at least 2 years, who were professionals, businesswomen, and/or community activists, and who represented different ethnic backgrounds. Since there was no existing sample frame, i.e., there are no formal lists, widow directories, or support groups which were readily accessible and met the criteria for inclusion, I used a purposive sample. Purposive sampling allowed me to obtain a mix of women I would not have been able to obtain with other methods, given the nature of the research questions and the population I chose to study. Names of potential participants came from personal and professional contacts, another researcher who was widowed before age 55, other educators, a financial planner, an accountant, and an author. Of the 23 women contacted, I interviewed 17 women; however, only 13 women were considered suitable for this research project. Of the 4 women who did not meet the

criteria for this project, 2 had been married for less than 5 years and 2 were widowed for less than 2 years.

This study design centered on the subjective interview process. The interview protocol was first piloted by having University of California, San Diego, Dr. Steven Shuchter, researcher/psychiatrist, interview me as I met the criteria for inclusion in this study. Results of the pilot interview led me to design an interview protocol which allowed for one 90 to 120 minute audiotaped interview. In each interview, I probed for the meaning every woman had found within her everyday experiences of being widowed before the age of 55. In keeping with the nature of portraiture and narrative, these interviews followed a conversational format with open-ended questions (Denzin, 1989b; Lawrence-Lightfoot, 1994; Lawrence-Lightfoot, 1994; Lawrence-Lightfoot & Davis, 1997; Reinhartz, 1992; Secrist, 1996; Weiss, 1994). The average length of each woman's transcript was 48 double-spaced pages. All interviews were held between March, 1998 and July, 1998.

Prior to the first interview, contact with each woman was made by telephone to introduce the study, to determine if participants met the criteria for interview, and to set up a convenient time for the interview. Follow-up confirmation was conducted both by telephone and by letter. A copy of the major interview questions (see Appendix A) and a consent form as approved by the University of San Diego's Committee on the Protection of Human Subjects (see Appendix B) were sent to the subjects prior to the interview. Before beginning any interview, the purpose and nature of the research was reiterated and the written consent form was signed.

Following each interview, transcripts were sent to each participant. Included in each envelope was a letter thanking each subject for her participation (Appendix C). A stamped self-addressed envelope was enclosed so the transcript could be returned with any corrections they wished to make.

Interviews were conducted at mutually agreeable locations selected by the participants and were held in quiet, private places. Three interviews took place after hours at the participant's place of business, one interview was held at my office at San Diego State University, nine were held at the participant's home.

Each interview was audiotaped and transcribed verbatim. I also took notes at the beginning of each interview which recorded basic demographic information regarding each participant (age, circumstances of spouse's death, duration of widowhood, number of children, number of grandchildren, religious preference, ethnicity, occupation and education). In several cases, participants gave me additional materials (short stories, journals, photos, obituaries, memorial service, drawings, published articles). These additional materials will not be used due to confidentiality concerns.

In addition, I kept a reflective journal which consisted of field notes made after each interview. This journal noted my biases, observations, descriptions of the participants and myself, our surroundings, impressions of individual body language and affect, and my responses to each interview. The purpose of this journal was to pay rigorous and systematic attention to the details of each interview and to my voice as the portraitist (voice as witness, interpretation and analysis) in the analysis and

interpretation of data (Lawrence-Lightfoot and Davis, 1997; Tutty, Rothbery & Grinnell, 1996).

### Selection of Participants

Given the nature of the research questions and the population I planned to study, a purposive sample was used. Purposive sampling allowed me to obtain a mix of women who represented different ethnic backgrounds who met the criteria for inclusion in this study. As mentioned previously, names of participants came from personal and professional contacts, another positioned researcher, other educator, social workers, financial consultants, and an author. Initially I sought to find women of different ethnic backgrounds who met the criteria for inclusion. I purposely asked professional researchers/educators/social workers who were Black American, Asian, and Hispanic to aid me in this process. They did so by introducing me to prospective participants. In like manner, non-Hispanic white participants came from other personal and professional contacts, including an accountant, a financial planner, and an author.

In order to determine a participant's eligibility for inclusion to this research, the following format was used:

1. I telephoned each woman and explained the nature of this research study. After she agreed to participate, a mutually convenient time and place for our interview was made.
2. A follow-up telephone call was made to confirm the interview. If there was sufficient time, I then mailed the five primary research questions to each participant to

think about prior to the interview. In all I contacted 23 women; however, of that number, 6 declined to be interviewed. Seventeen women were interviewed; however, only 13 were included in this study since 4 women did not meet the criteria for inclusion.

3. Of the 4 women who did not meet the criteria for this project, 2 had been married for less than 5 years and 2 were widowed for less than 2 years.

### Protection of Participants

Beyond the demands of the participants' time, there was virtually no potential risks to participants. At most, participants may have felt some discomfort discussing the death of their husbands. However, given the time span between the deaths of their husband and the interview, it was assumed participants were well past the initial grief stage of bereavement. This assumption was consistent with Weiss' (1994) studies of bereavement which found the interview can be helpful. "An interviewer . . . who is understanding, indeed professional, concerned yet dispassionate and able to listen . . . is exactly the right person to talk to" (p. 143). In personal communications, Zisook and Shuchter (1997-1998) reiterated this position.

I adhered strictly to the Human Subjects Guidelines of the University of San Diego. The population (women who have been widowed for more than two years), the facilities where interviews were conducted (quiet, undisturbed location chosen by each participant), and a list of questions suggested the potential risks to be minimal.

Participation in this research study was voluntary. Participants signed an approved consent form which discussed the nature of the study, the time involved,

and the nature of the questions. Participants kept their identities confidential by using a pseudonym and were assured they could withdraw from the study at any time without risk or penalty. There were no expenses for them to incur. My name and telephone number, along with the name and telephone number of my dissertation director, Dr. Johanna Hunsaker, were included.

Interviews were transcribed by a typist who was committed as I was to confidentiality. Transcripts were sent to participants with self-addressed stamped envelopes so they could return the transcript with any corrections. All transcripts were coded to protect confidentiality. Transcription tapes, field notes, and any other relevant materials (photos, journals, stories, etc.) have been stored in a locked cabinet in my home.

### Data Analysis

Qualitative design is emergent and the process of data collection and analysis is recursive and dynamic (Van Manen, 1990). With that as a guidepost, I read each transcript four times to find an individual portrait (sketch) of each participant and an understanding of common themes. In doing so, I was ever mindful of the orientation of voice in portraiture--"of epistemology, ideology, and method . . . , as well as, reflecting the portraitist's explicit interest in authorship, aesthetics and narratives" (Lawrence-Lightfoot & Davis, 1997). Thus, I explored the use of voice in the same six ways suggested by Lawrence-Lightfoot and Davis (1997). First, I was cognizant that as a researcher/portraitist I was a "boundary setter--scanning the action, systematically gathering the details of behavior expression and talk" (p. 87). This is



similar to the clinician who sits back, listens, and searches for every detail from a detached yet compassionate perspective.

Second, listening to voice as interpretation allowed me to attempt to make sense of the data. In listening to the participants and rereading their transcripts I asked: What is the meaning of this action, gesture, or communication? What is the meaning of this to me? (Lawrence-Lightfoot & Davis, 1997, p. 91). Thus, when I described Meg's eyes as steel blue, translucent as the sky and yet distant and melancholy, I am adding the portraiture use of interpretation to make meaning out of a "dense thicket of interpretations" (p. 91).

Third, I was cognizant of my "voice of preoccupation." This refers to the assumptions I brought into the interaction and to the reading of the transcripts based on my theoretical perspectives, my background in social work and leadership studies, and my understanding of the relevant literature on widowhood. In short this is the framework, "the currencies of discourse" (Lawrence-Lightfoot & Davis, 1997, p. 93) which I as the researcher brought to this analysis.

Fourth, voice as autobiography reminded me as the portraitist/researcher that I bring my own history--my own experiences as a third generation widow into the inquiry as well as my familial, cultural, ideological, and educational biases with me. In the interview and in the analysis I was careful not to let my "autobiography obscure or overwhelm the inquiry." This required a delicate balance of tension which allowed me to respond when appropriate to participants' questions while maintaining my focus on them.

Fifth, I attempted to listen "for voice, for a story" (Lawrence-Lightfoot & Davis, 1997, p. 99). In revisiting the transcripts to create individual sketches, I attempted to capture the essence of each woman's texture and the cadence of their words and gestures while I explored their ways of living.

Sixth, as the researcher, I placed myself in conversation, "in dialogue" with the participants (Lawrence-Lightfoot & Davis, 1997, p. 103). Here my role purposefully placed me in the middle of the field and the text. I listened for how we both expressed our views and defined our encounter so that in my analysis the reader will also be able to hear the methodology, questions, interpretations, and interventions which I made.

In the "creation of the final product" (i.e., the individual sketches/portraits of each of the participants), my relationship with them was altered (Lawrence-Lightfoot & Davis, 1997, p. 172). As I moved back and forth from data collection to analysis, I now see the women as future readers of this construction. In doing so, I have tried to leave "space for the alternate views of any reader" (p. 172). Most importantly, I have attempted to be "mindful and protective" of these courageous participants for it is they "who are most vulnerable to whatever distortion they may find in the image reflected in the portraitists mirror" (p. 172). However, I did pay attention to discrepant viewpoints, those which fall outside or diverge from emergent themes. This allowed me to gather rich data on unearthly or out of the ordinary phenomena such as visitations in the form of tigers, flickering lights, angels, and timepieces. This is consistent with Maxwell (1996) that "the most serious threat to the theoretical validity

of an account is not collecting or paying attention to discrepant data, or not considering alternative explanations on understandings of the phenomena you are studying" (p. 90).

Additionally, in the construction of the portraits, I listened for repetitive refrains which were spoken frequently and persistently. These form a collective expression of commonly held views of the women interviewed. Secondly, I searched for metaphors and poetic and symbolic expressions that revealed themselves. Diamonds, orchids, butterflies, angels, and automobiles appeared as ways in which experiences were illuminated. Third, I listened for cultural or institutional rituals that may have been used in their experiences. Fourth, I used triangulation to "weave together the threads of data" which converged from interviews, journals, and literature review (Lawrence-Lightfoot & Davis, 1997, p. 193).

In creating each portrait, I attempted to blend together "empirical choices and aesthetic sensibilities" in developing a "narrative that both informs and inspires" (Lawrence-Lightfoot & Davis, 1997, p. 259). I followed four processes illuminated by Lawrence-Lightfoot and Davis. First, in each sketch I identified the overall story that framed, focused, and energized the narrative. Second, I identified the emergent themes that served as the framework for each portrait. Third, as the researcher I created the "flow of the narrative that washes over the structure and gives the piece texture, nuance and emotion" (p. 259). Fourth, I created the unity of the piece ever mindful of my place, my voice in the relationship, and my responsibilities as the researcher. Lastly, I was cognizant that for authenticity to be achieved the

"resonances" of myself, the participants, and the audience must echo through the piece. In order to be successful in my analysis, as the researcher I must have captured the "essence of their being . . . amid the incoherence of their lives" (p. 260). In this analysis, I was careful to consider whether the experiences disclosed during the interview were representative of others or were noteworthy in their deviance from the majority (p. 266).

### Researcher as a Positioned Subject

As a third generation widow, I am in addition a positioned/researcher in this project. The importance of being a positioned researcher was first illuminated by the anthropologist Rosaldo (1989) following the death of his wife Shelly in Manila. It was then he was freely able to "imagine the angst possible in bereavement" (p. 19). Only then was he in a position to grasp the force of what was happening to the Ilongot headhunters of Manila he was studying in the Philippines. For only when he had an experience like theirs did he gain an understanding of their rage. "When this occurred he was able to grasp the meaning . . . the men gave for why they hunted heads after the death of a loved one" (Denzin, 1989a). His acknowledgment has led other researchers to concur on the importance of the positioned researcher (Denzin, 1989b; Di Giulio, 1989; Guba & Lincoln, 1989; Weiss, 1994). As a positioned subject I was able to easily gain entry into the world of women who were widowed before the age of 55. More importantly, I was aided by another positioned/subject/researcher educator in gaining entry into the experience of African-American widows as well as

referred to other potential participants by other widows. The fact that I was also an educator and a licensed clinical social worker enhanced this process.

### Researcher as a Collaborator

Zisook stated: "I've never met a widow who doesn't have an interesting story" (personal communication, October, 1997). My task as researcher was to become a co-collaborator who allowed each woman's story to be told. Their stories emerged out of our constantly evolving relationship. "Rather than being interviewed . . . these [women] are co-creators in their life story. Thus, I become audience and mirror, witness and provocateur, inquirer and scribe" (Lawrence-Lightfoot, 1994, p. 620).

### Final Thoughts on Narrative and Portraiture

Narratives have represented ways to claim identities and construct lives (Riessman, 1993). Portraiture has attempted to illuminate that which has heretofore been uncharted by subtly embracing the "generative tension . . . between organization and classification on one hand and maintaining the rich complexity of human experience on the other" (Lawrence-Lightfoot & Davis, 1997, p. 192). As the researcher, I did not choose one side over the other in exploring the stories of these women. Rather, I sought to maintain the tension since "a phenomenological question is not a problem in need of a solution but a mystery in need of an evocative understanding" (Whirlwind Tour of Phenomenology, 1994, p. 3). I have attempted to create empathic spaces where conversation flowed, meanings emerged, and my words intertwined with other voices to create portraits which contribute to a greater understanding of widows.

Chapter 4 will present a portrait of each participant. Basic demographic information of each participant will also be included.

## CHAPTER 4

### PORTRAITURE

The purpose of this study was to explore the experiences and challenges of women who were widowed before the age of 55, who had been widowed for at least two years, and who were professionals, businesswomen, or community activists. This chapter is divided into two sections. The first section presents basic demographic data concerning the participants. The second section presents individual detailed portraits of the 13 participants.

#### Demographic Information

Table 1 presents basic demographic data concerning each participant. The table is organized according to the participants' age when widowed. Pseudonyms were used in accordance with the policy of the University of San Diego's Committee on the Protection of Human Subjects. The number of children each participant has is listed along with their ethnicity, education, occupation, and the cause of their spouse's death.

#### Portraits

In this section I have presented a detailed description of each woman's life, documenting and illuminating the complexity of her unique experience. This was done so readers could gain an appreciation of the life of each participant. Reflecting on these women, readers also might see parts of their own lives and of others they know. This process is consistent with portraiture.

Table 1. Demographics of Participants

Name	Age when widowed	# of children	Ethnicity	Education	Occupation	Cause of spouse's death
Denise	25	2	Black American	Premed tech school	Lic. phlebotomist	Heart attack
Chloe	26	3	White	High school	Designer	Cancer
Roslyn	35	1	Pacific Islander	Ph.D.	Lecturer	Cancer
Meg	37	2	White	Ph.D.	Scientist/community activist	Heart attack
Lee	41	3	White	B.A.	Teacher/massage therapist	Brain tumor
Julie	43	2	Japanese-American	Working towards B.A.	Office manager	Car accident
Belice	43	2	African-American	Working towards B.A.	Banker	Stroke/heart attack
Lila	44	4	White	Graduate student	Lecturer	Heart attack
Angel	45	4	White	B.A.	Nurse	Lung cancer
Helen	46	3	Hispanic	1 year community college	Health Educator	Heart attack
Joan	40	1	White	BA +	Teacher	Heart attack
Babs	50	2	White	Community college	Store Owner	Car accident
Ruthie Lee	54	0	Black American	Ph.D.	Professor	Heart attack



The portraits have been presented to allow each woman's voice to be heard. They commence with Denise, a young Black American woman, who is proud to be a widow, proud to have had a man who loved her, who fathered her two young sons. Belice, a Black American woman whose strong belief in God, positive attitude, and her continuing relationship with her deceased spouse, her guardian angel, all contribute to her resiliency. Orchids bloom everywhere as Roslyn, a Pacific Islander, demonstrated her tenacity for living fueled by faith, optimism, and unending determination to conquer life in a new country. With Julie, the reader meets a Japanese American woman who has exhibited the courage to emerge from the chrysalis of depression. With Chloe, the reader is introduced to a designer who creates beautiful interiors for others while her own interior life has been haunted by a terrifying presence. In contrast, Helen is a fighter, a Hispanic woman who is not afraid to advocate for what is hers. Barbara, a successful clothier, has filled her life with 10-12 hour workdays, 7 days a week, while Joan has found a new beginning through support groups. Angela has taken a different spiritual path. Her home is laced with angels, and following a pilgrimage to Guatemala she had her portrait painted as an angel. Meg is a combination of scientific rigor and mysticism. Lights flicker on and off when she passes by, children scream in confusion, and a playful tiger frolics with her as she heals. Lee has a sense of humor. She is inventive, creative, enterprising, and above all, a mother of three. The chapter concludes with the portraits of Lila and Ruthie Lee who have been best friends for over 30 years and who were widowed within 3 years of one another. Their lives are as different as a

checkered tablecloth. Their friendship, however, has served as the thread which has helped each one patch their lives together in a tapestry of grief, of laughter, of growth, and of triumph.

### Denise

Denise was 25 years old when widowed. Her husband died of a heart attack in the hospital. She is a Black American woman with two small children and is employed as a licensed phlebotomist.

When I drove up to Denise's house, I sank into the car's soft leather seat as I wondered what she would be like. It was hard to get a feel from the neighborhood. Small, white stucco, carbon copy houses lined the sun-drenched street. The Nevada test site lay in the distance framed by the ever changing hue of the desert hills. The houses were clumped together. Standing basketball hoops lined the street while cars moved slowly between children at play.

My heart beat with uncertainty as I wondered if Denise would show. She was already ten minutes late. I was always compulsively early or on time for appointments and I could feel my stomach drop and my hands grow clammy in anticipation. A big cheshire cat-like grin crossed my face as a white van pulled into Denise's driveway. A young black woman breathlessly popped out of the car. She explained she had to drop her sons off across town and swiftly ushered me into her home where for the next two hours we would share a rainbow of emotions.

Upon entering Denise's home, I was struck by its orderliness. Everything was meticulously in place. As I scanned the surroundings my eyes froze as I surveyed the

coffee table. Two photographs held me captive. The first was Denise and Damion's wedding portrait; the second was Damion's tombstone. Each photo stood as a testimonial to her status as a married woman and as a widow. The juxtaposition of the photos sent chills through my body as Denise explained:

You know what I don't like is being a Black woman, a young Black woman when I do things or go places as far as the kids go. When I state I'm a single parent, they always feel like she's a single parent. No, I'm a widow single parent. Does that make sense? Because the majority of Black women, young women are just having babies and the husbands are gone. But I don't like that because we are put into a category of young Black women having these babies and the husband is gone. Well, I'm a young Black lady. I have two children. I'm a widow. I am a single parent not by choice. I had a wonderful husband. He died, he left me. He didn't leave me, he died. I didn't get divorced. I didn't get separated. We weren't on bad terms. I am a widow.

Denise and Damion first met at the Department of Motor Vehicles. Both were standing in lines waiting to be helped. Denise needed to apply for a new license and Damion was registering a new car. Damion stepped out of line, came over, and asked Denise her name and told her he was in Las Vegas visiting relatives. They went out on a date. Denise, however, did not like him. "I think he liked me, and for six months I dodged this guy until Christmas Eve when we went out dancing and had some drinks." When she came home she told her mother, "I'm getting married." Of course she did not believe me. Two days later Damion came over. "I packed all my

clothes and I moved in with my husband in February. . . . We got married in August. . . . That was the happiest day of my life." That was also the first time Denise had been separated from her twin sister.

Denise and Damion were inseparable. They did everything as a team. They often dressed in the same colors. Red was Damion's favorite color. In fact, Denise's wedding dress was trimmed in crimson red and Damion "looked dashing" in his red tuxedo and tails. Looking at their wedding photo, their ebony skin framed in crimson looked luscious against the backdrop of white calla lilies which filled the wedding hall.

Quick to have children, Damion, Jr. was born seven months after their marriage and Daniel followed three years later. They always included their children in everything. When Denise went out to beauty shop to get her hair and my nails done, "it would be with my husband and my two boys, and everyone thought we were brothers and sisters because we were so close. But he was my best friend . . . my lover." Damion was the chief provider and caretaker. He was Denise's chief advocate. While working as an electronics technician, he supported Denise's enrollment in "medical school." Upon graduation as a nurse with a phlebotomy license, Damion and baby Damion Jr., were in the audience.

I'll never forget that day. You would have thought I had a whole audience of people out there when they gave me my award and there was no one but him, my best friend, my little baby. . . . He had two bouquets of roses. And when

they called my name, he jumped up and he screamed and he cried. He was so happy, so proud of his wife.

Proud he was and it was with great pleasure Damion looked forward to junior's first T-ball game. Damion had been recruited to play football at a California college and sports had been an integral part of his life. Denise did not know how to tell her young son "that daddy was not coming home, that he would never come home again." That was on Thursday.

I took Damion to the hospital on Wednesday because he was having some chest pains. They wanted to keep him overnight for observation. I took my son to school Thursday morning and when I came back to the hospital he was in the ICU. They said his heart stopped beating three times the night before. I called everyone and everyone flew in. At 11:59 Thursday night he was asleep and he passed in his sleep, cardiac arrest. . . . He was 31 years old and I was 25.

For the first time since Denise left her mother's home, left the safety of her twin sister, Denise was alone.

So when my husband passed it was like somebody had cut off my left arm. I felt like I was in a big old empty place and I didn't know which direction to go with only \$200.00 in my purse and maybe \$400.00 in my bank account.

Denise was faced with the responsibility of two small children, a broken heart, angry in-laws, and "mean" sister-in-law. "My sister-in-law really took me through it. She felt like my husband loved me too much. . . . She was always jealous of me

because maybe she didn't have someone to love." Everything was my fault. Denise has not talked to her sister-in-law for many years. A month ago her sister-in-law called and apologized for being "rude." Denise is cautious of their relationship.

Following the funeral, when everyone was going back home, no one said, "if you need me, give me a call." Rather, Damion's parents went through the house saying, "I want this." Mustering up her courage, Denise, fiery-eyed, stood up and said,

Excuse me, you're not getting anything. This wasn't my boyfriend. This wasn't a guy I was dating on the street, this was my husband. So whatever is in this house we got it together and it goes with me and my children. . . . This is my children's father. How dare you come in my home and tell me what you want. You're not getting anything.

Denise did not mind giving them photographs or something small to remember him by. She gave her father-in-law Damion's shaver but she put her foot down when they wanted his clothes. "I felt like they should have given me their respect of grieving for my husband to not ask for anything or wait a little bit."

The tension between herself and her in-laws still exists today. Denise has never forgiven them for not helping her buy winter coats for her sons when she did not have enough money, or offering to pay her children's airfare to visit them in Texas, even though they received \$40,000 from a life insurance policy they had on their son.

In the beginning I really needed their help and they weren't there. . . . I called and asked them for two coats for the boys, probably averaged out to \$100.00, and that was the least they could have done, to buy them coats and they wouldn't. And that hurt me because I never asked anyone for nothing, not even a dime since my husband has been gone, and I want them to know it's hard.

When Damion died, she only had her in-laws nearby. She felt "frightfully alone," so her dad and family drove down, packed her up, and moved her back to Las Vegas. The memories of Damion proved to be unsettling.

I stayed here for 10 months. We got married here, our first baby was born here, so I couldn't take it and I moved to Mississippi with my sister for a year and a half, and I just got back here last April.

Living with her sister provided Denise with a familiar anchor. As twins they were always together. They dressed alike and looked alike. They had gotten married within months of each other. Her sister was good to her, her sister's husband was comforting, although at times Denise was "jealous of their relationship." She knew when that happened it was time to move back home. This time she knew she could stay in Las Vegas.

At first I'd worry. I'd fall. I would do good and then I'd fall down again. But since he has passed I've been succeeding. I don't know where I get the energy from. I don't know where I get the spunk to get up and go, but I just do, maybe because I know I have to take care of my boys. . . . I'm doing fine

now, and I'm proud of myself because I didn't think I was going to do this good.

Pulling their resources together, Denise, her mom and brother bought the home they now share. Denise's brother works the graveyard shift at a casino and is able to pick the boys up and feed them. Her mother is ill; at 50 she has had cancer and a stroke. Always active and gainfully employed, her medical condition has robbed her of her ability to work. She stays with Denise and with her sister. "Long divorced" Denise's dad and stepmother are always ready to "pitch in," as is her best friend Regina who stopped by to meet me and see how her interview with the "university professor" was going.

Damion, Jr. has had a difficult time adjusting to his father's death. One can only imagine what it must have been like for this wide-eyed, 5-year-old child trying to comprehend the events surrounding his father's death.

"Mommy, when is daddy coming home?" Damion asked. Hysterical with her own grief, Denise was not "in a position to explain to him" that which she did not understand. "I said, 'he's in a deep sleep, he's resting, he died.'"

At the funeral, Denise remembers Damion, Jr. "taking a chair up to the casket and sitting by it. Everyone was hysterical and he was angry because everyone was crying." He said if his father could see them, "he would be angry because he didn't like everyone to cry like that. He would want them to rejoice."

About two months after they moved back to Las Vegas for the first time, Damion, Jr. started "hollering and screaming." He blamed himself. In pain he wanted



to know "why did dad have to leave? He didn't hurt anyone, he loved everybody."

That is when Denise put him into counseling "because he really went into withdrawal." He was not doing well in school and he had always been an honor student. In class he would become hysterical, especially when father and son day came around. "I would have to pick him up. His teacher, Miss Harris, was the best lady. She helped me with him. She encouraged and supported the counseling."

Damion, Jr. went through counseling a whole year. "It brought him out pretty much because he felt comfortable to where he could talk about it. He wrote a little book about how he felt about his daddy being gone." As Denise shared this, I felt echoes of my childhood dance in the pit of my stomach. "Damion said his father was the greatest. He felt like someone cheated him and it was his fault."

Denise is open to the possibility of seeing a professional counselor as she deals with her own grief four years hence.

I cry a lot. I talk to Damion a lot because I miss him so much. . . . I get angry. Never in a million years would I think I'd be a widow at 25, raising two babies, and it has been so hard because I am the sole provider. I can't miss a day of work because I have to pay the bills. I have to take care of the kids. It's just so hard because I have so many things to say to him and I want him to respond back. I want him to see how well the kids have grown, how big they are.

As Denise talked I kept the snapshot of Damion dressed in his favorite crimson red suit, silent in the open casket, Denise dressed in her matching crimson suit sobbing in

disbelief and Damion, Jr. perched on high guarding the remains of his body. My heart was still as silent tears poured through my body.

Denise keeps the memory of Damion alive by making "every Friday, Father's Day." She explained:

Me and my husband always made videos of the kids' birthdays, so every Friday now is still Father's Day, and we look at all the videotapes and photos. And each week the boys take turns picking out the video of their dad to watch, and we'll sit in the den at the big TV screen and watch videos of my husband. . . . Of course in between we're crying, and when the videos are over, I'll sit down and ask them if there's anything they want to say. The "baby boy" pretty much wants to know different things about his dad--how did he walk? How did he used to laugh? They spend about two hours, and after we finish talking about him, we wait for the following Friday and do the same thing again. And that keeps us above water.

As the researcher, I am silent in my listening. As a clinical social worker I wonder about the efficacy of continuing such a ritual as the years progress. I am in a quandary whether to question or to listen. I know Denise has learned through her child's counselor that it is important to let her children share.

I don't want them to keep it in because he thinks it's going to make me sad. Because if he keeps it in he's going to explode one day, and that I learned about when he was going to counseling. The lady told me if he ever wanted to talk about dad, always let him.

I nodded in support of her openness. I shared briefly what I know other widows have experienced. I acknowledged how difficult parenting is. I told her counseling "is a gift we give ourselves as we struggle with life's challenges." From my experiences, I shared that rituals such as Father's night may change as time passes and her life and her children's lives will change and grow.

Every August Denise and the boys drive to California to visit the cemetery in celebration of Denise's anniversary.

We drive up there every August. We visit and have a picnic on his grave site.

We cry and we laugh, then we sit down and have our picnic lunch. We talk to him and then we get in our car and drive back to Vegas.

This ritual is short-lived, healing, time limited, and refreshing for Denise. It is reflective of how Denise feels about memories. As part of Damion's obituary, Denise included this poem:

#### Memories

Something we keep of something we had,  
All of the good things and even the bad,  
To cherish them, to keep them, to hold them tight,  
To laugh about them, to cry about them,  
During the day or during the night.  
Keeping them private or making them known,  
To take them out or keep them home,  
No matter whatever some words will say,

In our hearts, Damion, your memories will stay.

In addition, part of Denise's heart is locked in Damion's casket along with photos of herself and the boys.

When he passed I got him a little vault. I have a little key on his chest and a picture of me and the boys together, and I always say the only person who has the key to my heart is my husband and he is buried. We have two keys. He has one and I have one.

Denise, however, knows life goes on, and in the four years since Damion has passed she has had a relationship with another man. She is not interested in remarrying. "I just want to watch my kids grow." She wants to travel. In the past four years she not only has become a widow, she has lived through the death of one of her brothers who was killed by a drunk driver and her mother's illness.

Well, my husband's death with my brother's death and my mom's sickness, it has been a roller coaster for me. But as of now, by me being 29 and still a widow, I feel I could conquer the world because I've been through so much.

Denise discovered new freedoms as she never has to call in-laws or her sister in-law again. She never has to hear them harp on her. "I really feel free of them now because I don't have to deal with them." She believes grief must take its course. She tells others, "don't rush it. . . . If you want to cry, cry; if you want to laugh, laugh. Only you know what you're feeling, even though other people are quick to say, 'I know what you're feeling,' but they don't." Moreover, she wants everyone in the

United States to know, "I think that us widows should have hats taken off to us. I think we all deserve applause."

### Belice

Belice, an African American woman, was widowed at the age of 43. Her husband suffered a stroke at home and died of a heart attack. She has two children, is employed as a banker, and is presently working toward her bachelor's degree.

Dusk settled over the Las Vegas Valley as I drove to Belice's home. The neon lights of the infamous Vegas strip gave way to shopping centers and housing tracts which resembled Anywhere USA. The freeway was crowded and slick after just being washed by a sudden outburst of rain. My mind raced with questions as I traveled over what felt like unfamiliar yet paradoxically hauntingly familiar terrain.

Approaching Belice's home, I was struck by a sea green wrought iron fence which stood in sharp contrast to her neighbors' homes with open green grass lawns. The lattice-work iron fence stood like a sentry protecting her house from the rest of the world. In order to enter, I had to pass through two iron gates, only to be greeted by a locked screen door which shielded the front door from both well wishers and intruders.

Belice, a petite 45-year-old Black American woman, greeted me. She apologized for all the locks and explained that the security system had "just been installed." "Even though the neighborhood is safe," she said, "I just don't feel safe since Major passed. The locks help me, especially at night. I know Major wants me to be safe."

Major, a 58-year-old military officer was Belice's second husband, "best friend, confidante, and guardian angel." They met over 16 years ago during Black History Month at a dance on base. Both were divorced. Belice was "not really interested in finding a new mate." In fact, Belice remembers ignoring Major for most of the night until he asked her to dance. "It was a slow record and I thought I've never gotten that close to anyone I've just met before." There was instant chemistry between the two and from that night forward Belice and her "handsome Major" were inseparable. "In the beginning people thought we were married because we did everything together, and when we did get married, it was a shock to a lot of people because they thought we were married."

Major and Belice's life was comfortable. He retired from the military 11 years ago and worked at the local Walmart just to keep himself busy. He was a department manager. Belice worked at a local bank. He was a trustee at their church; she was active in the choir. Belice's two daughters attended school in the South. Tonight she chose to mention little about their relationship, preferring to concentrate just on the death of her husband.

Together Belice and Major carved out a life of caring. When she was first stricken with multiple sclerosis, Major bathed and dressed her during the months she was incapacitated. "He pampered me and I depended on him for everything." Belice did not know how to operate any of the electrical appliances in her home. "When Major passed, I was at a loss as to how to operate certain appliances or fix things."

Even though Major had suffered his first heart attack 16 years ago when he was 42, his death was unexpected. With the precision of a documentary film maker, Belice recalled the details of that steel grey November day. The day started off with the same monotony of any other work day. Belice went off to the bank while Major stayed at home as he was working the night shift. His hours were 10:30 p.m. to 7:00 a.m. Instead of returning home after work, Belice first went to choir practice and then out to eat. That worked well with the Major's schedule as he usually took a nap between 5:00-6:00 p.m. Then he would get up promptly at 9:30 at night to get ready to go to work and leave at 10 o'clock. So on that particular day when Belice left work at 6 o'clock and went to McDonalds next door to the bank where she worked, she called home to check on her husband. She thought he was probably asleep but decided to call anyway. Even though there was no answer it did not startle her. He usually unplugged the bedroom phone so the ringing would not awaken him. The answering machine in the kitchen would take the message. She ate and drove to church for rehearsal. Finishing around 10:00, she decided there was no need to rush home, thinking Major was on his way to work. Belice asked two choir members to go to a restaurant for something to eat.

When Belice got home it was shortly after midnight. She lifted the garage door and saw Major's car. She thought, "Oh, my Lord, I am in trouble now," because my husband's car would not start and he was waiting for me to get home so he could use my car to go work. When she opened the door coming in from the garage it was dark and the alarms were not on. Belice never had to walk into her home when it was dark

or the alarms were off. Her mind started going as she walked up the steps and could see the light coming from the bedroom.

I went toward the bedroom and I saw my husband lying on the bed and the TV was on. As I walked down the hallway I called out his name and he didn't answer. I walked over to him and he was lying on the bed, his legs hanging over the side of the bed. He was lying there in his grey jogging pants and his socks. I pulled up his T-shirt and started rubbing him. He was so cold, like an icebox. His mouth was wide open because he was lying on the side of his face but his eyes were closed. I was okay during that time and I picked up the phone and called 911. The operator asked my address and told me to turn my husband over. I said, "I can't do that. I can't turn my husband over." She said the paramedics were on their way. "Walk out of the house and go to one of your neighbors and ask one of them to come over," which I did. I walked out and I rang the doorbell of my neighbor across the street . . . as a matter of fact, as I was ringing the doorbell, I could hear the ambulance sirens. The paramedics were in the neighborhood close by. I still don't understand why she asked me to walk out of my home. Maybe she just felt that was best for me. The paramedics came and I took them upstairs to my bedroom. One of them said to the other paramedic, "take her downstairs right now." I wasn't crying, I had not lost it then, but when the paramedic came downstairs and he looked at me, he said, "Ma'am, I am so sorry."



Belice did not know how she felt. She was in shock. Her "best friend" had suffered a stroke and fatal heart attack. His body lay disfigured in their bed. She handed the paramedic her phone book and before long the house was crowded with people. The police came to stand guard as is the custom when someone dies at home until the coroner comes to remove the body. Neighbors, friends, and church members filled the empty house.

Major's death has been difficult for Belice. Tears filled her eyes as she recalled the first months of not sleeping or eating. Belice lost weight and went from a size 10 dress to a size 6. Today, two years later, she sometimes wears a size 4. Her doctor makes her drink "Ensure," a vitamin supplement.

In the beginning she remembers "crying uncontrollably, running up and down her perfectly white carpeted stairs" with anger and despair until she was overcome with exhaustion. Sometimes she "hears noises." She found herself expecting Major to walk through the door. "There were times when I imagined I heard his footsteps. I heard him call out my name." She threw away the antidepressants the doctor gave her. She wanted to feel the pain of his loss. Everyone worried that her multiple sclerosis would kick in. To date it has not.

Three weeks after Major "passed," Belice went back to work full time. She went to a grief class sponsored by her church. The class was led by a professional counselor. Belice hated the class because it made her more depressed than she already was. "I would think, I'm leaving my job and driving here to church to sit and get more depressed over what he's saying." She found the professional counselor "well

meaning but not qualified" to help her and the other newly bereaved members of the group. "I know his heart was in the right place, but being a professional is all well and good, but unless you've been there, I don't feel you can reach out and help people like us."

Today Belice's best friend, Frances, is also a relatively new young widow whose husband and son were killed by a drunk driver. Together they share "confidences." They speak a similar language of loss. Frances, along with Belice's "church family," have been a source of strength to her since Major passed. Belice does not experience the same closeness with couples she and Major used to socialize with. "They look at me and say, Belice, how are you doing? And that's it, but I do not get invited to their homes for dinner."

As Belice talks I hear the words of my Great Aunt Bellah, my grandmother's sister, who was widowed at age 38, echo in my head. Aunt Bellah used to tell me, "Louise Ann, don't ever be a payor lady." "What's a payor lady?", I would ask, and she would tell me when her husband Charles was alive, she was always invited everywhere and to everything. Bellah was a very rich, very stately woman; however, when Charles died, the personal dinner invitations ceased. She wondered if they thought she had died, too. The only time she was invited anywhere was to charity events which she had to pay for. She angrily said, "Now I'm not good enough for their homes but I'm good enough for their checkbooks." And in that moment I felt the pit of my stomach spill onto Belice's white carpet as the pangs of rejection and

isolation swept through Belice, myself, and my Great Aunt Bellah as we faced the rejection of some of our so-called friends.

Belice's strong belief in God, "the Lord doesn't give you any more than you can handle," her positive attitude toward herself, and her continuing relationship with Major all contribute to her resiliency. First, she "puts her faith and trust in God," and second, in Major, "her guardian angel" whom she believes the Lord has appointed "to watch over her." Armed with that vision, she enrolled in the University and plans to complete her business degree. "School has proven to be really good therapy for me." In addition, she devotes time to her church. She was elected to take her husband's place as a trustee and takes that responsibility seriously.

Belice talks to Major frequently, and sometimes she will visit him at the cemetery or she will sit in her room, looking at one of his photos while talking with him. In his role as guardian angel, Belice knows the major helped her earn an "A" in her math and computer classes. He has even made sure she flew first class. Belice recounted that shortly after Major died she needed to travel East. While she had a coach ticket, she wondered what a first class ticket might cost because "my husband and I had discussed we're first class citizens, and when we take trips let's fly first class." When Belice went to the check-in counter, she inquired the cost of a first class ticket. The agent cued in her computer, looked up at Belice and replied, "nothing, nothing at all. It's all in the attitude. Your seat will be 3A, enjoy the flight." Startled and grateful, "I cried the whole plane ride, and when the exact same thing happened

on the way back, I knew it was Major at the keyboard helping the agents type up the tickets." She said, "thank you, Jesus, there's my angel again."

If Major is Belice's guardian angel in heaven, she still holds onto his material goods. His clothes have not been moved--suits, shoes, robe, everything. In the dresser drawers are his underwear, his T-shirts, his socks, everything is still order, folded the way he kept things. His toothbrush is still in its holder in the bathroom, and his soap is still in the bathroom.

As I toured the bedroom, Major's watch still lay on his nightstand ready to be put on in the morning light. The American flag which was draped over Major's coffin was proudly displayed on a newly purchased table especially designed to commemorate the funeral. The flag was the only evidence present in Belice's bedroom that Major had "passed on." She is struggling with letting go. Her grief is still new and raw. Like a steel magnolia she tries to hide her emotions but periodically they erupt in a volcano of tears, sighs of anguish, and exhaustion. Belice's aunt has admonished her for keeping Major's belongings intact. Belice says, "I really feel the sooner I'm able to move things out the better off I know I will be." Having walked a similar path, I assured Belice that is something she will be able to do once she is ready. I leave the role of researcher and suggest perhaps packing up Major's belongings is something she might do with a friend.

Friends have been helpful to her, especially at holidays, birthdays, and anniversaries. Christmas was especially difficult. She felt out of sorts and at odds. Major was not there to buy presents for and he was not there to shower her with

gifts. For her anniversary she had dinner brought into a trustees meeting. "I felt good that day. I was happy to see everyone enjoying themselves." Last summer she traveled to Hawaii with a girlfriend. They stayed at the same hotel which Belice and Major had been scheduled to visit. "It was gorgeous." This summer Belice plans to travel alone. She said she wants to experience herself. "I know I have to move on and be happy and do the things he would have been proud of me doing. That's why I'm so involved doing what I'm doing now."

For Belice, there is an unevenness in the "process of mourning." She tells other women, "we can't hold back the tears when we want to or the shouts or whatever. . . . It's important to cry, to shout, to run up and down the stairs to alleviate the pain, to pamper oneself." Be kind and gentle. Shopping and filling up her clothes closet became one way for Belice to soothe her pain. "Sometimes I will buy clothes I really don't need or want. I leave them in the closet with the tags on them." Shopping temporarily makes her feel better. Her closet is so full that she has little room for new purchases unless she gives Major's clothes away.

For today, however, Belice's education is a top priority. She has a sense of intrigue and adventure. If things do not work out at the bank the way she hopes, she is interested in the FBI. She has an interest in "fraudulent cases, blue collar/white collar crimes, and counterfeiters." Whatever the present brings, whether it is a new job, romance, or a recurrence of her illness, she believes "it is important for us to live life, live the best we can, for after all it is all in our attitude."

Postscript: I have since heard from Belice and she wanted to let everyone know two more things. First, she bought herself a brand new Mercedes. The license plateholder reads: "This one's for you Major," as he always wanted her to have a fancy car. Secondly, she started dating again--a gentleman who was widowed about the same time Major died. There was a smile in her voice as she shared this news with me. She told me one of her friends said, "Way to go, girl!" Belice said, "I'm going . . ."

### Roslyn

Rosalyn was widowed at 35 with one child. Her husband, 20 years her senior, died of cancer. She has a Ph.D. and is employed as a university lecturer.

Vibrant, yellow, white, lavender, and rose orchids blanketed the condominium walkway. Roslyn greeted me with an irresistible smile. She looked much younger than her 49 years. Her chocolate brown hair hung straight down framing her face in such a way that I thought she was one of her college students. I felt instantly welcomed as she ushered me through her home and out onto the patio. Birds provided background music as I was enveloped by a symphony of plants that served as a gateway to a lush, man-made lake which turned otherwise common grounds into a melodious tropical forest. I remarked on how marvelous her surroundings were and she shared she chose this particular spot because "it brings back beautiful, wonderful memories of my marriage, of a time when everything transcended itself and love was unconditional."

She met Roger at a teaching seminar. Twenty years her senior he was an educator, "a member of the Christian Brothers order, a missionary." At 24 years of age, Roslyn had completed two master's degrees and was working on her doctorate in psychology. Her friends thought she would never get married as she was "married to school." Roger, a first generation American from Montana, was a combination of his mother's Irish-Swedish heritage and his father's Italian blood "had taken vows of chastity, poverty, and obedience."

Roslyn, a child of poverty, was a devout Catholic and native Filipino. They enjoyed each other's companionship. After a year of friendship, Roslyn confronted him and said, "You are a Christian Brother. You've really got to make a decision, either you stay with your Brotherhood or you leave." After much meditation and contemplation, Roger chose to leave the Brotherhood. They were married. Roger was 48, Roslyn 28.

Digressing, Roslyn has always been forthright and assertive. She has always been rich in spirit and a risk taker. Nourished by the spirituality of the Catholic Church as embodied in her extended family, "Grandfather was a prayerful man," and fueled by her desire not to be shackled in poverty, Roslyn left home at age 11. Invited by her sixth grade teacher to come and live with her family, Roslyn left her family of origin to embark on a voyage of academic pursuits. By age 24 she had earned two master's degrees and was enrolled in doctoral studies. Interested in understanding the intricacies of the psyche she majored in psychology. Ever mindful

of her origin she straddled her many worlds, maintaining affection for both her natural and adopted families.

As a young married couple, Roslyn and Roger began their life in the Philippines. However, by the early 1980s they thought it best to leave the country because "things were bad politically and economically." Compared to a lot of people they were making good money teaching, still there was nothing left at the end of the month. Also, after three miscarriages, Roslyn was pregnant and she knew "if we are going to stay here, there is no way we can support a baby." Luck was with them as a friend of Roger was looking for someone to direct a new program at an international school and asked them if they would go overseas. Ever adventuresome, they agreed.

The shadows of death would begin to appear before they ever stepped foot on this foreign soil. Roger, anxious to show off his bride to his family, traveled to America. Before they left "he was starting to feel some pain in his left shoulder." In San Francisco, they decided to have the pain checked out. The doctor reported Roger "was a walking time bomb."

At age 47 he had the first of two open-heart surgeries. Following bypass surgery, "he looked great." The doctor said he could do all the things he wanted to do. After a month's recovery, Roger returned to Taiwan while Rosalyn, 8½ months pregnant, stayed. When he recovered I was about to give birth and the doctor said, "you can't go to Taiwan with him. You have to stay here because we don't want you getting onto the plane and having the baby." Roger's family cared for her and their daughter. On Dee's one month birthday, they joined Roger in Taiwan.



The first two years in Taiwan "were wonderful." Roger's health was good and the baby was strong. They enjoyed the school and made many friends. As part of his medical care, Roger had to return to San Francisco for a routine check up. The doctor said the bypasses had collapsed and Roger needed surgery.

This time the surgery was very hard. When I first saw him in intensive care, he looked different from the first operation. The first time he had color, he had so much life. He was optimistic and he was raring to go. The second time around it was completely different, and I said to myself he is going to have a hard time recovering from this one.

Roslyn left Roger in the states to recover while she and baby Dee returned to Taiwan. Not to jeopardize Roger's teaching contract, Roslyn taught his classes as well as her own. Following a month's recovery, Roger returned to Taiwan. "We thought everything was going fine and after a couple of months his neck started to grow big." He was immediately admitted to the hospital. After five days they had the results, "malignant"! Because his neck kept growing and growing they would not release him. For Thanksgiving he had chemo and radiation therapy. "That was, of course, killing him." Roslyn desperately wanted to know what was going on. "Asian doctors don't want to say anything directly." In terror, Roslyn grabbed the doctor and said, "I need to know, and the doctor said, I don't think he can live for six months."

Roslyn was numb. She did not know what to do or what to say. She was overwhelmed. She felt alone, isolated in a foreign land. For the next 4½ months, she does not even remember what food she ate. She ran on automatic pilot, teaching her

classes at one end of the island in the morning and traveling to the hospital at the other end of the island just to be with him. Roslyn recounts:

There was a time I'd get back home and didn't even know what happened during day. I forgot who my daughter was with one time and I came home and Amah (helper) was there cleaning and then she had gone. I forgot to ask her about my daughter because I was so tired, emotionally drained, and finally I said to myself, where is she? Why didn't she leave her here? She knows I'm home. I forgot that she had asked permission to take my daughter with her and the whole thing was blocked out. Finally, I wondered, where's my daughter? I thought she was sleeping in her room and then I went to take a nap when I suddenly realized I had to go get her. I got so scared and then I remembered she went home with Amah but I didn't have her phone number. It was a good thing one of my neighbors had Amah before and she had the phone number. She didn't know exactly where she lived, so we went driving around the neighborhood trying to look for the house. I heard this high pitch sound and I knew it was my daughter. We stopped right by the house and she was playing with the kids.

During this time the school community joined together and reached out to her. They said, "Roslyn, we know you're tough. We know you're strong, but let us help you." They made arrangements for "who would go with me to the hospital on certain days, who would take care of my daughter, and who would teach for me. It was a beautiful thing and it made things easier for me with the support of the community."

After 4½ months in a Taiwanese hospital, Roslyn decided to take Roger back to the United States to see his family for the last time. In addition to the complicated logistics of transporting someone that ill, "some of the seats in the plane had to be knocked down." Roslyn also had problems obtaining a transit visa to come to the United States. "The U.S. Embassy didn't want to believe I was his wife." Roger's mother flew over. In doing so, she left her daughter who was also hospitalized for cancer. Roger's life ended three weeks later in a Northern California hospital. "He was in a coma for two days. That was it." He was buried in Paradise, California.

For the first time in Roslyn's life, she did not know what to do. At 35 she was a stranger in a foreign land. She was numbed by the events of the past years. Her in-laws took her in and with the help of the Catholic Church she found work at Catholic Social Services. Because she was not educated in the states and did not hold state counseling licenses, she worked as a secretary and then helped to establish counseling services for the diocese. They sent her to a conference in Southern California. There she met up with two friends who had taught with her in the Philippines. They encouraged her to explore Southern California. "There are a lot more opportunities for you here," they said.

Roslyn, ever mindful of her daughter's needs and eager to be on her own, secured employment as a sixth grade teacher in a Catholic elementary school. Financially life was burdensome as she assumed total financial responsibility for herself and Dee. The medical bills were cumbersome. "I thought I was done paying for all the medications, etc., and then the bills started to come." She paid \$300.00 a

month for three years. Even though she received \$25,000 from an insurance policy, she was hesitant to use this money as she believed it was for her daughter. Eventually, this money was used as a down payment on the home she now occupies. Not being an American citizen, Roslyn was not eligible for Social Security survivors benefits. To make ends meet Roslyn worked as a psychological assistant at a counseling clinic and sharpened her computer skills at Coleman College in case she needed office work.

By the time Dee was in third grade, Roslyn became restless in her job. Desirous of teaching college again, she began filing applications. She was first hired on a part-time basis as a community college instructor. Today, Roslyn teaches three courses at a public four-year university and four courses at two different community colleges. While some of the courses overlap and the curriculum is similar, her workload is demanding. Colored by a "strong sense of faith and optimism," Roslyn is convinced she can do anything.

I feel like I can go anywhere and not worry about being able to do something or enjoy life. I can be in the poorest places because I've been through poverty and still enjoy it, and I can enjoy the nice things about life and see them as part of the bigger scheme of things.

Today Roslyn has done things she never thought possible. When, for example, she started teaching the psychology of sex, she had to put aside all her traditional Catholic attitudes. "The first time I showed Masters and Johnson's film I went to a corner and just turned around. The second time I started enjoying the course. . . . I

opened my eyes to new ideas and values." Some of her students came back to her and said, "we had a wonderful time in that class."

Just as Roslyn has opened herself up to teaching the psychology of sex, so too has she addressed her own sexuality, more in terms of her Catholicism than in terms of being unfaithful to her deceased spouse. For the first year after Roger's death, she was "completely celibate, and then my friend came along." He was also Catholic. "I thought maybe you have to wait. It didn't work that way, I was real eager." In her mind she felt guilty, believing she had betrayed her religion. After awhile, however, she was "able to reconcile being Catholic. It's not that bad. It's the mutual enjoyment and consent between people, and we were adults and no one was being hurt in the relationship." She is not interested in remarrying. She has yet to meet anyone who could compare to the love she had for Roger.

Raising a daughter alone in a foreign land has had its share of challenges. Roslyn has taught Dee to be self-reliant and strong. They have always talked about her life being different not having a father. At one point Dee wrote her a note thanking her for being both father and mother. However, Roslyn remembers one Christmas when Dee was 9 or 10 years old. Dee had a fever. Roslyn was touching her and comforting her. As she went to get clothes from the closet, she discovered a note Dee had written to her father. "I wish you were here to spend Christmas with us because I really do miss you." Together they sat and talked. At times Roslyn wishes Roger was here, too. "If he were here, at least my daughter could go to him and things would be a lot easier. He would be a buffer." Today Dee is a high school

junior. I shared how all my daughters wrote about their father on their college applications. Together in silent understanding we hug as only widowed mothers can.

Fourteen years later Roslyn still communicates with Roger in a spiritual way. "I feel I am living my life still talking to him and relating to him a lot of the time." Whether it is good or bad times she shares everything with him. "Then I catch myself, that I shouldn't be doing this. He's already gone. And yet in some ways it really helps to ease the pain. . . . It's a spiritual belief. He has not really left us, he's really here. He is a spiritual presence."

Since his death Roslyn has learned "to be assertive." She is a lot more confident in speaking her mind. Being a widow has taught her to "stay strong, go to school, study hard, and don't get married to depend on your husband." Though we are cultures apart, I hear myself in Roslyn's words.

In widowhood, Roslyn discovered death which for her came "spontaneously, shattering all those dreams and ambitions we had together as a couple." Death, however, has been "a beauty all to itself." Through this experience Roslyn has been able "to see a lot more about love, life, relationships, and the responsibility of caring for someone else." She has learned what it is like to be by herself. "To me that is the beauty of life."

Financially, she is proud of the way she manages money. Today she has excellent credit. She owes few bills. She is able to save. She does not spend beyond her means. She saves money knowing she has to support her daughter and knowing she has to take care of herself as she grows old. "If I don't remarry, I also have to

think of myself in old age, so I have been setting money aside. Moreover, Roslyn has been able to maintain a reverence for her past as she forges a new identity. "I think it's really beautiful. I have been able to keep my own culture and at the same time adapt to America. I have been able to keep the love I had for Roger while I have navigated new paths." Like the variegated orchids in her garden, Roslyn blooms.

### Julie

Julie, a Japanese American, was widowed at 43 years of age. Her husband of 18 years died in a car accident on his way home from work. Her two daughters, Gracie and Martha, were 12 and 15 at the time of his death. Julie is presently employed as an office manager and is continuing her college education.

The first time I met Julie she meekly peeked her head into my office, her soft brown hair bobbed about her face, accentuating deep-seated brown/black eyes. I invited her in. She looked anxious as she scanned the cornucopia of papers, plaques, and photos which filled the room. The soft beige leather couch enveloped her as she sat down. Resisting its comfort she held her body erect by tightly crossing her legs and holding on to the armrest. In doing so, Julie resembled a butterfly tightly knitted to its cocoon. Julie told me her counselor suggested she talk with me. Her speech was slow and fragmented, reflective of her disjointed memories.

Julie and Sam met on a blind date. Both were working in Southern California. A friend of Julie's mother lived in a large apartment complex and had met Sam a couple of times in the parking lot. Julie's mother had asked her friend if she knew any single Japanese fellows. She remembered Sam and set them up. Sam, a third

generation Japanese American, married Julie, a Japanese American in a traditional Buddhist ceremony. He was a dutiful husband, always providing substance and support to his wife and daughters.

Sam worked nights delivering produce to military commissary stores. He ordinarily started work between 2:00 and 3:00 a.m., and that August morning he was going from one site to another when a tractor trailer going backwards crossed in front of him. Sam's truck slid under the trailer and was instantly crushed. The accident occurred around 4:00 a.m. It was dark outside and there was no moon.

Julie knew nothing of the accident until 11:00 a.m. that morning "when a lady came to my door and said she was from the County Coroner's office." Basically she said my husband had been in a car accident and did not make it. Julie cried as she spoke. She had not shared this information before with a stranger. We stopped for a moment, then Julie continued. Sam's death changed everything. Julie was forced to become a parent. This was to be the biggest change of all. Before his death she had been an "absent parent working and going to school. Sam was always at home before the kids got home and he was very active. He took them to all their activities. He made their meals. He was also the disciplinarian."

Following his death Julie had trouble keeping the family together. Martha, 15, started cutting classes and having problems at school. She would leave home and not return for days. Grace, the youngest daughter, stayed by her mother's side. Julie's world was convoluted and shattered. Within a three month period, Julie graduated from college with a B.A. in business administration and lost her health insurance



benefits as her "dead-end job" ended. She faced the sudden death of her husband and experienced the difficulties of trying to parent two adolescent girls alone. Life was a blur. In fact for the first year following Sam's death, Julie was in shock.

I think the first year you're in shock, even though you don't realize it, and the necessary things get done like filing for Social Security, getting a death certificate, or thinking about surviving the next six months. Then I think once the year is past and most of the paperwork is taken care of, suddenly you have time.

During this time Julie began to think of herself and the enormity of her responsibilities. She realized how dangerously vulnerable she was.

The second year following Sam's death was almost a fatal disaster. Feeling depressed, overwhelmed, and inadequate as a parent, Julie, "just functioning like a robot," took Sam's revolver which she kept in her nightstand, and one cold, wintry day stuck the gun into her mouth. Martha entered her parent's room, saw her mother, and grabbed her arms from behind. The gun went crashing to the floor. It was then that Julie realized she had to go to counseling. She had heard how dangerous the second year was for widows. She never realized how depressed she was until that day. To her credit, she sought out both individual and family counseling. When the first counselor "didn't click with my daughter, I searched for another one." These were extremely courageous acts for Julie, especially since her culture did not sanction this kind of sharing.

Julie felt she had no one with whom to share her thoughts. The widowed women at her temple were not interested in talking with her. "I think it's just the culture that you don't talk about these things. My mother did the same thing. She said it's something you don't want to dwell on. It couldn't be helped so you just go on. It seems to be a private matter." Her in-laws, though kind, did not understand her feelings. They thanked her for allowing them to bury Sam in their hometown some 400 miles away from Julie.

Neighbors provided practical assistance. They mowed the lawn, took out the trash, and were available to help fix a broken appliance. Friends reacted in a variety of ways. One girlfriend quit calling her. At first Julie was hurt, but then she realized her friend was afraid of her "because I'm single. I'm a threat with her husband. She once told me her mother's friend stole her mother's husband." Julie stopped calling her. However, couples with whom she and Sam used to go to Las Vegas or have white elephant parties together remained loyal friends. These couples were secure in their marriage and they continued to include Julie.

As Julie began her third year of widowhood, she felt a structure beginning to emerge. Financially she was better off than when she was married as the courts awarded her a handsome insurance settlement based on the cause of Sam's death. She began to rethink her priorities. Rather than go for a job that would require lots of hours she looked for a part-time job that would give her flexibility to be at home with her girls. She found such a job in the business office of a local college. Here she felt safe and met other Japanese women.

At home Julie decided to redecorate her bedroom. The first thing she got rid of was the dark curtains Sam had put up to keep the light out while he took his afternoon nap. Julie wanted to let the light in. Next, she gave away a captain size waterbed as she discovered she did not have the strength to make up the bed. She couldn't pull the corners up over the mattress. Julie purchased a queen size bed and redid both bathrooms in the house. At the same time Julie started packing some of Sam's things, but at first she could not pack everything away. She asked the girls if there was anything they wanted. Then when winter approached, Julie took over the rest of the closet, putting Sam's clothes in plastic box containers in her bedroom. She plans to clean out the garage and put Sam's belongings out there for "safe keeping."

In the interim, Julie's boss suggested she go back to school. One day she handed her the campus newspaper and circled an article about Japanese being offered at the baccalaureate level. She wrote a note to Julie on the newspaper: "Go back to school and get a second degree." Since Julie had always wanted to study Japanese and her boss gave her permission to take classes while working, she enrolled.

Julie's eldest daughter migrated between living at home and with friends. Julie continued counseling and with Martha she often has had to practice "tough love." With her younger daughter Grace she has tried to provide a safe environment. They have taken trips together and have discussed her future educational plans.

In her fourth year of widowhood, Julie started to rethink what used to make her happy before she met her husband. They liked sports, especially soccer, tennis, and golf. Today, in the fifth year since Sam's death, Julie tries to fit in some

activities. Tennis and golf are favorite pastimes as is going out with friends. Monthly she treats herself to a massage. At the beginning of her fourth year, Julie met a gentleman whom she saw on weekends for about three months until her youngest daughter objected to her even thinking about going out. As the fourth year ended, Julie realized:

My kids are older and are never at home anymore. What am I doing sitting home all the time? I can't ask my friends every weekend if they want to go out. So I decided to go with my friend again; however, this time I go out with him as a friend because I told him I can't think of him in any romantic sense.

Julie still talks to her deceased husband whenever she visits his grave, brings flowers home or offers incense at her home altar. Her conversations with Sam have decreased as her other activities have increased, and her priorities have changed.

As the school year drew to a close, Julie came to talk to me again. This time when she entered my office she gave me a hug. I was surprised by her demonstration of affection, by the sparkle in her eyes. She politely thanked me for meeting with her again. First, she shared she had gone back to counseling as a result of our conversation. She explained she had never talked to anyone before about being a widow in the way that we had.

I have never really discussed it. I've been in counseling, but every time I was asked to talk about my husband I would say that I wasn't ready. I always avoided it, and I know that I have talked to several of my friends about it. I don't think I've really answered questions about it like I have here. I know

that after the experience I thought it was a lot more difficult than I had expected. In fact, that weekend I went to Los Angeles to visit a couple of friends and to have a good time. We went to a craft show and on the way stopped at a cemetery to visit a friend's grave who had recently passed away. I think in addition to the interview and visiting her that weekend, I actually had chest pains and it affected me physically. I think that helped because I decided to go back to counseling to talk about my husband. I didn't want to feel that way anymore.

I asked her if she went to see a doctor for her chest pains and she answered "no, they were the result of a panic attack." Counseling has helped her with those, too.

I smiled at Julie and complimented her on the gift she has given herself--the gift of healing. I asked her if it was difficult to see me today. She explained, "It's still difficult, not because of us. It's definitely the subject."

Even though it is a difficult subject for Julie, she moves forward. She shared that her relationship with her daughters has also improved. "Martha talks to me more, and as a parent I'm able to stand my ground a little better. I've learned some parenting skills and I think she respects me more. But I think that also has a lot to do with her maturing."

Julie brought me a gift, a xerox black and white drawing of a butterfly emerging from the chrysalis. She describes herself as the cocoon. She is unsure whether or not she is ready to emerge.

I'm like the cocoon. It's where I was before my husband died and I felt like I was in a safe cocoon. My life was protected, and then when he died it was time to come out, and the coming out period is since my husband died up to now. I am out, but as you see the butterfly is still on the leaf of the plant and it has not flown off yet. I'm not quite sure whether I want to fly off. I think I might be ready.

Julie has planned a vacation to go to Japan alone. She is not sure where she is going to go when she emerges from the chrysalis. For the time being the cocoon is "just home base" until she knows where to fly. She is excited about her travel plans. Her daughters will be cared for while she is gone. She said she would send me a postcard from Japan. "Perhaps I will be a butterfly when I return." We hug goodbye, and as she leaves my office Julie turned and said, "I think this is something good you're doing because it would probably be very helpful to other widows."

My heart stands still. I can hear my breathing as I nod in acceptance.

### Chloe

Chloe will be 66 years old in April. She is a striking woman--tall, with high cheek bones, and blond hair. She carries herself with the runway erectness of the model she might have been. Chloe was 27 when Steve died. Their children were 1, 6, and 8. Though the years are many, Chloe is still able to conjure her memories to life "like it was yesterday, absolutely yesterday."

We sat together in Chloe's home. It was an architectural delight of white washed, warm earthtones glistening out to the blue sea. In her living room we were

surrounded by soft orchid plants, leopard print chairs, and a white chaise lounge big enough for both of us to comfortably rest on. Two beautiful black children, one perched proudly on a horse, the other standing by her side, gaze at us from the life-size oil painting which looms above the fireplace. Her home is exotic, mysterious, intriguingly magnificent. Everything has an ease about it. A gentle juxtaposition of form and color underlines the tension of the room. Only an award-winning designer such as Chloe could create such symmetry.

Chloe was in high school, Steve was a college freshman, a budding football star when they met. Chloe was engaged at 17. They were going to wait a while before they got married, however the "war pushed things up a bit." They had a big church wedding when Chloe was 18. Steve went overseas and their first daughter was born.

A month after Steve returned home, he complained of being tired. He entered the Veterans Administration hospital. His diagnosis was "aplastic anemia." The doctors told Chloe, "he's going to die." Chloe left the hospital. She had to drive home by herself. She was hysterical. She wondered, "How does your brain deal with this information, especially since the doctors told her not to tell him?"

Chloe did not tell anyone. "I was almost afraid if I repeated it, it would happen." For the next seven years life became a series of hospitalizations. Steve would go into the hospital, he would get transfusions, and when he was well enough he would come home. Then he would go back to the hospital, they would give him another transfusion, and he would go back home. During that time he tried to work.

He held different jobs that did not take too many physical skills. He umpired Little League games or he would chauffeur a local city councilman. But once again "he would become dreadfully ill, his gums would bleed, and he would get a violent reaction from the transfusions. He would get sores on his back." During this time he went to all sorts of doctors—"herb doctors, healing doctors, you name it we did it." About four years into his disease, Chloe had a personal doctor who suggested cobalt treatment, which was new at the time. Without the consent of his doctors they experimented with cobalt. The treatments helped for a while. In the interim Chloe gave birth to their second daughter, got pregnant again, and miscarried. She was motivated to have children. "I had a very big need . . . to complete my dream of being a cheery housewife with three children."

Chloe's dream was sidetracked. She and Steve did not have sex for the next three years. He became impotent. Chloe, however, wanted her third child so the doctors gave Steve hormones. Because of the injections they had a son; however, shortly after Chloe became pregnant Steve had to have his spleen removed. The hormone replacement therapy was stopped. Chloe and Steve's sex life ended.

Chloe shut herself away from the world. She hardly read the newspaper. She was consumed with the illness, with trying to regain health again. She did not acknowledge the fact that he was going to die because "he would almost die and then he wouldn't die. They would lug him up to the green room in the hospital and then they would take him out, and oh, my God, you're alive." After going through that several times she would trick herself into thinking, it is probably not going to happen.



Looking back, Chloe believes she was frozen in time, as if she were on some sort of drug. "Mentally I was 18, even though seven years had passed. I did not mature as a person." Furthermore, Chloe was embarrassed to have her "young, beautiful husband who looked fairly healthy to most people not able to do what their friends were doing." Ashamed because her husband was ill, Chloe lived in denial, isolation, and terror. When Steve finally died shortly before their son's first birthday, Chloe was unprepared. She thought his death "was a trick." He said he was not going to die and Chloe believed him.

Steve's death was Chloe's downfall. She neither understood his death nor knew how to deal with it. She just knew she was supposed to get through it. She had no one to turn to, to talk to. Her mother, a widow herself, was emotionally unavailable. Chloe's life was too close to her mother's life. To explain, Chloe had been brought up in the shadow of her father's untimely death. She was a 4-year-old when her father died in a car accident. Her mother never discussed him. "His name was never mentioned in our home. It was tragic. She couldn't talk about it." If that had not been terrifying enough for young Chloe, when she was 13 her "handsome, wonderful, 24-year-old brother, a professional photographer, died from asphyxiation, a carbon monoxide leak in the heater." Chloe did not know how to talk about his death. My girlfriend and I just laid on the bed and started laughing when they told me, and after that we hardly discussed it."

Chloe felt responsible for Steve's death as all the men in her life died.

"Because my father died and he was a man in my life, and then my brother died and

he was a man in my life, so, of course, my husband was going to die because he was a man in my life." I knew all too well how Chloe felt since those same paradoxical distortions had once clouded my mind as I used childlike magical thinking to explain the death of my father and my husband.

Thus, when Steve died Chloe took all of his pictures out of the house. She changed the bedrooms around, moving her daughters into her room and she into their room. She did not discuss Steve with the children. "It hurt too much."

Chloe hated Steve's funeral. She hated the flowers. She was angry. She wanted to slap everybody who was there. She has a photographic memory of that day. She remembers what everyone was wearing. "It felt like millions of people were there and I didn't feel it was me there. I felt like another person." Her disassociation is consistent with her sorrow, rage, denial, and the magnitude of her loss.

Most of all, Chloe felt part of her was gone. Steve had a special magnetism about him. He was outgoing and friendly. Together they had been an "inventive pair." While most of Steve's friends had done well, money was tough for them. Chloe would take in ironing and sew for people. Steve's veteran pension plus odd jobs held them. Their home always looked pretty. Chloe never felt poor, never felt deprived because at the time they were together and "that was all that was really important to me." In his death she was bewildered. Like the child who wonders if they have done something to cast all this misfortune upon themselves, Chloe, with childish confusion, faced the world alone.

The first year after Steve died, Chloe stayed at home and "lived off the meager money the government gave me." Chloe also had a \$10,000 life insurance policy which she thought was a lot of money. "I bought a new wardrobe and decided I had better go to work." Since Chloe could not type, she figured she could be a designer. She took classes and started working five hours a day. "In those days," she said, "women designers weren't accepted a lot. It was a man's world." Chloe, however, liked design and it was something she could do easily. She had a knack for making houses beautiful. "It wasn't easy. First I started working the floor and then they let me go to people's homes. I had to work weekends and nights." She had no choice, as she puts it. She started one step at a time. She needed to survive, to care for her children. Describing herself Chloe said, "I think I'm a doer. I'd rather do something than to think about it. I am a survivor. You have no choice. You just do it!"

Immediately following Steve's death, Chloe experienced lots of "crazy emotions." Out of the blue she thought "she wanted to have sex with her neighbor." That thought really scared her. I explained sexual thoughts are not uncommon. I shared with her that at my husband's funeral I turned to our 6'2" neighbor (I am only 5'1") and blurted out, "I could never have sex with you, you're too tall!" The moment I said that I looked around the cemetery and wondered where in the world that piece of nonsense came from." At that moment I was clueless! Chloe and I both laughed as tears began to cover our brilliant blue eyes. We agreed our fear of never

being intimate with anyone again, the pain of our loss, and the surreal surroundings of cemeteries and funerals facilitated these bizarre and utterly harmless hallucinations.

Being a young, attractive widow was not advantageous for Chloe. "Men came on to me, even my girlfriend's father. It was just terrifying because I didn't know how to handle it." For about the first two years, Chloe had a real problem when male friends came to the house to take the kids out. Invariably they would "try to put me in a corner." Steve had been her first relationship, so learning how to deal with men in an intelligent way, learning how to push them away or learning courtship was a challenge.

Neighbors in the meantime were very supportive. They were kind in a nonsolicitous way, which Chloe totally appreciated. Her in-laws were not helpful. "They were totally out there. They just wanted to look at the kids once in a while, but they were more annoying than anything." Steve's older brother showed up and "he and the wife wanted everything. They started grubbing around. I was unable to muster the energy to stop them. They took Steve's clothes." Seeing Steve's brother in his clothes made Chloe uncomfortable. "I'd see his brother with my husband's clothes on and that was creepy. I wished he wouldn't wear them." Chloe distanced herself from Steve's family.

Chloe's older sister and brother-in-law were steadfast, giving emotional support throughout the years. They were close knit and always celebrated the holidays together. When possible they travelled together. "My brother-in-law was a loving uncle and he was really good for the kids."

Religion has not played a part in Chloe's life. "I am irritated with the God who took my husband." She remembered going to a Pentecostal faith healing church with Steve when he got really sick. They went there for about four years. Steve really liked it.

We were good Christians and we did everything we were supposed to do.

They kept trying to make him think he was going to get well. It was like just pray and you're going to get well. So we did all that and it didn't work.

After that Chloe did not go to church again, even though she considers herself a spiritual person, a person who has a total appreciation of nature, of life, of God, of Jesus Christ. Church, however, was not the place for her, at least not a church that has a God who would make Steve suffer for so long or lie to him about his prospects for living. That God and that church made Chloe mad.

Chloe does believe in the spirit world and Steve's presence has followed her through the years. In the beginning he was always present. "If I laid down at night, he would be there. Sometimes I would tell him to go away. At first his presence was good but then it became scary. He wouldn't go away. It drove me crazy." For most of her life it was difficult for Chloe to revisit him, mentally or emotionally. It was easier for her to chase him away as she felt he had a stranglehold on her. In fact she moved out of their home to a new city some twelve years ago after his death not so her daughter could go to college in their new hometown but also to get rid of his presence. Chloe has even used hypnosis to get rid of Steve's presence. Through this

medium she has tried to say goodbye. However, to this day Chloe is able to conjure up Steve's presence.

Part of Chloe's torment has had to do with the distortions she has carried with her for many years. Acting as her own judge and jury, Chloe believed she was the sole cause of his death. She thought if she had not married Steve he would not have been drafted, been exposed to chemical warfare, gotten aplastic anemia, and died. Her childlike omnipotence and unconscious guilt hounded her with the precision of a finely sharpened blade tearing away at her heart. Only in her sixties does she sometimes not always acknowledge the lunacy of this type of thinking.

Her idealized vision of love overshadowed relationships she had with other men. Chloe and Steve's love had been "idyllic and pure." She hung onto that dream, the dream of Camelot. Today she acknowledged if Steve had lived, their life together might not have been perfect. "Maybe it would have gotten crazy. Everyone else's life gets all crazy."

According to Chloe, Steve's absence made it difficult for her to raise three children. Her feelings toward her children were mixed. She remembered that when Steve was dying she prayed that God would take all her children instead of him. But the bargain did not work and she was left with them. Because her young son looks so much like Steve, she has ambivalent feelings toward him. "I wanted to hold on to him and never let him go." Those emotions, while not of a sexual nature, scared her. And while she was there for him and took care of him, it was sometimes hard to be with

him because he looked so much like his father. The girls wept on their own. "I was there and not there for them."

From Chloe's vantage point, each of her children have reacted differently to their father's death. Chloe thinks as a parent she was overprotective. While she dated she never remarried. "I didn't want anybody in the house with the children. I was afraid they would molest them or something." She felt responsible for her children and did not want someone saying, "take your feet off the sofa or yell at them." Chloe wonders if the children would have been better off if she had remarried.

It would have been better for them if I had gotten married to the right person and they had a father figure. It would have been a lot easier for them to relate to men. The girls aren't really good in relationships. Lisa has never married, even though she has had a child, and Judi is married to a cruddy, old thing.

Her children have told her that their father's death "screwed up their lives totally." Chloe neither agrees nor disagrees with their statement. She said, "what was, was, and what is, is." About eight years later they revolted "and wanted to learn more about their father. I obliged and dragged out old letters and photographs for them to linger over." Three years ago she hosted a family reunion. Steve's mother and siblings came. For Chloe "the event hurt but it was a lot easier this time around." Today her children are in their late thirties and early forties. Each in their own way must come to terms with their past and their present.

Having Chloe as a mother must have taught her children to be gutsy and caring for Chloe has both attributes. She was gutsy enough to launch herself in a

successful career as an interior designer when men dominated the field. She was ever so caring, so thoughtful of their needs. So that she would not jeopardize their college tuition, Chloe worked at a furniture store until the last child graduated. She has managed to pay for three college tuitions, at least one master's degree, and helped with other financial matters. At 50 years of age she was gutsy enough to leave the furniture store and strike out on her own--Chloe Design Interiors, A.S.I.D. She did so knowing she was not afraid of having security. Chloe knows she can make it. "I've never really had a salary. I've always had to work on commission. Nobody gives me a check. So when times are bad they're bad, and when they're good, they're good." Today Chloe enjoys a higher upscale clientele. "My work is better. It's always changing."

Friends are important to her. Whether married or single she always welcomes them. She knows how to have fun. A superb party giver Chloe loves the holiday season. To be on the guest list of her "Make Your Own Gourmet Pizza Party" is one of the highlights of the coastal season.

Chloe experiences everything to the fullest extent possible. She likes to feel things. She is tactile. "The experience itself, whatever it may be, makes me feel more alive." She shared, "I didn't mind experiencing poverty. I didn't mind experiencing money. Just experiencing things makes me feel more alive. I will create a situation sometimes just so I have the experience of being inside of it." Chloe has been inside the experience of death as much as she has relished the experience of life.



Last week Chloe and her son were in Costa Rica. They decided to take a different type of vacation and stayed in an undeveloped, rain-soaked tropical village. "Bats flew all around. I was terrified and exhilarated as we slept in an outdoor hut." Even though the adventure was frightening, she is glad she went. Today as we sat in her sun drenched home, she wondered where she will go next or with whom.

Occasionally Chloe's bed has been filled with another man. She has had three "long-term lovers since Steve's death." Tonight, however, her bed is empty of men. The right side is cluttered with pillows, fabrics, and magazines. The other side awaits her. Chloe realized she has always slept on half a bed, the other half has been occupied by Steve, by children, three lovers, or assorted paraphernalia. Her bed has never been empty. I shared she is not alone.

Even though Chloe does not see herself as an advice giver, she does want others to know "death is a God-awful period. Suddenly you are terrified. You have all sorts of stupid forms to fill out and you feel all alone." Chloe wishes she had had someone to talk to and who would talk with her. "If someone had talked to me, I guess I would have listened to somebody who understood." Moreover, she wants other young widows to know, "whatever you're feeling, that's okay. If you want to stay home and cry, that's okay. Just take care of yourself." Chloe and I laugh. Chloe thinks counselors can benefit from her recommendations. I nod in agreement.

Chloe is incredibly honest. She told me she hated our interview. She hated Steve's death. She hated stirring up the past. She hated bad dreams. She hated losing out on being the cheery housewife. As a young widow she hated seeing other couples

argue over trivial things. "Don't they realize they have each other?" She hated how she felt with a new guy. Chloe also said, "It's nice to talk. I've never done this discussion before. Yes, it does make me feel good, and it feels like I can share with someone else. Who knows, what I say might be interesting."

### Helen

Helen was widowed at the age of 46. Her husband of 25 years died of a heart attack while playing golf. An Hispanic woman with three children, she is employed as a health educator.

Sunday, April 21, 1985. The date is eternally engraved on Helen's heart. This is the day her husband died. Manny had been playing golf with his brothers when he suffered a fatal heart attack. Today, 13 years later, we sat in her neatly cluttered office peppered with posters celebrating Hispanic women. Helen revisited that day.

I was in bed because on Sundays I slept in, and when he'd come back from playing golf we would all go out to breakfast or fix a big breakfast at home. . . . I was a stay-at-home Mom and I was very comfortable. I thought I had my whole future planned out for me. I was happy. Financially we were comfortable . . . and then the phone rang.

I can hear the phone ringing and the rush of adrenalin surging through Helen's body as she heard her brother-in-law's voice on the other end. Speaking in their rapid Spanish language, he told her to come quickly, but quickly was not quick enough. Despite all the life rescuing techniques, Manny could not be saved. In less time than

it takes to complete a round of golf, Helen was widowed with three children, ages 18, 16, and 8.

In retrospect, Helen has questioned whether she should have been more vigilant about Manny's health. Less than two months before he passed an insurance physical. Despite his history of high cholesterol, hypertension, and heavy smoking, he was not taking any prescription medications. Helen thought "everything was fine."

The evening before he died they had attended a wedding, replete with rich food and drinks. Manny complained of an "acid stomach." Neither of them paid much attention to his complaint because "he had been on Tums for many months." With a faraway gaze in her eyes, Helen commented, "In retrospect I should have known better."

I told Helen there was probably no way she could have known. I wanted to comfort her as much as I wanted to comfort myself. A boundary crosser, I left my role as researcher and told her my husband also died of a heart attack. I, too, will never forget that day. I shared that my husband had also spent most of the weekend complaining about a stomachache which we also attributed to rich foods. I had no idea he would have a heart attack, and to this day I do not think I would have had a clue that he would die the next day.

Helen seemed relieved. She smiled as she wiped her tears. She recounted how her life had changed dramatically since that sleepy Sunday in 1985. Manny had been her childhood sweetheart. They met in high school, dated, and married much to his mother's displeasure. Helen said, "my mother-in-law disliked her from day one."

Helen was a Baptist and Manny was Catholic. She heard that "his mother never liked her because she was not of the Catholic religion." Their three children went to Christian schools. The difference in religious orientation caused a rift between Helen and her mother-in-law which spanned her 25 years of marriage, tempered for a short while when she nursed her through several operations.

Upon Manny's death a war erupted. Helen felt dazed, and like many other women who experience the death of a spouse she felt numb. In a state of shock she did not worry about finances. Manny had always taken good care of them, and she expected his family would continue that pattern. She took her children on vacation to Hawaii. Each were allowed to take a friend. She felt "it was something they needed to do, to have fun again." I felt a chill run through my body as I remembered doing the same thing. For Helen, the vacation "was like old times when my husband used to take us." Hawaii proved to be the last vacation she would take for many years. When she returned she found herself caught up in a series of family battles which would end in court. Helen stated, "I fight for what I want, what I believe to be right. I fight for my children," and fight she did.

Financially, Manny and his brother were business partners. They owned an electrical heating and air conditioning company and several real estate holdings. About a year before his death, the two brothers decided to increase their life insurance to more adequately reflect the growth of their company. Her first skirmish centered on Manny's insurance money. To get her money Helen had to go to court. "The ordeal was very frustrating, and the lawyer who worked on contingency took a

big chunk." During this time, Helen's brother-in-law offered her family no financial help. In fact he complicated matters by refusing to buy her out of the company. He insisted that the insurance policy she had was a buy-out policy and asserted he owed her nothing. Helen, however, recalled their financial arrangement quite differently. "I remember time after time my husband would tell me that his business and other investments would be our retirement." Hence, the second court battle centered on her rights as a partner in the business. She was successful with this litigation. The third and final trip to court concerned real estate holdings. While she won again, "it was a major court battle that really impacted our family. It came to the point where my husband's family no longer acknowledged us. That was very traumatic for the whole family." Thus, when her mother-in-law passed away, there was no mention in her obituary of Helen or her children. While that had been painful for her, Helen is proud of her actions. She believes "this is what my husband would have wanted as this is what he told me, and this was the right thing to do as far as I was concerned."

While Helen was used to paying family bills, she certainly was not well versed in mutual funds. She took courses at the local university, and like a lot of other San Diegans invested part of her monies with Pioneer Bank. "For five years I got money and everything went fine, then the firm went bankrupt. Like many others, Helen lost her entire investment.

During the years Helen was preoccupied with her family's financial survival, her children, each in their own way, were grieving the death of their father. Concha, a freshman in college, transferred home as she did not want her mother to be home

alone with her two brothers. "Concha had wanted to be a doctor but the funds weren't there to do that. She had been close to her uncle and grandparents, and it was hard to sever relationships with them, to think they did not care."

Manny, Jr., has never recovered from his father's death. "His whole personality changed. He became introverted. He got to the point where he did not want to do anything with us as a family. He spent a lot of time in his room by himself and he drank." Helen thought he acted as if his life had come to a stop. There was no further development. His uncle fired him from the company. Since then he has gone to security guard school and has held odd jobs. Helen remembers about five years after Manny died she and Manny, Jr., had a huge fight. This was the first time he was able to cry over his loss. "Only in the past few years has he been able to talk about his father's death or visit the cemetery." He is 31 years old and still lives at home. A counselor recommended she ask him to leave. Helen said, "I would rather have him at home than out somewhere else and put himself or others at risk." She shook her head, covered her eyes, and wondered if her eldest son would be like this if his father had not died.

She turned away in thought, then began to discuss her youngest son Greg. He was 8 years old when Manny died. About two years after her husband's death, Greg went through a stage where he would not let Helen out of his sight. At 10 years of age he was afraid to be alone. He developed stomachaches. They went to family counseling. She learned Greg's behavior was normal. The counselor explained, "his father died suddenly . . . and he is afraid you will die too." Again, I shared that the

same thing happened to my children upon my husband's death and myself as the 8-year-old child experiencing the sudden death of my father.

Simultaneously, Helen remembered how difficult it was for her to acknowledge her husband's death.

At first I thought it's almost like he was on a trip because he used to travel sometimes. . . . It's so ironic. I have dreamed of him three times where the dream has been so real that I woke up and my heart was pounding, and the three times it's like he's gone away and he won't come back. He doesn't want to come back.

This afternoon Helen knows he is gone, and even though she sometimes thinks about what he looks like and remembers the touch of his hand, she has moved forward and she has changed. "I know I am a stronger person because when I first came home from the hospital I asked myself what was I going to do now. I couldn't imagine having to face the world by myself. . . . And here I am 13 years later."

God has given Helen tremendous strength. Her sister and friends have been a pillar of support for her. They always include her in their family plans. They have listened to her while she "talked their heads off, oftentimes not making any sense."

Today Helen works as a health educator and loves her job. It is one of the few places where she enjoys privacy, as she shares her bedroom with her 84-year-old mother who is ill. Helen explained that her mother would never understand our interview. That is why we met in her office. Helen has no regrets. She is "proud" of herself. She is a strong woman. She has fought the best she knew how for her

children. Today her daughter is in her thirties. Concha owns her own home, works for the government, and is a first-year law student. Manny, Jr., lives at home and contributes money through odd jobs as does Greg who is a freshman in a community college. Together each in their own way support one another.

Now in her fifties, Helen recollected she has always been assertive. In high school she wanted to be a nurse, "but in those days if you were Hispanic, you were usually encouraged to go into clerical or homemaking. I didn't want either of them." Despite the school counselor's protestations, she pursued biology and chemistry. "I pursued what I wanted. I guess looking back at that it's in me. Becoming a widow has brought that out more, but very definitely, I fight for what I want."

There is not much privacy at home for Helen so at times she escapes on the weekend with a male friend. He has been part of her life for the past 10 years. While they were lovers for 5 years, today they are just good friends. They go out for coffee, to the movies, and out to dinner. His home is a "safe place" for her to go to escape the pressures of home. "When I go to his home, I get waited on. I feel special."

Helen is a very special, open woman. She commented on our interview:

I'm surprised. I didn't realize I would be emotional. It's been 13 years. I thought I was past the stage of getting emotional, talking and remembering things. But as you know, there is still a lot of emotion. That's not bad, it just is.

More importantly, as an Hispanic woman Helen wants other women to know that this has been a "comfortable, healing experience for her."



I've heard it mentioned before that some things are even more difficult for Hispanics because we don't normally divulge our private lives, and it's like a sign of weakness to admit it. But I don't think so. I've always felt like if I need to talk about something or I have a concern, I'll just go to my friends. I have felt very comfortable talking to you. Maybe it's because I know you've been through the same thing.

### Barbara

Barbara was widowed at the age of 48 with two children 16 and 18 years of age. Her husband of 25 years was killed in an automobile accident. She is a successful businesswoman, the owner of one of the finest women's specialty shops in the area. Today, Barbara is 73 years old and one of the most elegant women I have ever seen. Few know Barbara as a widow. She is an extremely private person.

For this interview, Barbara and I met at her shop after hours, and the lights of the exclusive mall shimmered in the evening light. We sat comfortably as if we were at home. Named for her husband, "Art's Place" was destined to bring Barbara only good fortune. Antique furnishings wrapped around us with the lightness of ribbons flowing from a Maypole. Elegant attire blended into the background firm in conviction, impeccable in style. A sweet, melodious tune played in the background.

Barbara and Art had all the trappings of a storybook romance. She was valedictorian of her high school class and he was the all star athlete. Both were awarded college scholarships--she for leadership and Art for basketball.

In the 1940s their world was bright. They were young, energetic, and enthusiastic. They would have it all. Even the war which played havoc with their education did not affect them. After a tour of duty with the Navy, Art returned to college and earned a teaching credential. Art found a teaching position, Barbara worked at odd jobs, and on the side they built and sold houses. They were married for 10 years before they started having a family. Barbara worked with the exception of the children's first nine years before her children started school. When Chris went off to kindergarten, Barbara joined the Counseling Department of a local high school. She worked as a college specialist, writing recommendation letters for seniors applying to colleges, and administering college board examinations. She enjoyed her work and they were happy. They enjoyed a made-for-TV kind of life. Their relationship was good and as she said, "we had a great thing going."

Catching their parents kissing in the kitchen is one of the fondest memories her children have. Barbara and Art worked as a team; she would make dinner and he would do the dishes. Barbara was never allowed to scrub a floor because Art never wanted to see her on her knees. She took care of the house and he took care of the yard. They both worked at high school football games. They both attended their son's tennis matches.

Financially, life was hard. They had a daughter in college and a senior in high school. They took on odd jobs like "doing testing on Saturday and football games." Art worked at the racetrack at night and taught school during the day. "We were

really busy and working too hard. But that is the nature of the game when you are raising a family."

Art enjoyed his work at the track as a parimutuel clerk. Other teachers had the same job. There was nothing unusual or out of the ordinary the evening he went to work. Usually he arrived home around midnight. If it was a foggy night, he would spend the night at his mother's house. Barbara had no worries. Ordinarily she would be in bed when he arrived home; however, this night for some reason she was waiting for him to come home. Dozing on the sofa she wondered what was keeping him. She was sure he had a good explanation. The doorbell rang and she thought, "Oh, my God," and standing at the door was her next door neighbor who happened to be a policeman. Seeing him in uniform startled her. She asked, "What's wrong?" He said, "There's been an accident." I was in shock and asked, "Is he alright?" He said, "No, he's not," and went to catch me. He thought I was going to fall.

Art's car had gone over an embankment and skidded the length of a football field. To this day his death remains a mystery. There were no mechanical problems. Barbara had a cousin who was an attorney. He had the car examined and they took photographs. In the end "there was nothing anyone could put a finger on and I learned it was an act of God. He was gone and that was it." It was hard for Barbara to accept because she is the type of person who wants answers and in Art's death there were none. She remembered her son saying, "Mom, I just think there are some things we're not supposed to know." Barbara said, "Well, I guess we've probed enough."

Art's funeral was enormous. "He was a very loved person." An elementary schoolteacher, children filled the chapel. There were hundreds of people who attended the service. "Flowers were everywhere. They couldn't put anymore up there. They just piled them on the floor. It was incredible. We were really grateful for that, for his memory."

Art's death was hard for their daughter. Alice, a college freshman, did not want to see the car. She never wanted to go back to the cemetery. She said, "That's not what I want to remember. I want to remember dad the way he was. Barbara told her, "Great. We all do it our own way, honey, and there are no rules that say you have to do anything. You do what's best for you, and I'll do what's best for me and your brother." Barbara's relationships with the fellows with whom Art graduated and who were in the service together remain close friends. Some 23 years later, Barbara still sees them. "We still get together on holidays. I have never been left out because I was a widow, none of that at all with any of my friends." That part of Barbara's life has been solid and comforting.

Barbara's in-laws were her greatest disappointment. They did nothing to help her through Art's death and offered no financial support. "Nobody came forth and said here's a dollar bill, and that's okay." Consequently, she severed the relationship. She told her children her decision was not to have an effect on them. "I gave them permission to stay in contact as it has nothing to do with me."

"At that time Art's dad had passed away and his mother was getting up in years. His sister and brother were a complete wash out." Looking back, Barbara

thinks their inaction may have been based on ignorance. They did not know what to do, so they did nothing. Looking inward, Barbara thought she was unapproachable.

I think maybe I was proud and they didn't feel comfortable making the offer. I don't know. I have to take some of the blame because I'm independent. My mother had remarried and she was, God bless her, kind of weak in that area. I knew she was there.

As Barbara shared with me, my mind floated back to severed relationship with my in-laws and my mother's self-absorption. I nodded in tacit agreement.

Barbara's strength came from her confidence in herself and her commitment to her children. She would always be there for them and they for her. Art's death certainly made the three of them closer. She continued to work at the high school and at a local clothing store. She needed to keep busy. "Work was my salvation. I liked to work and it was good therapy for me. It kept me from thinking about myself and all my problems."

About a year after Art was gone, Barbara experienced a visitation.

I was in bed and it was toward early morning. I never heard him speak, but it was like angels were bringing him to me. I said, "Art, you're here," and then it just left me, and when I woke up in the morning my daughter was there. I said, "You won't believe what I'm going to tell you," and she said, "Oh Mom, that's called a visitation. It was wonderful you had that."

Barbara never had an experience like that again. It was very real and for her a closure.

Financially Barbara's life was not good. Art's pension, retirement, and stocks were not enough to ensure the children's college education. Their home was her main financial stake. She wondered whether to stay and work at the high school the rest of her life or do something different. Not interested in remarrying she thought, "I'm still a young woman. I really should get out and do something with my life."

Barbara had a friend who owned a mobile home on the coast, and on weekends she would come and visit. Both were beach bums, they loved the water and sand. After a pleasant day at the beach they would visit a new exclusive shopping mall for ice cream and look around. There was a vacancy downstairs. Barbara's friend said to her, "Why don't you open a dress shop? You've always been good with clothes. It's a fun thing for you and everyone is always asking you to go shopping with them." Barbara answered, "I've never done that before." Her friend urged her to call about the vacancy, and that is how her new life began. Barbara called, the space was for rent, and she talked it over with her children. They said, "Go for it, Mom. You'll be great. Put a sign on the house." But before Barbara had time to put a for sale sign on her home, she discovered somebody had left her a note on the back gate. "Don't sell this house to anybody else. We want it!" For Barbara it was an omen, the right thing to do.

So off Barbara went two years after Art's death to live and work in a new town. Coming down south was hard for her. She was not used to the beach garb and the cut-off jeans. She had a lot to learn. She was not particularly interested in making friends. She wanted to provide a living for herself and to pay for her children's

college education. It was a very exciting time. After securing the retail store she hired a contractor, fitted the store the way she wanted, got resale numbers, all the licenses, went to the bank, set up the proper papers, went to the Mart and started to buy. At times she could not believe she was doing this. She received lots of encouragement from her children. The time was ripe for what she had to offer. She opened "Art's Place" in the boom of the preppy era when everybody was wearing button-down shirts, cord pants, Bermuda shorts, and classic Navy blue blazers. She provided clothes from the waist up—sweaters, jackets, belts, scarves, and so forth. Barbara was friendly, helpful, had good wares, made her customers feel welcome, and was impeccably honest. Within three years her "people" were asking her to enlarge her inventory. They wanted more than just the waist up. They wanted a total look.

Because of the store's location and the clothes she carried, Barbara was developing an affluent clientele. Located in one of the richest zip codes in the world, "I had people who came into the store who had retired from the Midwest and New York who really knew good style." She decided to take another risk and when 2,700 square feet of space became available, she signed on. She had been in business for three years. "Ignorance was bliss. I did no market research. I would come up and sit in the middle of this thing. What am I going to do with all this space?" Barbara made sketches, got ideas, and as she said, "lucked out." She had an easy time getting a talented construction crew as there was a strike going on. Men would work under the table and the crew was great. "Together we did it, one day at a time." Together they transformed what once was a backpack store into a place which welcomes you as soon

as you walk under the hunter green canopy and through the leaded glass doors. Art's Place is the type of shop which feels familiar to everyone. Maybe their home is furnished like this or their folks' home. Perhaps they have visited someone else's home or visited it through a magazine. It is the kind of place men understand and feel welcome in. There are large, overstuffed chairs, a decanter of brandy, magazines for men to peruse while their wives shop. "Men feel very much at home here. They understand our kind of clothes. There isn't a funny looking dress up there." The environment goes with the inventory. It is the kind of place Martha Stewart might be envious of or Town and Country magazine would feature. In fact, the other day when I visited the shop there was a pinstriped suited lawyer with his Newfound pup at his side, sniffing brandy while his wife was busily engaged in picking out this season's wardrobe. Barbara explained:

I really do have lots of people who do their wardrobes here. They come in for the season and I'm supposed to dress them. It's very complimentary. It puts a lot of trust in me and that's very rewarding. It's lots of fun, especially if they give me free rein.

Part of Barbara's success comes from her honesty. She does not let people leave her shop looking bad. She would rather they not buy something than leave wearing something that is not flattering. If a customer puts on something that is not quite right she will tell them, "I think we can do better than that." Barbara has tried to be sincere with her clients and through the years it has paid off. Clients will say, "I know you will tell me if it doesn't look good, and I'll say, yes, I will."



Her self-confidence and ease has rubbed off on her children as well. As a family they have always been able to talk about their dad. They have never shut out that part of their lives. "It's very much an open book and we enjoy talking about Art." Now grown with a family of her own, Barbara thinks her daughter was more solid than her son who was a senior in high school when Art died. Chris had a couple of wild college years, gave up a tennis scholarship, dropped out, lived with his buddies on the beach, and finally went back to a state university. "As a new graduate he worked as a sales rep, made big bucks, drove a Porche, and then decided money was not important." He went back to graduate school and decided he did not want to spend the rest of his life worrying whether he would "publish or perish," so he went off to Europe. There he found a job with Nike, met a beautiful Catalonian girl and they married. Currently he is vying for a professorship at the University of Barcelona. Barbara does not like to have him so far away because they were so close. However, she is pleased he has found someone with whom he wants to spend the rest of life.

Her daughter Alice lives two hours away in another beach community. She has a life of her own. She married a man who had three boys and together they have a daughter. Barbara is proud of how Alice has raised the children. Barbara feels like she has four grandchildren. She is extremely covetous of her children. Silver framed photos grace her desk and she beamed with pride.

Barbara does not travel. She likes her "creature comforts" and loves to work. She has a staff of four girls, a bookkeeper, and an accountant. She works eight to ten

hours a day, seven days a week. She does not have a designated day off. She has never dated or even gone out to dinner with another man and has never wanted to. She is an only child, and used to being alone, being content with herself. She does not need someone there every night to come home to. She misses Art terribly. Intimacy with another man is something Barbara can survive without. She still wears her wedding band. On these issues she defines herself as unique and does not necessarily advise widows to take the path she has chosen. Barbara does, however, advise other young widows to "go out, make a life for yourself. Date and get out there. This is what your spouses would want you to do anyway. They don't want you to suffer."

Barbara has filled her days and nights with Art's Place. Today, she is wealthier than she ever imagined or dreamed of. Whether she is re-covering Queen Anne chairs, plowing through fashion magazines, scouting the competition, shopping the Mart or discovering a new antique, her life is full. Good health has allowed her to keep up the pace. Barbara hopes and prays she stays healthy so she can "get up and hit the bricks every morning and still enjoy." She does not believe you can sell a business anymore. Art's Place will always be hers. Eventually the time will come "when I feel it's just too much of an effort, and that's when I'll close the doors and say sayonara. I hope it is not too soon. I hope I'm good for a few more years until they have to drag me out with my boots on." With Barbara's confidence, determination, and boundless spirit that day will not be soon.

Joan

Joan was 46 when her husband died of a heart attack. Her son Charles was 20. It is funny, but Joan never quite sees Mondays the same anymore. "It was Monday. I had no indication. I went to school thinking it was a sunny, beautiful Monday morning. Bill will be home in a week, and I was feeling really good. Everything was fine."

Joan had no indication representatives from the Navy were speaking with her principal while she was conducting an art lesson with her third graders. The principal did not want "these strangers" telling her. He made some excuse to get her out of the classroom. He had her good friend, the teacher next door, with him. The principal pulled Joan aside and said, "Bob's dead--heart I think."

Dumbfounded and dazed Joan stood in disbelief. Bob passed his physical less than a year ago. There was no reason to suspect heart disease. Mesmerized by this information, she spoke with the Navy representatives who confirmed Bob's death. Not knowing what else to do and not wanting to go home to an empty house, Joan stayed at school. She is sure the children spent most of the day in the classroom next door. Exact details are hard to remember, only a kaleidoscope of images permeate her memory.

The principal wanted to keep Bob's death a secret. "He didn't want anyone to know." Joan kept Bob's death inside, but news like that hardly ever stays inside and the school grapevine buzzed with the words "Bob's dead!" One of the staff's sister-in-law's children was in Joan's class. She became the towncrier sharing the news with

her classmates. One child asked Joan, "What's going on? Your face is turning red and white." Joan did not answer. She did not know how. The principal sent a note home to all the parents of children in Joan's classroom. Time took on a new dimension. Instead of being, "in Bob's time," time was now marked by "since or when Bob died."

Bob died in Sicily. He was a civilian employee of the Navy. He ran the commissioned officer's clubs. Joan had not seen him since June. He died December 5th at 11:11 p.m.. His funeral was held on December 13, the same day he was scheduled to return home.

Transporting the body from Sicily to San Diego was chaotic. The Navy made all the arrangements. Since neither Joan nor any other family member owned a passport, the Navy sent a representative to accompany his body. First, they sent his body to Germany where they kept it until they could catch a flight to the States. "It took a long time to bring the body home." In fact, when Joan's mother came for the funeral they lost her luggage, and her son Charles asked with childlike confusion, "What if they lose dad? What will happen?"

In the days which preceded the funeral, the family "had one big fat discussion after another." First, they argued over whether Bob should be cremated or buried. Joan thought cremation was a loving act; her in-laws disagreed. Charles was given charge of finding a suitable burial site. He found one by a lovely oak tree. He thought his dad would like the afternoon shade. He thought he had found the perfect spot. Later, his grandparents pointed out the errors of his ways. They thought it "odd"

Charles buried his father in a Catholic cemetery. "Masons are not usually buried that way," they said.

They blamed Charles for their son's death. "If only you hadn't demanded so much of his time. If only you hadn't caused so much trouble." They argued over how they were going to get to the cemetery. They could not agree on what type of limousine they would drive in. "They got so involved in how they were getting to the cemetery they didn't have time to focus on what they had to do when they got there." The cutting remarks reminded Joan of how Bob's family treated her when she and Bob first met. Joan was 23; Bob was 24. Joan was going to graduate school and teaching in Colorado. Bob's family had recently purchased a hotel/restaurant, motel, dining room lounge. Joan's sister worked as a waitress and Bob worked as the chef.

The first time Joan met Bob was at the grocery store. Her sister teased her and said his name was "Finwick Mackenfickle." Joan was instantly infatuated with "Finwick Mackenfickle." Their relationship escalated rapidly. By Christmas they were married. "Bob would joke and say we had 18 weeks of honeymoon before we eloped." Bob's parents were not endearing. His father, wanting to stir things up, said to Joan upon learning she had eloped with his son, "What a way of getting out of being an old maid schoolteacher." In retrospect, Joan sighed and said, "Twenty-three wasn't that old."

Joan and Bob's relationship was like a seesaw, rocking between good and bad times. Much was clouded by an alcoholic haze. Bob's job demanded mobility. They moved a lot and he was gone a lot. Maryland had been their last homestead before

moving west. Joan did not want to move. She did not want to lose her home, her friends, her comfort zone. She lied as she told Charles, "We will be happy in California." Bob would be the Director of all Marine Corps clubs, they would make friends, and have a new home.

Life, however, was "squirrely." People warned Joan she had better do something about Bob's drinking as it was getting him into trouble on his job. Charles mimicked his father's behavior. He began having problems even before they moved to San Diego. Though he completed junior high school in Maryland, Joan had a difficult time keeping him in school. First, he shoplifted a carton of cigarettes. He was arrested and sent to counseling. Then he was arrested at a drug bust at high school and was sent to drug treatment. Joan considered the arrest "a gift from God." Joan went to Alanon to learn how to cope. Before being sent to Italy, Bob went off to the Philippines to dry out, and it looked like recovery was a way of life. Joan also decided not to drink.

Joan stopped drinking with them for several reasons, "so I wouldn't gain weight, wouldn't spend money, I would be supportive of them, and wouldn't have to worry about my own drinking." Hence, everyone for the moment was sober. When Bob died Joan was grateful she had decided not to drink. When her mother-in-law gave her sleeping pills, she did not take them. "God did for me what I would not have done for myself. I cannot imagine myself going through that experience and not drinking, except that I had made this commitment about what I was going to do, and I did it."

Grief, however, encapsulated Joan. She hated the word because it was "such a silly little word for such a huge, huge feeling." A friend shared it had taken her seven years to recover from the death of her husband. Joan appreciated the information because "grief as grief lasted at least five years."

Friends were important to Joan. They provided a valuable safety net and helped pave the way for her recovery. Chris took her to her first recovery group. This was especially helpful to Joan. "I never went anywhere by myself when I was married, so going to new places alone was foreign, strange, and scary." Chris had a lot of previous experience with death. "She knew how to do funerals. She called me every day and said, 'What do you have to do today?' I would tell her all these things and she would say, 'okay, do this one,' and then she would call back." Chris also gave Joan financial advice and organizational tips on practical matters of consequence.

God was most helpful to Joan. He would send her phone calls when the pain got so bad and she could not sleep. "Whenever I thought I couldn't stand it another minute and I was feeling so bad, I got another phone call." Joan even received a phone call from a woman at 4:30 a.m. one Christmas morning who never called again. In response to the call, Joan stood in her kitchen and said, "Thank you, God." Joan's strong faith in God has guided her.

Widowhood to Joan is a different kind of Christmas gift. "You think your future is going one way and you might expect a Christmas present, like a really nice computer. But instead you open your present on Christmas morning and it's an equally nice thing but it is not what you expected and you feel really let down." Joan

pondered her future and looked at her past. Married at twenty-three for 23 years, she wondered what the next 23 years would be like. Joan also wondered how she would adjust to her loss. "Not only did I lose a husband, but I lost a whole list of things: a friend, a provider, a companion, a helper, and a person who took care of our home."

Self-help groups became her lifeboat. In each one she learned something different. At Good Grief Recovery she discovered she was not alone, there were others like her. Here she learned it was okay to be angry with Bob for dying. She was not an awful person for putting his photo down, for yelling at him for dying. At Friends in Common recovery group she met another widow. Together they went to see the movie "Ghost" with Demi Moore and Patrick Swayze. Both closed their eyes as Demi Moore's deceased husband protected her on the wide screen while they felt the caress of their husbands. Five years after Bob's death Joan went on a weekend retreat. The experience was healing as this was the first time she had someone take care of her since his death. Here she met a woman who had been widowed for seven years who taught her that grief is cyclical. "You'll think you are feeling better for a moment or a day and suddenly it will be like a wave rushing over you and it will be back again, but the time between will stretch longer and the waves will feel less." This was good for Joan to learn as her feelings were validated.

Not all group experiences were valuable. "I left one group of young widows and widowers because I felt the participants were in the problem, just staying there and not looking for a solution, not trying to feel better."



Books and journaling also provided a refuge for Joan. "I bought a whole suitcase of books." Joan appreciated the books. They gave her lists of sad movies for when she wanted to cry, lists of soft foods for when she could not swallow, and lists of things to do when her mind went blank. She wrote until her fingers ached. She kept a journal, and she put letters in a "God box."

Joan went for private counseling. "This was a big step for me." When Bob was alive she rejected marital counseling. She was afraid counseling would hurt her marriage. "Counseling was not a natural place for me. I went anyway because I was trying everything." The first thing she learned in counseling was that Bob had been a "practicing alcoholic, she a functioning alcoholic." Secondly, and most importantly, her counselor helped her recognize the importance of tears, of crying. Joan was petrified of crying, of losing control. She thought once she would start to cry she would not stop. This was her greatest fear. Using the analogy of a garden her counselor shared:

If you want flowers to grow, you have to pull the weeds so there is room for flowers. And if you have these sad feelings in your heart, and if you ever want to feel better and plant some flowers and happy feelings, you have to get rid of those, and the only way you do it is through tears, just like pulling weeds. Joan learned how to cry; it cleansed her soul. She sobbed each day on her way to work until one day she looked up and saw the sun. She smiled and knew the torrential outpouring had transformed into a gentle wave.

She turned Bob's photo right side up. She said, "Hello, Bob. I'm glad you're here." She realized she was free to spend as much time as she could at school and teach summer school. Joan was free to make her own financial decisions, free to travel, to remodel her kitchen, to buy new carpets, buy a new couch, lease a car, and pile papers sky high. She could pay bills when she wanted to pay them and not pay them when she did not want to. She learned it was all right for her to miss the nightly back rubs Bob would give her since she broke her back in a car accident. Weekly massages comforted her.

Joan learned she is free to remember Bob with all his flaws. She often talks to his photo. She does not know exactly why, but every time she looks at her clock it is 11:11, the time of Bob's death. She accepts this strange phenomenon as a good omen. She says, "Hi, Bob" to the clock.

She has dated but is not actively pursuing meeting men. She has had a few blind dates but did not care for them. "The guy who lives next door has been around like a fly." If she were interested in having a sexual relationship, that would be fine with him, she is sure. He's married and Joan does not want that. Her biggest treat right now is her new puppy, a small terrier. He yipped during our interview. He wanted play and she beamed with pride. He is the man of the hour.

Today Joan has a serenity she never had before. She has been sober for almost 10 years. She is pleased with herself. "I congratulate myself on how far I've come." She is guided by the Lord's words. She knows God has a plan for her. She shared her favorite scripture:

For I know well the plans I have in mind for you, says the Lord, plans for your welfare, not for woe! Plans to give you a future full of hope. When you call me, when you go to pray to me, I will listen to you. When you look for me, you will find me. Yes, when you seek me with all your heart, you will find me with you, says the Lord, and I will change your lot. (New American Bible, Jeremiah 29:11-14)

With renewed optimism, determination, and the spirit of recovery, Joan lives for today.

### Angela

Angela was 44 years of age when her husband died of lung cancer at the age of 52. She is a nurse and has four grown children from a previous marriage.

It was summertime when I met Angela. The sun painted the sky a glorious pink as I drove into her apartment parking lot. The blue shadows at night would soon blanket the sky. She welcomed me into her home which mirrored the colors of the night. Her home was filled with angels. The sounds of flutes played softly in the background as she offered me a plate of rich lime kiwi and succulent, juicy red strawberries.

As we began to talk she assumed the lotus position, and throughout our interview she appeared to drift back and forth between here and a place not quite here. Angela's cat curled up on the couch next to me as if to protect her from any intruder. I imagined the white angora intuitively sensed my uncomfortableness with felines as it purred, asking me to rub its back to make peace with me.

Bill was Angela's second husband. Their marriage changed her life. Coming from a previous abusive marriage of 22 years, Angela discovered love and compassion with him. She stated this love was "precious" to her. It was a change from her first marriage which made her have "sharp corners and edges." The kind of love she had for Bill "softened her" and made her "glide and smile at everything."

Bill and Angela met while doing volunteer work for a phone crisis line. They were friends for about six months. One New Year's Eve both had nothing to do and found themselves at the crisis center. When they finished their shift he invited her to a house party. From there it just kept going. "It worked and it was real nice." Bill and Angela dated for a year and a half. Neither of them wanted marriage. Between them they had five adult children. They were just happy to find somebody with whom they were compatible. "They explored, they clicked, they talked about anything and everything, and in their silence enjoyed." Angela learned to play golf to keep up with Bill's fanaticism for the game. "Together they became kids, responsible kids, and married."

This caring relationship was quite a departure from what Angela had experienced as a child and as a previously married woman. Growing up with a paranoid schizophrenic mother was frightening. At the age of eight Angela was the family cook, "naive in human values but smart in books." Angela escaped her home life by reading. She explained:

When you grow up with a schizophrenic mother you don't have a lot of acceptance in the community, and the library can take you to the world, and I

loved that. I learned about ballet and other things. Even though my father didn't have the money to pursue ballet, I imagined.

In an effort to escape her mother's "meanness," Angela married her first husband during her senior year in high school. Looking back, Angela knows it was date rape as he just kept "coming at me, coming at me." It was a bad marriage, but since she had been used to "abnormal cruelty" from her mother, she did not know how to escape. One day she woke up, her children except one were grown and she thought, "I didn't want to die looking at him. So I went for the divorce." With all the courage she could muster, she entered college and earned a degree in nursing.

Given her past, finding and marrying Bill was "all that more special." Together they planned a life in the Midwest. Angela would work as a nurse and Bill would continue his employment as a quality insurance inspector. They would play golf, laugh, love, take care of their grandchildren, and grow old together. That portrait would never be painted.

Angela believes the "shadows of doom" arrived with the announcement the company Bill worked for was downsizing. To salvage his job he would have to take a cut in pay and move out west. "I knew before we moved here something was going on. I even bought an earthquake ring." Angela did not like the feel of the West, even though it was gorgeous. She knew, however, she would follow Bill anywhere. "So I had my earthquake ring that I bought on clearance, and he bought me earthquake insurance." He asked me, "what do you think will go wrong?" I said, "we'll have an earthquake and we'll lose our house." He said, "well, we'll be together."

They bought a home, a "handyman special" which they were going to fix up. But a month after they arrived Bill looked tired, his left shoulder hurt, and when he turned down his fifth golf outing at work, Angela insisted he go to the doctor. In the interim she could not find a job. "That was another bad sign." She kept trying to tell herself there was nothing wrong, however, "she didn't fall out of the moon." She wondered if it was Bill's heart. The doctors said "CANCER, LUNG CANCER!" Angela knew then that it was her mission to care for him. In the five months Bill suffered, Angela reluctantly watched as her world crumbled. The earthquake she had so dreaded became a daily occurrence. At first she denied the severity of his illness. "Bill gradually deteriorated. I tried to imagine he looked the same, but when Bill's daughter sent a photograph she had taken of the two of them, she realized in those five months they had grown old." Their dreams of returning to Michigan crumbled in the rubble of his disease.

Angela painstakingly cared for Bill. When he became too ill to climb their stairs, she gave him a "big cowbell" so he could ring for her at any time. She was always at his beck and call. Finally, when he was too ill to be cared for at home and had to be hospitalized, she became his advocate. She knew what death was like and "tried to maintain that dignity of how you treat someone and talk." Knowing hearing was the last thing to go, she always made sure music filled his room. Believing "eye contact is the surest form of love," she always maintained that with Bill. She scolded his nurses for turning the other way for treating him "like a sack of potatoes," for never acknowledging him or recognizing her as a nurse. The experience left her cold,

shaken, and disappointed. She stayed with him until the end, talking, looking, touching, caring. Angela likened Bill's death to having her leg amputated.

At first you hurt so bad you cry and then you begin to deal with it. Then all of a sudden you start healing and you get fitted for a stump and you learn how to walk on the stump. You still feel some pain, but you will be walking without your cane. You never forget that you lost your leg and other people can't tell if you cover it up with pants and a shoe, but you know it.

Financially, Angela and Bill were unprepared for death. They thought they had at least twenty years before they retired. Her part-time job as a home health nurse was neither financially nor emotionally satisfactory. She was overwhelmed with responsibility. The house was in need of repair. She was not adept at managing money. She was unsure how to handle Bill's pension and insurance funds. As was her custom, she sought the answers in education. She checked out books from the library and enrolled in a money management course. "I made a terrible car business deal." Unable to bear the pain of driving Bill's car, she raced over to her local car dealership. Although she considered herself a frugal person, her purchase resulted in her having "the most expensive car I ever owned."

She had heard that when a spouse dies "you must be prepared for the house to fall on your head," and sure enough it leaked right on her head following a series of torrential downpours. An associate minister of her church was a roofer. Angela called his home to ask for assistance. His wife misinterpreted her call and accused her of sexual overtures. She was forced to find another roofer and the repair was costly.

Concerned that she did not have enough knowledge to plan for the future and aware that the house required some "dressing up," she sought the services of a female financial planner. Together they worked out a budget based on her current income and savings.

Emotionally, she sought solace in her church. "I thought I was going to drown and wondered how I would ever stay afloat." She kept up with her prayers. She knew she had her profession and she loved the people she met.

The summer after Bill died she made a pilgrimage to Guatemala. It was a mission to help widows whose husbands had been killed by the army some twenty years ago. The women of Guatemala were still struggling, still getting on with their lives. Their husbands had been "plucked away." They never heard what happened to them. Here Angela discovered the beauty of flutes. "The music reverberated in my bones. Now when I hear these sounds I know how strong I am. I float to the music." Moreover, she learned how to celebrate death. Unlike Americans who are rich in euphemisms, such as he has passed away or he is gone, the Guatemalan women brought closure to death by acknowledging the continuation of life. The Guatemalan church appeared to value these women, and unlike her American church experience, she did not feel shunned.

Back home Angela struggled with her grief. She did not know what to do the first year after Bill died. She walked anywhere and everywhere. Unlike the "anger walk" and "fire run" she had after her divorce, this was a solemn walk. "Often I would stare at the ocean and feel the waves." She learned to dance. She spoke with



other widows. As a home health nurse she met the most beautiful 97-year-old widow, a retired teacher with no children of her own. Together they shared a "sameness." Her girlfriend Carole had been widowed suddenly at the age of 40. She had had a "treacherous marriage" and began dating within three months of her spouse's death. "There was a little misting when we talked. For Carole, the death of her husband was a blessing, freeing her of abuse." Angela understood.

Angela has a confidence which emanated from Bill's love and the growth she experienced after her divorce. "I have confidence now and I am so much stronger." Freedom has captured her in all forms of dance: ballet, ballroom, and tap. In dance she is able to forget everything. This is in contrast to her professional face in which she is constantly caring for the infirmed. Today she has a new job. She works as a nurse in the county jail. The pay is better and there is job security. She labels herself "the tender nurse."

Since Bill's death, Angela has serendipitously found what she calls "the therapeutic touch." To meet her professional development continuing education requirements she enrolled in a course which happened to be held at a hospice. The course for her became a memorial service for Bill, healing her spirit and soul. In the course she wrote a love letter to Bill and placed the letter in a God box. All the participants lit candles in honor of a loved one. The purpose was to share the "light of love." That night she had a visitation from Bill. "He came and gave me one of his special hugs. He wrapped his arms around me in the most wonderful hug. I could feel

it down to my feet." Since that day she has continued her education by taking courses at a holistic health center.

Angela has found new freedoms and has "no fires to put out." She feels like an oversized teenager. She has no children at home and has reluctantly estranged herself from her youngest daughter who battles alcoholism. With her she plays tough love. Her other children are in the Midwest. She described herself today:

I'm responsible. I haven't missed any work but if I want to do something I can. I don't have to ask anybody for permission. I'm a moral person and it's fun. I've dated. I've gone to a religious retreat twice. I love to hear the birds sing, I always have, but it's just magnified. I don't know what I will do the next fifty years. There's an aloneness to me but there is also a new joy. I still have sorrowful moments and I just deal with them. I know they will pass and they're not bad. They don't hurt like they did before and I still cry.

Angela is a person of many emotions and colors. She has a hearty chuckle and a mischievous love of inquiry. Fascinated by angels and their meaning, last year she met an artist who paints your soul. Hanging on her stairwell leading up to her bedroom is a bigger than life abstract painting of a dark purple angel with a deep red heart in the middle. With pride Angela explained, "she is the angel whose shape reminds me of the snow angels we made as children as soon as the first white flakes laid on the ground." A deep, dark purple swirled around forming the angel, highlighted by lavender and red which revealed Angela's "charkas." Wide eyed Angela explained that lavender and white reflected her spirituality and devotion to

others. The valentine red heart signifies her strong heart. The painting is her, and as such it means she is growing in more ways to serve God with all the love to do whatever He wants her to do.

With that as a command, Angela is going to embark on another pilgrimage this fall. She will be traveling to China with an oncologist who is leading a group interested in alternative medicine. To prepare for this journey she has been reading and has spent a day as a student at the School of Chinese Medicine. She is contemplating getting a master's degree in alternative medicine but has yet to commit to that undertaking. She must sort through finances first. She will revisit this idea upon her return from China.

In the meantime, Angela asserted that being a widow gives you a different kind of wisdom, a different kind of understanding. "I have a wisdom that only some of the roughest roads you travel can teach you. You have to travel those roads to learn it. I believe there are a few geniuses born who know how to relate to the world. The rest of us have to go through it."

Being a widow has transformed Angela's relationships. She shared: "Today I know how to shut down a relationship that is abusive and keep it at a level I am comfortable with. I am confident."

On the edge of a new beginning--money manager, nurse, missionary, dancer, therapeutic healer--Angela has a sense of humor. Bill, wanting to be near his parents' grave site, was buried overlooking Lake Superior in Duluth, Minnesota. Last week a girlfriend asked Angela if she could afford to visit him. Angela replied: If people can

afford to see Elvis, for sure I'm going to see the love of my life." No doubt Angela will do this and more.

### Meg

Meg was 37 when Mitch died. Their two daughters were 5 and 3. It has been 3 years since Mitch's death.

As I sat outside Meg's home, waiting for her to return from her morning school drop off, I wondered as usual about the woman I was about to meet. From the moment she popped out of her four-wheel drive I was captivated. I thought she was at once mystical and mysterious, open and shut, warm yet icy cold, inviting yet aloof. I was immediately drawn in by her crystal blue eyes. They reeled me in dancing like waves in the ocean pulling me into shore and then rolling back laughing as they pushed me out to sea.

Meg looked like a young girl, dressed in a white v-neck, short-cropped pullover sweater, black pedal pushers, and sandals which revealed freshly painted, blood-red toenails. There was something earthy and ethereal about her. She was quite perky, almost impish as she ushered me into her living room where we both plopped down into a soft white couch. I was aware I was uncomfortably comfortable. Intuitively I felt we were not alone. My eyes were immediately drawn to a large oil painting which filled the eastern wall. Medieval in style the oil depicted a beautiful young woman looking at her reflection, holding a mirror in one hand and reaching out to Father Time with the other. Her hair was braided with garlands, her face was soft yet serious as she gazed into the mirror. Facing her was Father Time, stern yet

compassionate. A serpent casually wrapped around his arm as he reached out to touch the young woman's outstretched hand. While spatially connected the two were separated by a small, infinite space. Their hands never touched. While Father Time may have been looking out for the young woman, there was an obvious tension which undulated between them. One could, for example, split the painting in half. Each portrait could easily stand on its own. I asked Meg about the painting, and she explained she purchased it after Mitch's death. Later as our conversation progressed and we gained trust in one another, I would learn the painting's significance.

Meg met Mitch when she was in graduate school. She was working at a cancer center and Mitch was a very young, brilliant professor who had just finished two years of his post-doctoral work and had been hired by the institute. Mitch was married at the time they met and Meg was about to marry someone else. About 10 days before Meg's wedding, they realized there was something between them. Meg, however, did not call off the wedding. She and her husband moved out West, and after a year and a half she realized she had married the wrong man. Mitch in the meantime moved out West, got divorced, and a year and a half later they got together and married.

Meg finished three years of post-doctoral work and then stopped working once her first child was born. Her intention was to specialize in genetic counseling. Life, however, had different plans. Mitch switched jobs and they moved to Southern California. Before Meg knew it, she had two young children and a houseful of responsibilities, and work was on hold.

Mitch was a cancer survivor. He had Hodgkins Disease in his early twenties and was diagnosed at 22, at the time he started graduate school. They thought he had a heart problem but it turned out to be a lymphoma around the heart. He was operated on, had the lymphoma removed, and had a lot of radiation and chemotherapy. He relapsed twice after that, and in a period of 10 years had three treatments of chemotherapy. Meg had met him at the tail end of his treatment. If Meg and Mitch worried about death, they thought he would die of leukemia or melanoma as a result of the radiation and chemotherapy. Meg knew his heart and lungs were not very strong, but she never had any idea he was a risk for a sudden heart attack.

The night Mitch died he and Meg were about to embark on a new beginning. Mitch had quit his job in Southern California. He was going to start a new biotech company in the Bay area and was to be the CEO, run the company, get it started, and get funding for it. The day before, he had a going away party, cleaned out his office, and said goodbye to his secretary.

Using his two weeks vacation time, the family had a summer vacation planned. They arrived in Salt Lake City for the start of their vacation. They were taking their two daughters ages 5 and 3 to Jackson Hole, Wyoming, spending a few days there with the girls on a ranch, and then driving to Yellowstone Park and renting a cabin by a lake.

Upon arriving in Salt Lake City, we picked up our luggage. The two girls managed to wheel their own bag through the airport to the car rental agency.

Mitch had always been very particular about packing for trips and was proud

that I had packed the girls things into one small bag that they could handle themselves. After going through a few different rental cars, Mitch settled on a Pathfinder, a car we once owned which he especially liked.

The significance of the name of the car was to become clear later that evening when Mitch's path of life was to dramatically change.

From the hotel in downtown Salt Lake City they decided to walk to a restaurant for dinner. While they were walking, Meg looked up and noticed a street lamp was changing from dim to bright! That was a rare occurrence for her and she mentioned it to Mitch. Digressing, Meg had noticed at least a few times a year she would find herself either walking under or driving by a street lamp when the light would suddenly go off. This event occurred in different cities, during different seasons, and even in different countries. She had never been able to correlate the occurrence with her "mood, disposition, or thoughts." Tonight it had a different meaning. Tonight Mitch looked at her with a slight smile on his face and a less than slight shake of his head and acknowledged, "yes, there it goes again. I found it particularly significant that a light would go on and not off, given the changes in our lives we were about to undergo." Meg believed it was a sign, but of what she did not know.

They found a wonderful southwestern restaurant and had a great time at dinner. For the first time, after many months of planning and worrying about the new company, they were able to relax and enjoy each other's company. After dinner, they

went back to the hotel, watched the movie "Born Free" on television with the girls, and went to bed.

Mitch had had terrible indigestion for about 10 days. He had told Meg he was not going to work on the treadmill anymore because it was giving him indigestion. They did not put two and two together. His doctor had given him different medications for indigestion. They knew he was all right.

In the hotel room Mitch said his arms were hurting. He did not know what was happening to him.

He felt really sick and was sweating a lot. He took a shower, laid down, and asked me to massage his arms. I was sitting down massaging him and had this thought in my mind, how nice it is to be touching him like this. We should do this more often. Sixty seconds later he seized, so it was a very loving feeling I was giving him at the time of his death.

Meg felt very lucky for that feeling as they had just seen a marriage counselor that morning. Mitch for the first time had agreed to enter therapy by himself, and they left the session feeling very close. Meg, however, wished the children had not been in the hotel room at the time. They woke up as Meg was screaming at Mitch to wake up. They saw their father turn blue.

It took an eternity for the emergency people to come. When they finally arrived she took the girls out of the room into the hallway and stayed with them. "We really couldn't do anything for him." They took him to the hospital and the woman on duty that night had been a nanny so they moved the girls to another room. She had to



leave the girls at the hotel and go with Mitch. "It was terrifying, but I rode in the ambulance, and when we got to the hospital, they tried to revive him to no avail."

Mitch had had a heart attack which was due to the fact that when he had his original radiation the heart was not shielded well enough and the radiation caused scarring in a major artery which for 20 years caused plaque to build up. He died of arteriosclerosis. The doctor explained there was nothing he could have done.

Meg went through a hysterical crying reaction. She sat with Mitch for a long while. She had heard that when a baby dies after birth, the nurses will occasionally wrap the baby in a warm blanket and hand it to the mother. The nurses kept putting warm blankets on Meg because she was shivering and she kept putting them on Mitch. "The sight of him dead on that table in that bright hospital room was horrific, and being afraid of a dead body yet wanting to hold him, yet knowing there was nothing, so I put warm blankets on him and sat with him and talked."

From the hospital, Meg phoned family and friends. Luckily, a friend of the family lived near by and was waiting for her at the hotel when she returned. Another friend arranged to get on a plane to come and help her with the girls. She only regrets calling her sister-in-law from the hospital, she was awful.

Meg left the hospital in a cab around 5:00 a.m. The streets were dark and there were no lamps in the residential section. As they descended from the hills into the city they came upon a very long street. On her left was a brightly lit street with lamps as far as one could see. As she passed the street, the light from the lamp

closest to Meg suddenly went out. Meg believes it was a sign from Mitch, that he was still there trying to reach her, letting her know he was with her.

We paused in our conversation. Juxtaposed against the east wall in her home next to the large oil painting was a curio cabinet filled with exquisite crystal goblets. A lone family photograph floats in the center. As we talked the lights of the curio cabinet flickered on and off. I asked Meg if she was aware of the lights flickering. She said yes, Mitch is present. I remained silent. I longed for a simple scientific, electrical explanation like "there is a short in the electrical wiring." Instead I am greeted with a mystical, spiritual presence which for Meg is a common occurrence.

Meg continued. The girls had not gone back to sleep. They spent the night watching cartoons. She did not have the strength to tell them their daddy died. She told them he was very, very sick and laid down with them and got them to sleep. The girls woke up around 10:00 a.m. She got them breakfast, took them outside, and told them Mitch had died. Her 5-year-old's first comment was, "When are we going to get a new daddy?" Her 3-year-old did not understand it at all.

A friend of Mitch's arrived and began to take over. She was very controlling and mothering. Two years after Mitch died they had a major blow up and today they do not speak to one another. Meg's relationship with her sister-in-law also was altered. She flipped out, blaming Meg for much of her misfortune. She wanted Meg to file a wrongful death suit against Mitch's doctor. When she refused they had a falling out. Other friends also fell by the wayside. They chided her for being unavailable, for not thinking of them, for being so concerned with herself. Meg

explained, "People have specific expectations of you, and when you go through something like this and are not able to give people what they need because there's so much you need for yourself, others find that difficult."

Meg, however, has remained friendly with her mother-in-law. She feels that is important to her children. One problem did arise because Meg kept her maiden name. Her daughters asked if they could change their last name, too, and she obliged them by hyphenating their name, but for awhile she only used her maiden name. She was not careful to hyphenate it so when her mother-in-law saw that on a school program, she became very upset and did not understand. Otherwise, she and Meg get along well and it has been a good relationship.

In the three years since Mitch's death, her close friends have really changed. This has been difficult for her and the loss of certain friends especially made her re-experience Mitch's death as well. She realizes, however, the persons she has lost in friendship are those she cannot be there for in the way they want her to be. Her closest friend today is another widow, "a woman who lost her husband a year before me who in a very tragic way committed suicide." She has two sons the same age as Meg's daughters. "We have become very close. She's probably my closest friend now and we both feel so lucky to have each other. We can talk to each other and we understand what we're going through in ways nobody else can." Together they are able to share the trials and tribulations of raising children who were traumatized by the events they witnessed.

Meg has not had an easy time. In the beginning her 5-year-old found it difficult to talk about Mitch at all, while Chelsea, her 3-year-old, talked about her daddy all the time. The older one would scream at Meg all the time. In the beginning they went to a therapist, but after awhile they did not want to continue. Presently, Chelsea, the younger one who today is 6½ years old, goes to a grief support group at Hospice; the older daughter has been reluctant to start. Chelsea has had a difficult time. Her cognitive ability has changed. She went through a time where she would cry inconsolably every night. She missed her daddy and she wanted to die with him. She has had a habit of grinding her teeth and now has ground down 30% of her teeth. Since Meg had suffered from bouts of depression herself, she took Chelsea for a psychological evaluation to see if it was a grief reaction or something inborn that she would have to watch for. The doctor said Chelsea had symptoms of depression and recommended therapy and the grief support group. The therapist has taught her meditation and she uses a relaxation tape at night to help her go to sleep. But she often has large outbursts of temper. "She's under the bed or under the furniture and won't come out, and then she cries for hours. She will throw things. It's almost walking on eggshells in some ways as I haven't been as disciplined with her as she probably needs, but it's been difficult." Her teacher has been very good in the classroom. If the children have parents' day or send something home to their parents, the teacher will say, "If you want to send this note home to your mom or dad, Chelsea will always raise her hand and say, 'I don't have a dad.' The teacher will say, 'I know.'"

Meg engages in little rituals with her daughters on Mitch's birthday or the anniversary of his death. They let balloons to the sky and have written notes on the balloons or tied on pictures or flowers. Whenever they see a white butterfly they are reminded of him. They go to the cemetery where he is interned. "Before we leave we put lipstick on, we kiss the wall, and these lipstick marks are all over the wall." Parenting is a challenge. Sometimes the girls write on a piece of paper they hate her. Meg, in turn, musters up the strength to deal with this in a way that will help them grow. She is glad to have a friend, another widow, with whom she can share the agony of their despair.

After Mitch died, Meg was no longer depressed. She went off Prozac and started going back into depression about six months later. Meg has been proactive in her healing. Meditation exercises and spiritual study have been important to her. Last winter she changed her meditation focus from being more yoga to a more Jewish meditation. She studied in the Kabala. Exercise has also helped her alleviate stress. She was never athletic before Mitch died. She skied and would exercise but after Mitch died she started walking. Then she felt she needed more, so she started running one block, two blocks, and after two months was running 2 or 3 miles. When the pain became so intense, there were times when the only thing that would make her feel better was to run up one of the longest hills in town. Two weeks ago she finished a half marathon. She lifts weights twice a week. She has learned to play tennis and takes ski mobile lessons. She has gone from a size 12 to a size 6. "I have become much more aggressive in life that way, much more out there, and less afraid."

Before Mitch's death Meg's life was "just the realm of the physical world and people and of her family." There was no higher world. Now one of the most important things to her is realizing there is more in the world, more spiritual connections. In her meditations each day she has developed her own mantra. She has five things that she says every day. When she wakes up in the morning, she usually sits and meditates for about 20 minutes, and being Jewish she does the "Shama."

"First, that God will take care of me in life and I know ultimately I will be fine. Second, that if my life takes a turn to the left, that's one way my life could go, but if I went to the right, that would be my life as well." In other words, whichever way Meg's life goes, she will be all right. "Third is that I have inner strength, an inner power within myself. The fourth is to be patient in life and what I need will come to me, and fifth, to feel blessed with what I do have."

Dream work also helped. Nine months after Mitch died she realized she had been searching for a sense of connection to God. At a Siddha Yoga retreat, Meg experienced a special closure, a letting go. As she meditated she called out to the heavens for Mitch. He told her he could not come to her as a person.

As I looked up to the top of a mountain a tiger appeared. He was a large, powerful Bengal tiger. He laid at my feet and I sat down and stroked him. I told him how much the girls missed him, how much he was still in my heart. His fur was thick and soft, and the sound of his purring was one of deep contentment. He leaped at us as tigers do, or as Mitch would have done, and

then we ran playfully together. Then a voice in the distance said, "I have to go now," and the tiger headed up the mountain. I said goodbye.

Soon after Meg heard the sound of the bells, indicating the meditation was over. She felt blessed. She felt as if she had let go--she was free.

Feeling the need for attachment, of wanting to be loved, about three weeks after Mitch's death Meg felt attracted to another man. She had mixed emotions. On the one hand, she was feeling guilt because Mitch had just died, but on the other hand, she thought how nice a sign this was that she would eventually feel something for someone again. Then about six weeks later she met a physician and had a brief affair. That started a whole series of affairs and relationships. She just felt she needed something.

Meg even answered an ad in the personal column. There she met a gentleman who was very gentle and sexually they were compatible. She met another gentlemen skiing, another in the Midwest, another in the South, and another in the East. She ended up having a series of monogamous relationships in which she would fall in love, have a long distance affair, and the affair would end. She would feel terrible again and go back into sadness, a grieving, and a depression. Meg is not critical of herself because she did not realize how vulnerable she was following Mitch's death. In all of these relationships she was re-creating Mitch's death, finality of her loss, the reality that in death there is no reunion. After she kept repeating this cycle, she decided to go back on medication. Since then she has been feeling better. She has begun to examine her need to fall in love only with men who live far away. She

thinks it is safer for her, that way she does not have to get involved. However, this spring she did not date or see anyone because she did not want to. Through this experience she has learned how comfortable she is with herself and how happy she can be by herself. She has become much more trusting of herself, more decisive.

Money has never been an issue for Meg. She always had more family money than Mitch and they always had separate accounts. She was used to managing her own affairs, and it has taken her awhile to gain mastery of Mitch's accounts. With her good fortune she has endowed a lecture series in Mitch's name at a local university. Committed to Jewish life, she chairs an international fund raising campaign which provides her many travel opportunities.

Today, Meg is happier than she has ever been in her life. It has taken a lot of work to get there. She has had to go through a lot of pain to get to this point and to appreciate where she is now. She has traveled from not knowing if the next day or next minute she would be depressed to having three or four stable months of feeling good. She reminded me it takes time to heal, and it is reasonable to lower your expectations for healing to occur quickly and for life to move at an even pace.

From Meg comes a clear message. Time alone does not heal. Healing takes a lot of work, a lot of resources. Whether it is exercise or therapy, journaling or writing an article, being with friends or fund raising, taking medication or having children go to a grief support, buying a chocolate labrador retriever puppy, or skiing in Aspen, one must draw on all their resources. And it will not be one thing, one



race, one mantra, one trip, one affair, one outstretched hand of a friend. It will be a combination of things which helps you heal.

For Meg, like the young woman in the painting on the east wall of her home, she has met Father Time. Like the young woman Meg has held the mirror of time. She has been bitten by the serpent. She knows the bittersweet venom of death. She has also learned that over time her reflection in the mirror has changed. Today, as she gazes in the mirror her reflection has been transformed.

### Lee

Lee is heading toward her 45th birthday. She was 42 when Renaldo died. Their children were 6, 8, and 12.

We met one sleepy Thursday morning. Lee had just finished dropping her children off at school. I am immediately captivated by her appearance. Her blue eyes glistened as her blonde hair fell softly around her model-like face. She looked like she had just stepped out of a health and fitness magazine. Clad in a pair of well-worn jeans, an old grey sweatshirt, and soft, almond brown boots, she bounced upstairs. Warmed by her trip last week to Cabo San Lucas, she wore her tan like a warm stick of cocoa butter.

We talked. Renaldo has been dead for almost three years. With hesitation she remembers the time of his death. "It was five and a half hours before I turned 42." The thunder of these words reverberated throughout the room for the pain of loss is oftentimes raw. Being a widow reminded her of a burnt photo album.

When there's a fire, people grab their photo album to take with them. I think when someone close to you dies it's almost like having your photo album burn. The memories are there, it is just the person isn't there to re-create those memories or create new ones.

Moreover, being a widow has meant to suffer the loss of your lover, the father of your children, the loss of someone with whom you spent your life.

Lee and Renaldo's relationship spanned 19 years. Married for 12 years they had 3 children. While they divorced as a result of Rene's philandering and married others for a short while, they always remained close. "He always had a key and a garage door opener and gave us a wake-up call every morning if he wasn't there." And so it came as no surprise that when Renaldo fell prey to glioblastomas, brain tumors, he moved back in. She cared for him until the end. They remarried two weeks before he died.

As I came to know Lee, I learned how deeply she loved Renaldo. He fulfilled her "desert island theory." She hypothesized that "love is being able to be on a desert island with that person and be happy." Renaldo was always that person. Moreover, Lee saw Renaldo through a lens of forgiveness. She saw his philandering not as betrayal but rather as an illness, a sickness like an addiction. Lee knew Renaldo did not want to hurt her. "Not wanting me to discover his infidelity, he liked to hide his affairs by trying to move me out of state, out of the country. I just had to accept him for the way he was and not try to change him, just accept and love him." Lee has done that.

Lee welcomed into her home not only her friends but Renaldo's ex-girlfriends. To her, Renaldo was an "encantador," a delightfully charming person, a sorcerer, an enchanter. He was a star like Jack Nickolson in the movie, The Witches of Eastwick. About a week before Renaldo died, Lee invited four of his ex-girlfriends over to their home.

It was so funny. One was holding his hand on one side, one was at the foot of the bed. One was up on the headboard with her legs around his head feeding him through a straw, and then he was sucking chocolate off another's fingers." In the midst of this delicious decadence, Renaldo reminded his playmates that his real girlfriend was Lee.

Today Lee does not necessarily define herself as a widow, even though she knows legally she is. In fact, she remembered it was her son Rene who brought it up. "Mom, you know you're a widow." And with some reluctance in her voice she replied, "Oh yeah, I am." She links her independent posture to her understanding of widowhood. As a married woman, she never changed her name.

Whether or not Lee's self-definition includes the word "widow," it is clear that losing Renaldo has not been easy. His clothes are still in the closet and in the dresser. For friends and relatives that has really been hard. "You open closet doors and you can smell him. A lot of people have had a hard time going into the bedroom where he had to spend those last few weeks in a hospital bed." Lee, however, is the one with energy in her home. "I still have his robe hanging by the shower, but I'm very

comfortable with it." She believes in psychic power. She often talks to Renaldo. His presence is often near and that comforts her.

As a result of Renaldo's death the tapestry of relationships have altered. For the first year, Lee's mother-in-law was too grief-stricken to visit their home. She had been struck by the death of her husband only 22 days before Renaldo's death, and he had been her only living son. Their deaths were too much for her to bear. During this time, traditional family and holiday gatherings which had filled their home with laughter were largely silent. The children would visit their grandmother at her home instead. Lee's sister-in-law, once a three-time married woman, mother of three, and now a nun and mother superior in the Catholic Church was harsh and judgmental. She did this "fire and brimstone thing." Renaldo's "coonya" sister-in-law, that is the woman who was once married to Renaldo's brother, ended her relationship with Lee. Also a widow, Renaldo's brother died three years before of cancer, she was involved with another man who did not want her to have anything to do with Lee. This was particularly difficult, not only for Lee but for the children as well. Living in the same community, having children of similar ages, and not speaking to one another radiated an empty feeling. Lee has tried to understand, to reconcile the split. "People do weird things like that. You just don't know how people are going to react when they are under pressure."

Though separated by many miles, Lee's family has been most supportive. She has grown closer to her brother, perhaps because of their parallel responsibilities—Lee is responsible for her family, he is responsible for their aging parents. They have

much in common. She has vacationed with her sister from Colorado and the whole family has been to Georgia for a family reunion.

Death, however, has rearranged life's priorities.

All of a sudden things I thought were important are not. A lot of it is just a bunch of phoney-baloney. All of a sudden the world is small, it is real abbreviated, and the things you have to do or people you must see become smaller. Your needs become smaller because a lot doesn't matter. In the long run all is going to be forgotten.

Being a mother is the most important thing Lee has to be right now. Children confused by the unexplainable strike out. They all got pneumonia after Renaldo died. They were angry. Lee's youngest son has slept in her bed. He has been afraid to leave her side. He is afraid of losing her. Lee's daughter dabbled in drugs. She would lie about where she was going, and the middle boy stayed by her side eager to help. Throughout all of this, Lee has tried to remain open, warm, and understanding, but many times her feelings have been hurt. Coming to grips with the facts, "Pop will never coach my team" or be there for a birthday party is painful. Lee is sensitive to the process of letting go. She has tried to give them space. During the first year, friends took the children for a few weeks in the summertime. They went to a hospital for family counseling.

It has been hard to let go. For Lee letting go is "like the Mercedes" Renaldo gave her. "It's falling apart but I can't let it go. It was a Mother's Day present. It's like hanging on to something you don't want to release."

If letting go has been difficult, carrying on has been a juggling act for Lee. It has been a struggle to deal with everything—the children, their full schedules, soccer, baseball, and lacrosse practices and games, 3 different schools, 3 different drop-off and pick-up times, plus drums and bass guitar lessons. "There's no other driver. There's no other person to do all the things you have to do with homework and sports and even walking. It has to be geared around the children's hours."

Lee laughed as she recounted the "headstone debacle." In between dropping children here and there, she drove by to see Renaldo's headstone. She spent a long time creating the headstone. Remembering Renaldo's vanity, she gave him a facelift by having a youthful photo as the headstone's focal point. When she arrived to check on her wondrous creation, her eyes grew wide as she exclaimed, "Oh no! They made him look like Elvis. . . . Oh, my God. He ended up having this huge pompadour. If he knew he would have a fit." So in between her daily chores she had them pull the headstone and give him a haircut.

Lee feels alone at times. There is no one to bounce ideas off. "Knowing I'll never find an exact replacement is shattering." As a parent she believes you have to make sure the children love their father, while also making sure they do not idolize him in an unrealistic way. Finding the balance is challenging.

Lee is aware of her children's sensitivity to her coming and going. On a recent trip to Wyoming, Lee drove her new Explorer to the store. The roads were slick, icy, and treacherous. Snow was falling fast. She was going all of 2 miles per hour when the car slid and rolled twice. The car was not exactly totalled but it had \$13,000

worth of damage, half its value. Lee escaped without injury. When the children found out they were terribly concerned. They wondered who they would live with if anything happened to her. She assured them and held them tightly.

Time has had a way of healing. Renaldo died in early January and the first year of his death was different from the second. All of the holidays—Thanksgiving, Christmas, and New Years—started improving. Lee's home served as the meeting place for Thanksgiving dinner and Christmas Eve. She and the children actually went out on New Years. The anniversary of Renaldo's death and her birthday were not as devastating as the first year. To acknowledge Renaldo's life and death, Lee usually puts out a picture of him and a picture of the family and lights votive candles. She makes a little shrine at home or together they go out to the cemetery and leave the candles and flowers. "Performing this ritual makes it easier, not as hard as it was, even for the kids."

Lee is inventive and enterprising. While Renaldo was ill, she was impressed by the massage therapist who would come to their home. He would keep Renaldo's circulation going while he was bedridden. Lee liked the way massages made people feel good. Last fall she attended a Holistic Health School in order to attain her massage therapist license. She also took the California Basic Education Test (CCBest) examination because she was aware substitute teachers were needed. Much to her amazement, she passed the CCBest without having to study. Today she is licensed by the City as a massage therapist and by the State as a substitute teacher.

Lee has enjoyed the flexibility a massage therapist has. She is able to make her own hours and schedule clients at her convenience. Substituting at her youngest son's school is difficult because she has to make arrangements to get her children to and from school on short notice. If one of the children is ill, which has been a frequent occurrence since Renaldo's death, she is reluctant to leave them home alone. She does not earn enough money to pay for child care. As a result she has looked for other nonconventional ways to earn money.

As luck would have it, Lee has a close friend who is the sales representative for a major tobacco company. Looking for creative venues to market cigars they negotiated a contract with the local sports stadium to sell cigars. Second, they resurrected the old Phillip Morris girl as their model to market their wares to persons sitting in expensive sky boxes. Lee was hired to coordinate all the sales activities. She has hired college students who wear fifties-type sandwich boards filled with cigars, and sales have been brisk in the stadium. This position allows her to be with her children. With a smile on her face she wondered if I had any tips on how to deal with college students. She jocularly laments the young women she has hired always have a crisis, either they are sick, have an exam, have car problems, or are in a fight with a boyfriend. I smiled, chortled and said, "yes, that's college for you."

Lee's various jobs help supplement the insurance and Social Security benefits the family receive. She regrets not having purchased mortgage insurance. "If I didn't have any mortgage payments, life would be a piece of cake."



Sex to Lee is healthy, it is a release. Lately she has been thinking she would prefer to have a lover than someone who wants a committed relationship. She is free to choose someone to be with if she wants that. She does not "need" someone. In part, it is hard for her to find someone who was as charming, as much fun to be with as Renaldo. In part she has closed off a part of herself. "There's this little box that I've locked away inside, a protection that no one is ever going to touch or get near to." Lee thinks this has to do with having had the experience of being hurt, being in pain. "You express it, you experience it, but at the same time you do not want to be that hurt again." Furthermore, Lee prefers a lover because she does not want a man to interfere with the other aspects of her life. She has enough to contend with. It is too hard and too time consuming. She is currently dating a divorced gentleman with a young son. From this experience she has discovered she does not want to live under the same roof with someone else's children. For today, there are too many issues about how one person parents versus how another person parents. Parenting gets too convoluted.

Lee's friends are her safety net. They are to her the most precious "diamond" any woman can have. They provide emotional and spiritual nourishment for her. As tears softly cascade down her face, her blue eyes sparkle from the watering. Lee continued:

It's very important to maintain your friendships and to really nurture. . . . So that would be my advice to anyone, maintain. It's like planting a garden, and that garden can be so beautiful. Those seeds get planted and you water them,

you fertilize them. You keep your relationship with each one of those little flowers or plants, protect them and do what you can to nourish them because that's what life is about. And then you get to enjoy looking at the different colors that come out and how pretty the flowers are, and it's because of the love and nurturing and sharing that time. It's time shared together. Those are the important things in life. We are always so busy looking at our watches and it always goes by so fast, and it's important to take these moments and just laugh in them.

Lee advocates women must be prepared in case anything happens. Women must be able to "support a family and not have to go to school all of a sudden at the end." Realistically, she knows you cannot replace the income most of the time unless you can travel or are more available or highly trained to do a lot of things.

Opportunities are much more when you are already prepared and set rather than you're begging or groveling because of a situation. In other words, you have to be able to deal from a position of strength so you have to be prepared. You have to build solid foundations along the way.

As Lee builds a solid foundation for her family, she remembers Renaldo. She is fueled by the present, the bittersweet memories of the past, and the opportunities of tomorrow. As far as the two of them, she believes:

We'll be perfecting things in other dimensions and time. We didn't have the most wonderful relationship. I don't think you ever do. It's not so divine so

we've got things that we've got to work out just like with any relationship. We have got our souls all the time until eternity to try to perfect things.

For today, Lee has friendship and love. That is all she needs.

### Lila and Ruthie Lee

Lila and Ruthie Lee have been best friends for over three decades. Ruthie Lee loves vanilla extract and Lila has always been the most ardent advocate of Hershey's syrup. Lila, a "down-town-kind-of-gal" is freckly white. Ruthie Lee is forever quick to remind her, "Black don't crack."

Thirty years ago in graduate school they made the most unlikely pair. Ruthie Lee, all decked out in the latest dasiki with her Angela Davis Afro hair, towered over Lila who was about as exotic as the Brooks Brothers East Coast ram logo. Lila's school uniform consisted of khaki bermudas, a blue oxford shirt accented with a monogrammed circle pin, knee socks, and Bass tasseled weejuns. Her chestnut brown hair neatly parted down the middle usually hung straight down her back or was neatly tied in two pigtails, making her look even younger than her 20 years. Together they stood out on the sun-drenched campus filled with streaked blondes and surfer Big Kahuana look alikes. Lila, with big blue eyes dancing, was forever rambling on about one cause or another using words like "kaleidoscope" and "tapestry" long before they became popular.

Ruthie Lee silently took everything in, communicating only after she carefully weighed each word. In fact, Ruthie Lee liked to boastfully tell the story that she tried to ignore the short, loquacious white girl. She would have nothing to do with her, but

try as she might, Lila was determined to be Ruthie Lee's friend. After all, Lila had been brought up by black women who had nursed her while her own mother lost herself in alcoholic dreams. Lila persisted until Ruthie Lee, "Black American Princess" from Louisiana succumbed. Actually, their union was aided as they joined forces in an attempt to save their sanity against one of their more colorful professors—one huge red-checked woman who bellowed after them, "If I hear you correctly . . ." and put the fear of God in them more strongly than any religious zealot ever had since Timothy Leary. A cross between Mary Magdalene and Mother Teresa, they armed themselves against the vicissitudes of "Miss Jean" who they decided either was destined to become "the madam of the first clean-living whorehouse in Southern California or recognized as the founding matriarch of the school." However, it happened that they became inextricably locked together and the "darlings of the school"—Lila, the dreamer, Ruthie Lee the detailer. Together they were rascals "hell bent on changing the world, loving, laughing, playing, and studying." Together they would transcend many boundaries in both their professional and personal lives.

Listening to them one can hear the laughter in their voices modulated by the sudden, unexpected passages of their lives. Neither of them thought some thirty years hence both would be widowed at young ages—Lila at 44, Ruthie Lee at 54. Neither of them knew when they heard Helen Reddy sing, "I am woman, hear me roar," they would hear the deafening sounds of silent dead men—one discovered in a car, the other in the front hall of her home—echo in their laughter and tears. What follows are their individual portraits.

## Lila

Lila was widowed at the age of 45 with three young children. She is a white, Jewish woman whose husband had died of a heart attack which he suffered in his car on the freeway. She holds a master's degree, is a university lecturer, and is presently a graduate student working on her Ph.D. After being widowed for six years she has remarried.

Even though Lila's childhood was shrouded by the ghosts of unborn babies ("my momma had six miscarriages; I was the only one to live"), death always grabbed her by surprise. Named for her grandfather who had the "audacity" to drop dead of a heart attack while delivering a political speech just months before her birth, Lila spent most of her young life in the care of two black women, Reece and Anabelle. Reece and Anabelle took Lila everywhere; she was never by herself. Lila remembers watching Reece "plucking the feathers of chickens in her grandmother's overstuffed kitchen, hiding under the big table," her big blue eyes peering out while "Reece and Annabelle made matzo ball soup." Most of all Lila remembers "soft summer nights where fireflies danced" as she sat on the steps "listening to the porch stories Annabelle, Reece, and their families told of their lives in the south on Sundays." She loved it when they took her to church with them as the "welcoming sounds of song reverberated through her body making her feel safe and cared for." Momma, in turn, catered to her "newly widowed, overly distraught mother, demanding unscrupulous, self-centered brothers, unstable husband, and a myriad of social responsibilities." When Lila's father died suddenly when she was 8 years old,

her "Momma somersaulted into a hurricane of grief and confusion marked by anguish and self-hate." Not to be too long without a man, and Lila desperate for a new father, Momma remarried within two years of Sam's death. At first Lila idealized her new father; however, Henry's "narcissistic ways and desire for Momma's money in the end were to overshadow any positive qualities he would have."

A child of the sixties, Lila entered college "wearing a bra and exited braless." True to norm, in record time she received both her bachelor's and Mrs. degree. Doing exactly what was expected, she worked while David finished medical school. In retrospect, their relationship was as "passionate as it was comical, as stormy as it was calm, as sadistic as it was masochistic, as funny as it was sad, as loving as it was hateful." From the beginning Lila knew in the innermost part of her heart their relationship was doomed, but everyone said "you're supposed to marry a doctor" and she was "tired of being poor." Their marriage took place on a national day of mourning (Bobby Kennedy had been murdered) and the undercurrents of tragedy danced on their wedding floor. On that day, however, Lila believed "life would be good, even joyous."

David and Lila moved west. David served his country, was sent overseas, and Lila attended graduate school. When David returned from his overseas duty, Lila had just completed graduate school. In truth, she was not sure about David. "He was a stranger to me." Instead of telling him, she dutifully got pregnant and their first child was born. Despite all the "Who's Afraid of Virginia Woolf-like diatribes" they had, they produced beautiful babies." Lila worked and "dropped her first two babies like a

peasant woman, always conveniently delivering babies so David would not miss any patient time." Patient time was always a more valuable commodity than Lila time. David never let Lila forget how "utterly hopeless she was." It made no matter that she worked long hours helping him with the business. When their third child and only son died at three months from Sudden Infant Death Syndrome, David "never forgave me for David, Jr.'s death, nor did he ever acknowledge his short, sweet life." In fact, if David had had his way, Junior would not have had a funeral. He did not want one. David had been on a golf course when their son died, so he never had to experience firsthand the anguish of the paramedics call, the police standing guard at the top of the stairs until the coroner came, little Rayne wetting her bed in terror, or the look of terror on Lila's face when she discovered her lifeless son. Lila insisted and David, Jr. was "allowed a funeral befitting his short, loveable life."

The fallout from Junior's sudden death rode ripshod over the family. Lila insisted on getting pregnant again, and within months she was "blessed with a third daughter." David, full of "cat-of-nine-tail beatings," shelved away in closets of denial ignored Lila and "contented himself with hot air balloons, his practice, and automobiles to repair his empty heart."

Ironically, to the rest of the "not knowing world," Lila and David looked like the "perfect happily married if not slightly eccentric family." Lila was president of the school board, David an "avid golfer." Since they were always busy, no one thought it "too unusual that their living room furniture consisted of a Mickey Mouse cardboard house, while their garage was decorated with three of the hottest cars."

When their oldest daughter acted out the magnitude of their discord, Lila once again sought help. Breaking out of an "abusive relationship" was not easy. It took all the, courage she could muster, "frightened spiritually, emotionally, and financially." Lila shared,

I never knew what David would do next. I was always walking on eggshells. One day he would take all the charge cards away from me, yelling and screaming I was no good. The next day he would take me out and buy me a Cartier watch. Life was never simple. I didn't like him and I didn't know how to leave him, and I loved him. In the meantime I interviewed divorce lawyers who scared me even more. He reluctantly agreed to go to counseling. We signed a peace treaty of sorts, bought living room furniture, and took a vacation by ourselves. We were civil to one another.

Lila went back to work and explored career options she had long ago given up. David, however, became "increasingly cold, refusing to take responsibility for his business." David it seems was constantly battling with a script he was never allowed to write. "You see, David became a doctor just like his uncle Harry, and like his uncle who dropped dead at the age of 47, David died at the age of 48." To this day Lila can instantly conjure up the events of that fateful evening when she returned home from a late night of teaching:

I opened the garage door and his car wasn't there. I thought, this is really peculiar. I couldn't quite figure out what was going on. Papers were thrown all over the house and a telephone book was open. I went upstairs. Brooke was



asleep and Rayne was on the phone. Rayne said, "Dad said that he went to get a prescription and he didn't feel well." I thought that's really strange. I called his car phone and he didn't answer. I cannot tell you whether it was a sixth sense or because I have in my life had so many personal sudden death tragedies that I became hypervigilant. Something didn't make sense, especially because he didn't answer the car phone. The hospital was less than a mile to our house. Nothing was making sense, but the telephone book was open to David's doctor of record at the time whom I had known before. I called the doctor and asked, "What's wrong with David?" He said he had complained of a stomachache "but we decided to get a prescription so I sent him over to the hospital to pick it up."

Lila went back upstairs to Rayne and told her she was going to drive to the hospital and see why he was so late.

I drove through the hospital parking lot and his car was not there, but I continued to call his car phone. By this time my anxiety was growing. I got back on the freeway and there, in the middle of the freeway, his brand new car had fish-tailed into the guard rail. I rolled down my window and said, "Excuse me, I think that's my husband's car. Where is he?" The officer said, "You have to get over to the side." To this day, I don't know which lane I was in and how I got over to the side. He said, "Your husband had a little heart attack and you'll have to go back to the hospital, but don't worry, it's just a little heart attack." I called my daughter Rayne and asked her to call her

older sisters, and told her what had happened. Somehow or other I got off the freeway and drove to the hospital.

When I returned to the hospital a man was standing at the door. "I understand you brought my husband in. Where is he?" He said, "I can't tell you anything." Then a nurse came out and said, "I can't tell you anything." I said, "Oh yes, you can tell me something." He was dead. I called my children and told them they needed to come to the hospital.

What followed afterward is best encapsulated in a series of snapshots. Friends poured in to help. In-laws descended like vultures. "My mother and father-in-law accused me of killing their son. They said my youngest child was rude at the funeral, that the rabbi was not really Jewish, nor the food truly kosher." My sister-in-law said "I ignored her family. They were outlandish and rude. They never offered an ounce of help."

The girls were crushed. They huddled together listening to Eric Clapton's "Tears in Heaven," which blared across the funeral floor. Their teachers and friends stood by.

David's business was in disarray. For a practitioner who never had a lawsuit, he was suddenly being sued. "I was a regular at small claims court." He had "exploded his charge cards in a buying frenzy." His "business had been ignored and what once was a successful practice was never more." Running to work, selling a practice, being with children was "confusing and at times overwhelming."

And yet, Lila believed "David's death was a gift." It was the only way for him to get out, to be free of the tyranny in which we lived. It was the only way he could give all of us the opportunity to grow." In that way his death had a purpose and a meaning beyond just the events. For Lila, David's death has meant:

There will never be anyone who will refuse to buy me a package of kleenex again or who will take away my charge cards. I can buy whatever I want.

There's no one telling me I'm dumb, I'm stupid, you can't, I won't. There is no one telling Sibley, our oldest daughter, she needs to be a cosmetologist or telling Rayne she has to go to Grove City College.

The freedom Lila feels seven years hence is the freedom of choice. "I can do whatever I want. Some of it has to do with material things. I can buy what I want. There is no one threatening me." Lila is proud of herself. She has worked and studied full time.

Today, Lila feels free to forgive, to forgive herself for making poor choices and to forgive David. She is quick to point out that without "a network of steadfast friends, I wouldn't have gotten this far." Friends like Ruthie Lee, Barbara, Nancy, Jayne, and Alan always allowed me "to be crazy, permission to be myself." Charlie stood by Lila like "only another widow could." She helped her "pick out the casket, decide what clothing to put on David, as if it really mattered, to share what it's like to sleep in an empty bed, to want to be held." Mike, Bob, Darrell, and Beverly taught her how to manage her money, take out loans, and apply for Social Security benefits.

Donna and Jason listened "to my psyche, they told me what was happening was normal, and the pain would go away."

Sibley, Rayne, and Brooke, tumultuous and tenacious at times, fueled Lila on. Each, Lila knows, has grieved in her own way. "Each has her own story to tell."

Every August, Lila feels as if David jocularly enters her body as she begins to be obsessed with cars. "David loved cars and at one time or another he owned every good car there was (Mercedes, Saab, BMW, etc.)," although they were not necessarily in fine working order. "His favorite car was an Avanti which he ordered direct from the factory and had it shipped to him, his usual September birthday present." Like everything else, David got tired of it and eventually sold it for cash and a pool pump, even though he did not have a pool. Upon his death, Lila was faced with having to return his unscathed, brand new 2-week leased car. The dealership wanted her to pay for the car. She told them in no uncertain terms she would never drive the car, and after much haggling along with the threat of running a full-page ad which said, "If you love your wife, don't lease this type of car." They took the car back. Today she laughs as she knows it is almost time for her to go car shopping and she wonders what "practical jokes David will play on me as he enters my body, driving me crazy with indecision as I test new cars."

Sometimes Lila will visit David. "His grave is only three spots away from our son's grave. I share with him our children's successes and sorrows." The gravesite is a peaceful place, well groomed and warm. Through the years Lila has learned the easiest way to deal with David's birthday, their anniversary, or any important event is

to allocate a portion of the day to a specific ritual. In that way, her days do not become clouded. Sometimes Lila is angry with David, especially if one of the girls is having difficulties. Sometimes she wonders in a childlike fashion, "Does David know what's happening here on Earth? Where do you go when you die?" Or sometimes she laughs and imagines David and her mother are busy eating Chinese food at a "Big take-out-in-the sky." Today Lila is grateful. "After all, his death has given me the freedom to fall in love, to remarry, and to excel academically in my career, to emerge. Life is good."

### Ruthie Lee

Ruthie Lee was widowed at the age of 54. She is a Black American woman whose husband died of a heart attack at home. She is a Baptist whose strong faith in God continues to sustain and strengthen her through the loss of her husband. She holds a Ph.D. and teaches in a university.

Ruthie Lee was at the "apex" of her career, well respected nationally and internationally. She relished her work and enjoyed the challenges and fruits of her professional life. Her life with Douglas was a good one:

We had an honest, open relationship. We were supportive of each other in what the other one thought was best for their lives. We discovered our similarities and our differences, and we learned to live with them. . . . He was my best friend.

While Ruthie Lee fretted about Douglas' weight, she occasionally would stop at Dairy Queen after her late night class and surprise him with his favorite banana

split treat. Tonight was to be one of those nights, and when she came home and found him lying in the hallway, she thought he was playing one of his usual practical jokes. Ruthie Lee jocularly called out: "Why are you lying in the hall. You know I can see you in the hall. I stopped on my way home, it was 2 for 1 banana split night at Dairy Queen."

When there was no response, she walked up to him, "kicked him lightly on the bottom of his foot. His whole body jiggled." She called his name again; there was no response. She grabbed the cordless phone, came back, and called 911. She kept calling him and shaking him, and his whole body jiggled like jello." While at one level she knew he was dead, she did CPR until the paramedics arrived with their electric paddles. She stood in the corner watching silently as they "put him on the paddles 20 or more times. They put the adrenalin shot into his heart and the line was just flat. I said, 'no more, no more.'" And when the female paramedic asked Ruthie Lee what could she do for her, she told her, "the only thing you can do for me is wake him up." But waking him up was something no one could ever do, and so Douglas, the love of Ruthie Lee's life, whose love was first broken up by her family when she was a freshman in college, only to be reunited by her family while she was a graduate student in Texas, would never again taste the sweetness of a banana split. Just before they moved him onto the stretcher, Ruthie Lee said, "he had this great smile on his face. To me, knowing how we were and our relationship, that was his sign to say, 'it's okay. I'm okay.'"

Life without Douglas was different. Ruthie Lee always saw herself as "very independent and very self-reliant." I did not realize how dependent our lives were. My ability to fly was because Douglas was the wind beneath my wings." His death made her realize how much she depended on him.

The little things he did, like take out the trash, mop the bathroom, dump the dishwasher stuff that I just never did. There was no one to share my life with anymore who understood my frustration at work because the computer froze, or I had gotten a paper accepted someplace, or I had a student that I had been struggling with who made a breakthrough. No one to listen to my petty little life anymore. That was a big change for me.

Home for Ruthie Lee has always been "a safe place, fun, full of life and love. It's my cocoon. . . . My mom lived in this house and Douglas lived in this house, and those two people I always knew loved me unconditionally." Today her home resonates with papers, boxes, articles, clothing, artifacts from many travels abroad. The presence of Douglas is apparent. The large room he called his own remains "open," relatively unaltered. A well-stocked bar waits for guests. Television sets stacked atop another to watch simultaneous sporting events, and overstuffed reclining chairs "which are similar to the ones where they would sit up and watch each other sleep" are welcoming. Our interview took place in Douglas' room.

After Douglas died it was Lila who was the most helpful.

Lila let me be crazy, let me ramble, and when I got too far out she would bring me back. And I knew she really cared. . . . I just knew she really

understood whatever plane I was on that she knew what it meant. She always knew the right time to call or to send a little funny card. She instinctively knew what I needed to have without my having to ask or say what I needed. Other friends would not leave her alone. Couples demanded I continue to be with them or travel with them. They have remained friends.

When I wanted to withdraw because of my feelings about being single, they didn't buy it. If I made up an excuse they would pick me up and take me out of my office. Three years later I've resigned myself to the fact that we are friends, whether I'm single or a couple I just go out and enjoy it.

Ruthie Lee has always been a world traveler. Being retired, Douglas usually accompanied her on all her sojourns. Taking a European cruise with friends two years after his death proved to be an emotional yet healing experience.

I cried at every port at something that I enjoyed or something that I thought he would like. . . . Just little things would trigger it. I'd see a couple talking or discussing something, a purchase or something. . . . Finally, at some point I reconciled myself that he was here in spirit and we were still enjoying it.

Not only did Ruthie Lee talk to Douglas on that trip, she also felt his presence as a practical joker moving things in her stateroom, or hiding a travel book before she left. In fact, Ruthie Lee talks to Douglas all the time: "When I'm sad, when I'm happy, when things happen. I have found that very useful for me. . . . I don't think I'm one of those eternally bereaves, but he's still an important part of my life." Perhaps Ruthie Lee's bed reflects this even more for one side is "cluttered with stuff"



as she sleeps "in one little side of the bed, in one little spot." Or maybe her bed is merely cluttered because she is free to put whatever she wants on it. The truth most probably lies somewhere between those two domains.

Dating is something she has not chosen to tackle. When her friends started inviting single men to meet her, Ruthie Lee responded: "Listen, I've found two, three, four men in my life. When I get ready for another one, I'll let you know. . . . Stop pulling all these dead men out of the woodwork for me." That does not mean she has not enjoyed a long distance "flirtation kind of thing that satisfied whatever romantic urges" she has. "It's okay, safe, and makes me feel fueled up." Today she does not seem to have the energy a relationship takes.

I enjoyed my life with Douglas. It was comfortable, it was rewarding, it was nice. I don't know if I can do that again. I don't know if anybody is going to give me the freedom to be who I am and to do what I do, or if I am going to let anyone penetrate my life. Maybe one day someone will make my big toe stick up. But you have to remember my mother was a widow and also one of the original "feminists" before the word was invented about defining who she was and what she wanted in life. And I'm sure that affected my relationships with men.

Ruthie Lee believes simply because African American men die younger (47 as opposed to 62 for white men), that she has had more "exposure on both a conscious and unconscious level to successful widows." That does not mean, however, that Ruthie Lee does not at times "feel alone and isolated." She describes herself as a

widow and at times as a 'grass-roots widow, the struggling widow.'" Nor does it mean that she has not felt anger or despair. Douglas was the "needle-threader in the tapestry they wove together."

Douglas threaded all the needles because I can't see. When I had a button break off and I needed a needle-threader and I was fooling around with the thing for about five minutes and I couldn't get it threaded, I just started yelling, why did you die and leave me without threading these needles? Why did you leave me without preparing me for this?" Somehow he should have told me, "I'm dying today, Ruthie Lee."

Venting her anger has been good for Ruthie, it is cathartic. Yelling about having to put out the trash, cleaning the stupid bathroom, unloading the dishwasher or being mad because Douglas could not share a banana split all have been ways of dealing with a painful loss.

Anchored by a rich belief in God, Ruthie Lee has been sustained by her religious beliefs and her church.

No matter what I was feeling and no matter what I wanted to feel, my prayer would be, Lord, give me what I need to endure and whatever I needed to get through always came at the time I needed it. So that has been my real foundation. Being in touch with my own spirituality has been an anchor for me.

Today, Ruthie Lee has forged a life filled with a mixed bag of new-found freedoms. Financially she has always been a woman of independent means, and while

she says she is winding her way at 57 into retirement, she continues to assume leadership roles. Education and travel are important to her. The seminar she teaches "On Death and Dying" takes on a new meaning. "I am more mindful of the process of dying and more respectful of grief." When she visited the coroner's office with her class, she remembered talking to the coroner when Douglas died and telling him, "Douglas doesn't like the cold. I know he has to be there, but do what you have to do to get him to a warm place as quick as possible." Sharing that with students has helped her as well as others.

Today, Ruthie Lee is free to make as many messes as she wants. It only frustrates her cleaning lady who has to work around the mounds of clutter. There is no Mamma Daisy or Douglas around to scold, to tell her not to junk things up. Moreover, she says, "when I eat my family is fed. When I turn the lock in my door and close it, that's the only person who is going to come in at night. It's a certain kind of freedom that I like and enjoy." She attributes much of her resiliency to the fact that she learned to enjoy herself as "a person and a human being very early in life." She has fun with herself, knows herself and is able to take off to see "the windflowers bloom in the desert or see the snow in the mountains." She enjoys herself.

Ruthie Lee shared, "From the earth we all come and to the earth we shall return, but what we do by the wick of the candle that's burning is what is significant in life." It is clear Ruthie Lee has a lot of wick left to burn.

### Summary

This chapter presented demographic data and a detailed description of each participant which documented and illuminated the complexity of her unique experience as a widow. In each portrait, I was careful to blend together the empiricism of the research with the vicissitudes of portraiture to develop a narrative which simultaneously emerges and informs the reader.

Chapter 5 will include an overall discussion of the dissertation. A summary of this research project is given along with a discussion of its strengths and weaknesses. Future research considerations are also articulated.

## CHAPTER 5

### DISCUSSION

The purpose of this study was to explore the transformations, experiences, and challenges of women who were widowed before age 55. Participants in this study were women who were widowed for at least two years, and who were professionals, businesswomen, or community activists. Literature was reviewed within the context of transformation which is defined as a change in form, appearance or character, and metamorphosis (Flexna & Hauer, 1987). For this study, the death of a spouse was defined as a transformational event in the life of a married woman. The nature of the transformation varied for each participant. Women of diverse ethnic backgrounds were purposefully sought to participate in this research. Thirteen women were interviewed.

Portraiture (Lawrence-Lightfoot, 1983, 1994; Lawrence-Lightfoot & Davis, 1997) was the qualitative methodology used. The major research question for this study was: How has the life of a woman changed since the death of her husband? Specifically, this study asked the following questions:

1. In what ways has being a widow transformed you?
2. In what ways has being a widow transformed your relationships (with spouse, family of origin, in-laws, friends, and children)?
3. In what ways has being a widow transformed your career?
4. In what ways has being a widow transformed your life economically?

Demographic data--age, means of death of spouse, duration of widowhood, number of children, religious preference, ethnicity, and education were also obtained.

In this chapter the major research questions will be discussed as well as other significant research findings such as grief and bereavement, dating, sex and remarriage, bedrooms, rings, and clothing. Attention will be given to the ways in which the participants reported friends, family, or professionals responded to them as they reordered their lives and established new priorities. Eleven major conclusions of this study will be presented. Recommendations for future research will be made and the efficacy of member checking as a qualitative research tool with this population will be discussed.

After meeting these women and listening to their stories, it became increasingly clear that the death of a spouse, whether it was sudden and unexpected or a result of a known illness, inextricably altered their life course and life view. These women do not take life for granted. At times they are hypervigilant, for each one has experienced the fragility of life and the pain of loss, the uncertainties of a today they never anticipated, and a future they cannot predict. In short, in less than a hiccup of time, the lives of these 13 women were transformed by the death of their spouse.

At the outset of this study, I was interested in a series of research questions. Of primary interest was the issue of transformation. It is readily apparent from the data that these women were transformed by the death of their spouse. All of these women learned new ways of looking at their world. They rearranged their priorities, modified their identities, and took on new challenges. In sum, these exceptional

women faced the death of their spouses with courage, laughter, sorrow, determination, and zeal. What is not clear, however, is whether the resiliency--their ability to rebound, to reconstruct themselves into independent beings--which they demonstrated was already part of their identity or did they discover new ways of being as a result of the perilous journey they faced as widows? An argument probably can be made in either direction, and the truth as we understand and define it may lay somewhere in between. For example, when one closely analyzes the lives of Roslyn, Lila, Angela, and Ruthie Lee, it is possible to argue that these women demonstrated exceptional survival skills at an early age. Roslyn left home at the sixth grade to wield her way out of poverty. Lila survived her father's suicide and her mother's bouts of alcoholism. Angela survived her mother's schizophrenia and abuse, while Ruthie Lee enjoyed the fruits of having one of the "first black feminists" teach her how to navigate her world. Hence, their responses to the death of their partners may be viewed within the context of adaptation, that is, their opportunity to call forth already successful coping patterns. However, for others the death of their spouses might be seen as a springboard which has allowed them to think, feel, and act in new ways. Julie, Belice, Lee, and Helen may never have expanded their formal education nor would have Joan faced up to her alcoholism. Barbara may never have moved on to become a shop owner or Chloe an award-winning designer. Lee might never have had to concoct an array of flexitime jobs from substitute teacher to entrepreneur. Helen may not have become a public health educator for other Hispanic women. Meg might never have discovered how much she enjoys writing and serving others through

the establishment of charitable trusts nor Lila learn about love had not the space for these new freedoms been created. All of these women attribute their identity changes in large part to the death of their partners. While these findings are consistent with the earlier adaptational work of Shuchter (1986) and Di Giulio (1989), they are more akin to Aldersberg and Thorne's (1990) research which suggested that rather than acceptance and adjustment being the dominant modality, freedom becomes the driving force following the death of a spouse. This notion is consistent with the actions these 13 women have exhibited time and time again since the death of their spouses. It is clear that these women are the authors of their own narratives.

The participants still see part of themselves as widows, previously married women, regardless of the current duration of widowhood, which for this group ranged from 2 to 25 years. Being a widow is part of their identity. It is neither right nor wrong, good or bad. It is just a part of who they are and who they will become. This finding is in sharp contrast to Di Giulio (1989) who asserted that in order for a woman to undergo a successful metamorphosis, she must cease seeing herself as a widow and accept herself as a single adult. This is more in concert with Lopata (1996) who gently suggested a woman must reconstruct her own identity not necessarily unmarry the deceased.

A second aspect of transformation focused on relationships. In this section the discussion will focus on how these women saw their relationships with their husbands, their children, immediate family members, in-laws, friends, and other couples, and religious affiliations change.



The majority of the respondents (Angela, Belice, Chloe, Denise, Helen, Lee, Ruthie Lee) shared that their husbands had been their best friend, lover, confidante, and soul mate. Many felt a part of them died with the death of their husbands. Only Lila clearly indicated the death of her spouse represented an escape from what had become a deleterious relationship. Three women (Meg, Lee, Joan) discussed marital discord. Barbara and Lee were careful not to idealize their spouses and looked back at their relationships in realistic ways. No matter what their relationships were or were not, all of the participants were striking in their descriptions of a continuing relationship with their deceased spouses. These relationships varied with each respondent and ranged from Chloe's terrifying dreams to Belice's guardian angel, Ruthie Lee's practical joker to Meg's playful tiger. These descriptions are noteworthy and substantiate the earlier works of Caine (1974), Cuming (1981), Gates (1990), Nudel (1986), and Saunders (1979). Having a continuing relationship with their deceased spouses by establishing a scholarship program or naming a business after him was something Barbara and Meg chose to do. All of the women admitted talking to their deceased spouses. Many of the respondents reported getting angry at their spouses for leaving them, while others discussed significant family events with them. While the respondents aged, their deceased partners remained frozen in time, forever young. For some this has been annoying.

Having a continuing relationship with a deceased spouse is a particularly salient finding. First, for these women, this was a normal occurrence not a pathological distortion. In fact, having a continuing relationship for most of these

women has been a successful coping strategy which allowed them to move forward. Second, this finding gives credence to the notion that a woman who has experienced the death of a spouse will maintain as part of her self-identity the role of a married woman and will call forth that identity from time to time. Thus, a part of her will always be a widow, a previously married woman.

For those women who had children, their sons and daughters were their top priority. Their children were the most important people in their lives. Upon the death of their husbands, most of the women reported being emotionally and physically unavailable to their children. This is consistent with the trauma these women faced. All were thrown into situations for which they had no prior training, for example, planning a funeral, running a business, applying for Social Security benefits, living in a new country or a new city, being a single parent, and so forth. The enormity of their responsibilities, coupled with their grief, left them physically and emotionally exhausted.

All of the participants reported that at least one of their children experienced long-term emotional distress. Both younger children 5 years and under, as well as older children 16 years and above, had emotional and behavioral difficulties. Fear of abandonment was a universal issue for all of the children. Behaviors such as screaming, hiding under the bed, depression, and running away were observed in younger children, while poor school work, depression, alcohol, and other drug use were reported with teenagers. At the same time, these women related with pride and realism their children's current personal and professional successes. All women faced

the dilemmas of childrearing. They acknowledged the difficulties of being a single parent and questioned their ability to parent. They attempted to learn how to be a better parent. Many times they felt guilty as they watched their children struggle. All were willing, when necessary, to seek professional help. They were sensitive to their children's needs, especially at high risk times of the year such as Father's Day, birthdays, graduation, and holidays. At time they were hypervigilant in their duties and in their attempts to keep their children safe. Setting boundaries and limits was something with which they struggled. Finally, they all reported growing closer to their children.

In sum, these findings suggest that new widows are initially shellshocked by their own grief and as a result are thrown into a host of new and unexpected responsibilities. Their children were assisted by friends, teachers, relatives, and professional counselors during this period of nonintentional unavailability.

Women whose mothers or fathers were alive at the time of their spouse's death reported that they were a source of support. Denise in particular received a great deal of assistance from her parents, both emotionally and financially. Meg and Lila took their children to visit their mothers. Helen's mother moved in with her, and Julie's mother tried to help with her daughters. Barbara, however, indicated that her mother was not emotionally available to her.

Sisters were also mentioned as a source of support. Chloe, Denise, Helen, and Ruthie Lee reported that their sisters have been quick to include them in social functions and outings. For these women their sisters have been life-long friends. The

degree of support from all members of the participants' immediate family depended upon their prior relationship, geographic proximity, and ability to give.

Unlike Carter and McGoldrick (1988) who noted that ethnic groups differ in how they manage life style events--such as birth, marriage, launching children, and death--these 13 women reported similar experiences with their mothers and sisters-in-law, with the exception of Roslyn, the only participant who was born in a foreign country and whose relationship with her in-laws never faltered. All respondents reported strained relationships with in-laws, ranging from arguments over where to bury their spouse (Joan), tongue lashings accusing Lila of murdering her husband, Helen's court battles to Chloe's and Denise's reluctance to give away articles of clothing. All respondents reported that they felt as if their in-laws ransacked their homes as they searched for mementos of their sons and brothers. Three of the women (Meg, Denise, Lee) have chosen to maintain a relationship with their mothers-in-law so that their children might have a relationship with their grandmothers. Five of the women (Barbara, Chloe, Helen, Joan, Lila), in varying degrees, chose not to continue their relationships with their in-laws.

Sisters- and brothers-in-law were more often than not described as not helpful, often vitriolic in their actions. Chloe, Denise, Helen, Lee, Lila, and Meg described intense emotional scenes which erupted in severed relationships. This finding is consistent with Balkwell's (1981) and Lopata's (1996) research which indicated widows depend more on friends than families. As Barbara suggested, perhaps the strain in these relationships may be based on ignorance. Steeped in their own anguish

over the death of their son or brother, widows become easy prey. Or perhaps the responses of in-laws are merely the reflection of a previously exacerbated relationship. Whatever the cause may be those who work in the bereavement field (funeral directors, counselors, clergy, etc.) should take note of the potentially volatile relationship that can erupt between the new widow and her in-laws.

As reported by Lopata (1979, 1987b, 1987c, 1996), friends are the greatest source of support for widows. In Lee's words, "they are the most precious diamond any woman can have." For all of the respondents, friends allowed them to sort through who they were, what they were doing, and where they were going at their own pace. Common to all was their friends' ability to be a pal, to be attentive, to be silent when necessary, to listen, to cry or laugh with them, to invite them out, to let them call at all hours, and to accept them as they were, knowing that for now they needed to receive more than to give. For some their friendships changed over time, reflective of their changing identity, maturational tasks, personal and professional priorities.

Belice, Lila, Meg, and Ruthie Lee reported that other widows were most helpful to them. With other widows these women felt free to speak the language of death. Having been through a similar yet totally different experience than they had, these women stated that their widowed friends had a clearer understanding of how they felt and with whom they could be themselves. This finding is consistent with the earlier works of Caine (1974) and Silverman (1986).

Friendship with other couples received mixed responses. For Barbara, Chloe, Julie, Ruthie Lee, and Roslyn, the friendship they enjoyed with other couples did not change. These couples have continued to include them on weekend outings, vacations, special occasions, and holidays. For Angela, Belice, Lila, and Meg, some couples have stopped socializing with them. It is difficult to say why this occurred. The most frequently mentioned explanations were: (a) The widow is seen as a potential threat to the couple's relationship. (b) The widow is uncomfortable with her new single role. She feels like a third wheel in the group. (c) It is too painful for all of them to be together. The memories of the deceased are burdensome. Avoidance is the only way they can mask the pain of their collective loss and their own fears of death. (d) The couples are uncomfortable with their own marital relationships and project their discord on to the new widow.

With the exception of (d), these findings are consistent with past research (Lopata, 1996; Shuchter, 1986; Zisook & Shuchter, 1990) and the black widow and merry widow myths of widowhood (Ericson, 1993; Lopata, 1996).

The participants in this study had varied religious orientations and practices. They identified themselves as Baptists (Belice, Helen, Ruthie Lee), Jewish (Lila, Meg), Buddhist (Julie), Roman Catholic (Lee, Roslyn), and Protestant (Angela, Barbara, Chloe, Denise, Joan). All of the women found the death of their spouses challenged their religious beliefs. Angela, Chloe, and Lila clearly became angry with a god who they believed continually tested them. Belice, Joan, Meg, Rosalyn, and Ruthie Lee felt welcomed by their places of worship. Parishioners and clergy reached

out to them. Grief support groups under church auspice were attended by Belice, Joan, and Ruthie Lee. Although all felt these groups were well meaning, only Joan felt they were helpful. Meg became fascinated with spirituality and began to study the Kabala to learn more about Jewish mystical traditions. This matched well with her interests in eastern meditation. Angela has felt a spiritual calling in her work as a prison nurse, her fascination with angels, and her pilgrimage to Guatemala. Julie, however, has experienced feelings of isolation at her Temple. In keeping with cultural practices, the women at her temple did not reach out to her. They did not allow Julie to discuss her grief. Her religious beliefs in Buddha have not altered. However, she does view the women of her Temple with caution.

The remainder of the women made little reference to organized religious practices. Joan clearly believes God has a plan for her and she starts each day with his word. She, like all the women in this study, believe in varying degrees that there is a power greater than themselves which has helped them through this perilous journey. This finding suggests that the use of organized religious practices as a social support for widows may be dependent on their prior religious beliefs and behaviors and the degree of receptivity perceived by the women at the time of their spouses' death.

Beyond the transformation of relationships, this study was also concerned with how widowhood transformed or altered the career paths of these women. With the exception of Joan who has continued her career as an elementary school teacher and Denise who has continued working as a medical technician, the respondents are doing

something other than what they imagined they would be doing during their married lives. Today Chloe is an award-winning designer. Barbara is a successful clothier. Roslyn teaches psychology and sexology at the university level, and Lila is completing her doctoral studies and is employed as a lecturer at a local university. Julie works full time while she pursues her second baccalaureate degree, and Belice is working on her bachelor's degree in business as she continues to work in the financial field. Meg has written several short stories and has become president of the board of a global charity. Ruthie Lee serves as the director of a major university program and has been invited to teach in South Africa. Angela works as a prison nurse and is about to make a pilgrimage to China where she will work with Chinese widows. Lee juggles her world with flexitime jobs and has earned a massage therapy license, a substitute teaching credential, and has capitalized on the public's fascination with cigars by holding the distribution license for a local sports arena. All of the women agreed that they might never have chosen these paths or rearranged their priorities if the circumstances of their lives had not been altered and they have forged new ways of being. As Julie suggested, they have experienced metamorphosis. Like the butterfly drawing which Julie brought into my office, the participants in this study are emerging from the chrysalis. They express pride in themselves and their accomplishments.

Finally, being a widow transformed the economic lives of these women. With the exception of Meg and Ruthie Lee who were financially independent prior to their spouses' death, the participants reported varying alterations in their lives



economically. Initially all suffered the loss of their spouses' incomes. Lila faced the arduous task of disposing of real estate and a medical practice. She received less than 10% of its actual worth. This significantly altered her family's income. Helen was forced to go to court to recoup some of her inheritance. Roslyn, Angela, Denise, and Lee experienced a decrease in their annual incomes. Angela and Lee have worried about keeping their homes. In retrospect, they wish they had had mortgage insurance. Denise and Lee are grateful for the Social Security benefits they receive for themselves and their children. These benefits augment their earnings. Roslyn, however, was not eligible to collect Social Security benefits due to the fact that at the time of her husband's death, she was not a United States citizen.

Today Joan and Julie are financially better off than when their husbands were alive due to handsome insurance settlements. Joan reported she is a better money manager than her husband was. She earns extra income teaching summer school. Julie has learned to manage the insurance funds she received following her husband's car accident.

Chloe and Barbara are women of independent means and are wealthier than they ever imagined, owing their wealth to their careers. It is important to note that these two women, as well as Ruthie Lee, have been working in their respective fields for more than 20 years, and their incomes are reflective of their talents and diligence.

The participants reported some difficulties in buying a car after the death of their spouses. This is one area in which they felt their knowledge was meager and they wished they had known more.

In summation, these findings are consistent with Lopata's (1996) research which indicated most widows experience economic loss upon the death of their spouses. These women are noteworthy as they are economically self-sufficient. These findings suggest the importance of estate planning, something none of the couples had adequately done. Finally, these women articulated the importance of education and careers in order that women have the ability to be economically independent. Helen pointed out the need for women to be well versed in financial matters. All participants believed that knowing how to balance a checkbook is of little importance unless one knows how to generate funds to put into an account. In their estimation, women must have the training, skills, and knowledge necessary to be economically self-sufficient.

#### Other Matters of Consequence, Issues of Bereavement,

##### Mourning and Grief

Consistent with the research of Shuchter (1986), Zisook and Shuchter (1986, 1992, 1993) the participants illustrated the multidimensional nature of grief and bereavement. While women whose husbands died a sudden death reported with the accuracy of a Hollywood film maker the details of that day and women whose husbands died following an illness have a collage of photographic memories the women described non-time specific, multidimensional grief reactions. Depression manifested itself at varying times over their life's course, not just in the initial weeks following the death of their spouses. Guilt and anxiety appeared to diminish over time, however, these feelings, along with sadness, are often triggered by special events (holidays, birthdays, anniversaries, graduation, etc.). The death of well-know

celebrities such as Princess Diana, President Kennedy, and Congressman Bono also triggered grief reactions. These feelings do not constitute pathology. This is an extremely important finding, especially for mental health professionals, as depression for the most part is not a pathological condition of the bereaved. Depression is an appropriate response to the death of a spouse. This finding does not diminish the importance of Meg's life-long battle with depression nor Julie's attempted suicide, for which both sought professional help. These findings are significant as they appear to reject a linear developmental stage theory of bereavement as espoused by Di Giulio (1989, 1992) and Shapiro (1994) in favor of a more fluid, flexible, and multidimensional approach (Aldersberg & Thorne, 1990; Shuchter, 1986; Zisook & Shuchter, 1986, 1992, 1993).

All participants except Barbara reported seeing a professional counselor following the death of their spouses, either for themselves or for their children. Those who saw a counselor reported doing so intermittently over a period of years. Counselors who acknowledged the enormity of widowhood were described as valued. These counselors accepted the respondent as she was, gave her practical advice, focused on daily living skills, answered parenting questions, listened attentively, and above all expressed value in this therapeutic relationship. Counselors who were quick to refer them to grief support groups, parenting support groups, or recommended antidepressants and anxiety medications and who did not focus on current life tasks were perceived as neither attentive nor helpful.

Two women reported negative professional group counseling experiences. Both felt the counselors did all the talking rather than listening. They felt the counselors in question had little understanding of their situations. These two women terminated group counseling and found individual family counselors. Only one woman actively sought support groups. The participants preferred speaking with friends rather than speaking with counselors. While half of these women reported that talking to another widow was most helpful, again, they did not seek out widow support groups. This finding differs from Silverman's (1986) work on support groups and suggests this population prefers one-on-one relationships with professional counselors and other widows.

#### Dating, Sex, and Remarriage

All participants except Barbara, Joan, and Ruthie Lee have dated since their spouses' death. Barbara has never entertained the idea while Joan and Ruthie Lee have rejected the offers they received. All participants reported dating and sexual intercourse is healthy. Most of the women preferred having a friend or lover rather than another husband or a committed relationship. Ruthie Lee and others explained, part of themselves died with their spouse. "It felt like my leg was amputated," as Angela stated. Lee and Denise further explained, there is a part of themselves locked away in a little box, a vulnerability they do not wish to expose. None of the women have felt guilty about dating. Some believed their spouses wanted them to date. All reported feeling awkward at first. They did not remember how to date or what the current norms and expectations were. They were novices in this area. Denise, Helen,

Lee, and Meg reported difficulties bringing a man home. Their children's responses varied from welcoming behaviors to temper tantrums. Only Lila has remarried. This finding is consistent with the literature which indicated less than half of all younger widows remarry (Di Giulio, 1986).

#### Other Life Changes: Bedrooms, Clothing, and Wedding Rings

Hot topics included bedrooms, clothing, and wedding rings. All participants have moved or redecorated their bedrooms and purchased new beds. Several piled clothing, pillows, books, magazines, newspapers, office work, and so forth on what was once their husbands' side of the bed. Others leave that side of the bed untouched.

What to do with their husbands' clothing was problematic. Some participants left articles of clothing or jewelry in their bedrooms while others gave the clothing to charity or sold them. Lila threw away her husband's shoes because her in-laws warned that to do anything else was an "evil omen" as it was bad luck to walk in a dead man's shoes. Ruthie Lee gave her husband's shoes to charity, and Denise saved her husband's shoes so her sons could enjoy walking in their father's footsteps. Other women packed their husbands' clothing away, leaving it under the bed in plastic boxes or stored away in their garages. One woman heard about a widow who had made a quilt out of her husband's clothing, and a few participants reported sleeping in their husband's shirt or wearing their robe so they could keep his smell. Still others let their children pick out articles of clothing they wanted to keep. Sweaters and watches went to children as keepsakes. All participants agreed that moving on meant taking their husbands' clothing out of the bedroom. Belice, Lila, and Ruthie Lee

jocularly reported that as soon as they removed their partners' clothing, the extra space was quickly covered up by their ever-increasing wardrobes.

Wedding rings were also a source of confusion. To wear or not to wear, that is the question? One woman thought about making her ring into a belly button ring as she thought that would make her husband smile. Another participant had it made into a necklace. A few women continued to wear their rings intermittently, putting them aside in jewelry boxes or safety deposit boxes. The rings if worn today are worn on their right hand as opposed to their left hand. These women also expressed confusion about what to do with their wedding rings once they started dating again. There appeared to be no right or wrong thing to do, although the majority stopped wearing them. The bewilderment of the participants regarding their wedding rings is consistent with Lopata (1996) who observed there is no clearly defined role of a widow in modern America. Thus, it comes as no surprise that women do not know what to do with their wedding rings. It is possible to conclude that whatever one does is right as long as one is comfortable with the decision. There is no appropriate etiquette in this area.

### Summary and Conclusions

This qualitative research study has explored the lives of 13 women who were widowed before the age of 55, who are professionals, educators, businesswomen, and community activists, to learn how their lives were transformed since the death of their spouse. Portraiture (Lawrence-Lightfoot, 1983, 1984; Lawrence-Lightfoot & Davis, 1997) was the primary biographical methodology used. Purposive sampling provided

the opportunity to interview women from diverse backgrounds. Five global, open-ended interview questions were used (see Appendix A) and demographic data were gathered. The data collected suggest every widow's experience is unique and universal and no two journeys through widowhood are exactly the same (Lerner, 1998). Life is a narrative in which, for the 13 participants in this study, marriage has been a major part of their conversations. The death of their spouses represented punctuation marks in their lives, leaving them with many questions and exclamation points. The death of a spouse has signified the end of their married life, a time in which they have been forced to reexamine what was, is, and yet to come. It is evident that these women in varying degrees still carry the conversation of their married life with them through the eyes of their children and the continuing relationships they have with their deceased spouses.

Given the multidimensional reality of these 13 women's lives, which at times has transcended traditional boundaries of time and space, these are exceptional yet ordinary women. The participants used a myriad of coping strategies to wade through the initial abyss of shock, anger, sorrow, and disbelief to come to where they stand today. In doing so, the winds of time became the threads which propelled them forward. Each thread knotted with their own determination and the support of other widows, friends, family, educational pursuits, work, and a commitment to children has served as the backdrop for their successes. Each has painted their own portrait of courage and determination.

In summary, the following major conclusions may be derived from this exploratory study:

1. The participants in this study are 13 unique women, each of whom has demonstrated in their own way courage, strength, and resiliency.
2. Grief for these women was a multidimensional not time-specific phenomena.
3. Depression as it relates to the grief following the death of a spouse is natural not pathological. Signs of depression may be exhibited at varying times over the life course.
4. Holidays, anniversaries, birthdays, graduations, other deaths, and even movies may serve as trigger points, rekindling memories of the deceased.
5. Having some type of a continuing relationship with the deceased spouse is a common occurrence.
6. Friends were identified as the most helpful social support. Having a close friend who was also widowed was valued.
7. Relatives received mixed reviews. Family of origin relatives for the most part were helpful, especially sisters. In-laws, especially sisters-in-law, were not a source of assistance or comfort.
8. Dating and sex were defined as healthy responses to their single status. Remarriage for the most part was not viewed as important.
9. Work and education served as anchors for these women.



10. For those women who had children, childrearing was defined as an important life task and a reason for tackling the world. All of the participants had at least one child who exhibited some emotional or behavioral problems following the death of their fathers. All sought professional help for their children.

11. Professional counselors were perceived as helpful if they had been good listeners, were attentive, were available over time, and gave practical suggestions. These women preferred individual or family counseling to widow support groups.

In addition, all of the participants commented on the efficacy of this research, and all shared that this was the first time they had discussed their married life in such depth and detail. The participants began our interviews indicating they had little to say and were amazed 90 minutes later to still be busily engaged. Amid the tears and laughter, all participants reported this experience had been positive, even good for them. Two of the women returned to professional counselors following our interview. They discovered they wanted to unravel additional issues and were grateful for the opportunity to reexamine their lives. All participants welcomed me and appreciated my positioned status. Because I also had been a widow, they assumed I was able to understand them. Each time I interviewed one of the participants, I was humbled by their gracious, honest words and catapulted onward by the richness of their lives.

In summary, the participants are remarkable women who have clearly demonstrated the strength of the human spirit faced with the death of a spouse. Each has made "courageous and imperfect attempts" (Lawrence-Lightfoot, 1994, p. 644) to reorder their lives. They have done so by depending on their own resources, aided at

times by friends, other widows, family, work, and education. Thus, they all have transcended the events of that fateful day and have painted new portraits of understanding.

### Recommendations

Upon being interviewed by Anne Tyler on November 2, 1980, the author, Eudora Welty, remarked upon rereading her collected stories:

It was the strangest experience. It was like watching a negative develop, slowing coming clear before your eyes. It was like recovering a memory.

(p. 342)

In like manner, as I reread the individual portraits of these 13 remarkable women, I felt as if I was present with them, reliving our time together. They as the participant, I as the researcher, together we are widows, co-collaborators in this research process. I am reminded of the vigilance and discipline I exerted as the researcher as I navigated my relationship with each woman. I am reminded of how I attempted to sketch each woman's story in her own voice to enable readers to think more deeply about the issues these women faced. I am aware of how I balanced my separate roles (woman, researcher, clinical social worker, wife, widow, mother) as I assumed the role of portraitist and how the words of noted researchers (Lawrence-Lightfoot & Davis, 1997; Lopata, 1996; Geertz, 1973; Shuchter, 1986; Zisook, 1992; Di Giulio, 1989; Aldersberg & Thorne, 1990) resonated through me as I sifted through each transcript. I was mindful of the reality that as the portraitist I hoped to add to the research literature on widows and inform others. It was my hope that this

research would deepen the conversation in this arena. As the researcher/portraitist, I discovered through this process that even though I interviewed women who had experienced the same event, that is, the death of their spouses, each woman's narrative was unique. Hence, depending upon your perspective these are the strengths and weaknesses of this study. If you are the type of scholar who wants to know if these 13 participants represent all American women who were widowed before the age of 55, then this research falls short. To say that these women represent all the variations of widowhood is surely to make a false claim. To say that these women strike a resonant, universal chord, evoke reader identification, and substantiate as well as challenge earlier research is appropriate. Expansion of this current study is warranted for theory building. Evaluation of the efficacy of this study by other women who were widowed may also be a worthwhile research endeavor.

Qualitative research methodology suggests member checking is a valuable research tool (Guba & Lincoln, 1989; Tutty, Rothbery, & Grinnell, 1996). In this research project, it was assumed each participant would check their transcript and make any necessary corrections. This process was thought to give participants an active role in this research process, assure trustworthiness, and aid in the triangulation of data. All participants were given their transcripts to correct. Two corrected stylistic errors (typing and grammar). Only one woman altered parts of her text. Ten of the women chose to do nothing with their transcripts. When asked about this, the participants indicated the interview had been a cathartic experience and for the most part a healing experience. They indicated that they felt no further need to relive or

revisit the experience. Four participants specifically requested a copy of the dissertation and asked to be invited to the dissertation defense. Thus, for this particular group, member checking was not an activity these respondents performed. Member checking may be an area which other researchers may want to revisit when interviewing people who have experienced the death of a significant other or an emotionally charged life-changing event.

Finally, qualitative research, in particular portraiture, is an exacting, exciting, demanding, rigorous, costly, time-consuming yet highly enjoyable and important research methodology. Research with those who have suffered the loss of a family member is a worthwhile activity. This research must be continued and expanded to include widowers who experienced the death of their spouses before age 55 and to the children of both widows and widowers. Like the women in this study, the tales of widowers and children are noteworthy. Thus, it is with the spirit of inquiry I trust this quest for knowledge and understanding will continue.

#### Afterthoughts to the Reader

January 1, 1999, Palm Desert, California.

It's New Years Day. The sky is clear. Palm trees sway in the foreground. The sun gently warms my back. The mountains dance in the background while the soft sounds of children playing and men listening to football games fill the air. Life, as they say, is good. I am the same and yet I am different. I love the desert. I always have. The desert symbolizes to me life, death, and transformation. Today the desert is my sanctuary, my temple of transformation.

Reflecting back over these last few years I realize my life has been passionately consumed by this research project. Not only by the 13 women included in this study, but the countless other women who were widowed and who I serendipitously met or purposefully sought out have enriched my soul. These women have taught me about the universality of widowhood for being widowed at an earlier age is not a singular, isolated event, rather it happens every day to someone you might know, to someone who is a little like you and a little like me. And just like you and just like me is both singularly ordinary and extraordinary as they face life's challenges. It is to these wondrous women, on this glorious New Year's Day that I stand on my balcony drenched by the sun and enveloped by their warmth and courage that I raise my hands in roaring applause.

## REFERENCES

Adlersberg, M., & Throne, S. (1990) Emerging from the chrysalis: Older widows in transition. Journal of Gerontological Nursing, 16(1), 4-8.

American Psychiatric Association. (1995). Diagnostic and statistical manual of mental disorders (3rd ed.). Washington, DC: Author.

Balkwell, C. (1981). Transition to widowhood: A review of the literature. Family Relations, 30, 117-127.

Balkwell, C. (1985). An attitudinal correlate of the timing of a major life event: The case of morale in widowhood. Family Relations, 34, 577-581.

Ball, J. F. (1977). Widow's grief: The impact of age and mode of death. Omega, 7(4), 307-331.

Beecher, M., Madsen, C., & Anderson, H. (1988). Widowhood among the Mormons: The personal accounts. In A. Scadron (Ed.), Widows and widowhood in the American Southwest 1848-1939 (pp. 117-139). Chicago: University of Illinois Press.

Belenky, M., Clinchy, B., Goldberger, N., & Tarule, J. (1986). Women's ways of knowing: The development of self, voice, and mind. New York: Basic Books.

Blanchard, C., Blanchard, E., & Becker, J. (1976). The young widow: Depressive symptomology throughout the grief process. Psychiatry, 39, 394-399.

Blom, I. (1991). The history of widowhood: A bibliographic overview. Journal of Family History, 16, 191-210.

Bowlby, J. (1980). Attachment and loss. New York: Basic Books.

Britzman, D. (1991). Practice makes perfect: A critical study of learning to teach. Albany: State University of New York Press.

Brown, B. B. (1978). Social and psychological correlates of help seeking behavior among urban adults. American Journal of Community Psychology.

Caine, L. (1974). Widow. New York: William Morrow.

Caine, L. (1988). A compassionate, practical guide to being a widow. New York: Penguin Books.

Campbell, S., & Silverman, P. R. (1996). Widower: When men are left alone. Amityville: Batwood.

Carter, B., & McGoldrick, M. (1988). Ethnicity and family life cycle. In B. Carter & M. McGoldrick (Eds.), The changing family cycle (pp. 69-90). New York: Gardner Press.

Carter, H. (1988). Legal aspects of widowhood and aging. In A. Scadron (Ed.), Widows and widowhood in the American Southwest 1848-1939 (pp. 271-300). Chicago: University of Illinois Press.

Carter, K. (1993). The place of story in the study of teaching and teacher education. Educational Research, 22(1), 5-12, 18.

Chamberlin, S. A., Chandler, M. M., Jarman, D. J., & Lofgren, R. L. (1982). Resource manual for the widowed elderly of San Diego County. Unpublished master's essay, San Diego State University, School of Social Work.

Cherlin, A. J. (1992). Marriage, divorce, remarriage. Cambridge, MA: Harvard University Press.

Chevan, A. (1995). Holding on and letting go: Residential mobility during widowhood. Research On Aging: A Quarterly of Social Gerontology and Adult Development, 17, 278-302.

Clayton, P. J. (1972). The depression of widowhood. British Journal of Psychiatry, 120, 71-78.

Cuming, P. (1981). Widow's walk: A personal journey through loss, fear, anger and love. New York: Crown.

Denzin, N. K. (1989a). Interpretative interactionism. New York: Sage.

Denzin, N. K. (1989b). The research act (3rd ed.). New York: Prentice Hall.

Digiulio, J. F. (1992). Early widowhood: An atypical transition. Journal of Mental Health Counseling, 14(1), 97-109.

Di Giulio, R. C. (1989). Beyond widowhood: From bereavement to emergence and hope. New York: Free Press.

Doka, K. J. (Ed). (1996). Sudden loss: The experiences of bereavement. Bristol, PA: Taylor & Francis.

Ericsson, S. (1993). Companion through the darkness: Inner dialogues on grief. New York: Harper Perennial.

Featherstone, J. (1989). To make the wounded whole. Harvard Educational Review, 59, 367-378.

Fitzsimmons, B. (1995, November 4). Healing a broken heart: Talking is key to recovery after death of spouse. The San Diego Union-Tribune, p. E-1.

Flexna, S. B., & Hauer, L. C. (Eds.). (1987). Random house dictionary of the English language. New York: Random House.

Foehner, C., & Cozart, C. (1988). The widow's handbook: A guide for living. Golden, CO: Fulcrum.

Freedman, D. (1996). To take them at their word: Language data in the study of teachers' knowledge. Harvard Educational Review, 66, 732-761.

Freedman, S., Jackson, J., & Boles, K. (1983). Teaching: An imperiled profession. In L. Shulman & G. Sykes (Eds.), Handbook of teaching (pp. 261-299). White Plains, NY: Longman.

Freud, S. (1953). Mourning and melancholia. In J. Strachey (Ed.) Complete psychological works (Vol. 14). London: Hogarth Press.

Friedman, S. (1994, July 10). A life goes on, stroke by stroke. The New York Times, p. 59.

Garrison, D. (1998). A working girl can win. New York: Random House.

Gass-Sternas, K. A. (1995). Single parent widows: Stressors, appraisal, coping, resources, grieving responses and health. Marriage and Family Review, 20, 411-440.

Gates, P. (1990). Suddenly alone: A woman's guide to widowhood. New York: Harper & Row.

Geertz, C. (1973). The interpretation of cultures. New York: Basic Books.

Gilligan, C. (1982). In a different voice. Psychological theory and women's development. Cambridge, MA: Harvard University Press.



Guba, G., & Lincoln, S. (1989). Fourth generation evaluation. Newbury Park: Sage.

Gueron, J. (1995). Welfare reform. Public Welfare, 53, 7-16.

Hagstead, G. O., & Neugarten, B. L. (1976). Age and the life course. In R. H. Benstock and E. Shanas (Eds.), Handbook of aging and the social sciences (pp. 35-55). New York: Van Nostrand Reinhold.

Hall, D., Jr. (1992). A widow's grief: The language of the heart. Journal of the American Medical Association, 268, 871-872.

Irving, J. (1998). A widow for one year. New York: Random House.

Jackson, T. (1997, February 10). A rough skate through grief. The Tampa Tribune, p. 1.

Jacobs, S., & Kim, K. (1990). Psychiatric complications of bereavement. Psychiatric Annals, 20(6), 308-314.

Jensen, M. D. (1977). The warming of winter. Tennessee: Abington.

Kramarow, E. (1995). The elderly who live alone in the United States: Historical perspectives on household change. Demography, 32, 335-351.

Lawrence, L. (1992). "Till death do us part:" The application of object relations theory to facilitate mourning in a young widows' group. Social Work in Health Care, 16(3), 67-81.

Lawrence-Lightfoot, S. (1983). The good high school. New York: Basic Books.

Lawrence-Lightfoot, S. (1994) I've known rivers: Lives of loss and liberation. New York: Penguin.

Lawrence-Lightfoot, S., & Davis, J. H. (1997). The art and science of portraiture. San Francisco: Jossey-Bass.

Lerner, H. (1988). The mother dance. New York: Harper Collins.

Lieblich, A., & Josselyn, R. A. (1994). Exploring identity and gender: The narrative study of our lives (Vol. 2). Thousand Oaks, CA: Sage.

Lief, L. (1997). Alone too soon: Young widows and widowers learn to cope on their own. U. S. News & World Report, 122, 65-68.

Lindemann, E. (1944). Symptomatology and management of acute grief. American Journal of Psychiatry, 101(2), 141-148.

Locke, L. F., Spirduso, W. W., & Silverman, S. J. (1987). Proposals that work: A guide for planning dissertations and grant proposals. Newbury Park: Sage.

Lopata, H. Z. (1979). Women as widows: Support systems. New York: Elsvier.

Lopata, H. Z. (1987a). Widowhood and social change. In H. Z. Lopata (Ed.), Widows: The Middle East, Asia and the Pacific (pp. 217-229). Durham, NC: Duke University.

Lopata, H. Z. (1987b). Widowhood: World perspectives on support systems. In H. Z. Lopata (Ed.), Widows: The Middle East, Asia and the Pacific (p. 123). Durham, NC: Duke University.

Lopata, H. Z. (Ed.) (1987c). Widows. Vol. 2. North America. Durham: Duke University Press.

Lopata, H. Z. (1996). Current widowhood: Myths and realities. Thousand Oaks: Sage.

Lyon, E., & Moore, N. (1990). Social workers and self-help groups for transitional crises: An agency experience. Social Work with Groups, 13(3), 85-100.

Macunovich, D., Easterlin, R., Schaeffer, C., & Crimmins, E. (1995). Echoes of the baby boom and bust: Recent and prospective changes in living alone among elderly widows in the United States. Demography, 32, 17-27.

Marin, R., & Chang, Y. (1998, July 6). The Katie factor. Newsweek, pp. 52-58.

Marshall, C., & Rossman. (1989). Designing qualitative research. Newbury Park: Sage.

Maxwell, J. A. (1996). Qualitative research design: An interactive approach. Thousand Oaks, CA: Sage.

McLaren, J. (1988, October 24). Group assures widows: "You are not alone." The San Diego Union-Tribune, p. B1.

Mirror, L. (Ed.). (1992). Upon my husband's death: Widows in the literature and history of medieval Europe. Michigan: University of Michigan Press.

Munk, N. (1995, November). The best man for the job is your wife. Forbes, 148-154.

Nemy, E. (1992, June 18). "What? Me marry?" Widows say no. The New York Times, p. C1.

Neugarten, B. L. (1968). Adult personality: Toward a psychology of the life cycle. In B. L. Neugarten (Ed.), Middle age and aging (pp. 137-147). Chicago: University of Chicago Press.

Neugarten, B. L., & Datan, N. (1973). Sociological perspectives on the life cycle. In P. B. Baltes & K. W. Shale (Eds.), Life span developmental psychology: Personality and socialization (pp. 53-69). New York: Academic Press.

Nudel, A. R. (1986). Starting over: Help for young widows and widowers. New York: Dodd, Mead.

Oakley, A. (1981). Interviewing women: A contradiction in terms. In H. Roberts (Ed.), Doing feminist research (pp. 30-61). London: Routledge & Kegan Paul.

O'Bryant, S. L. (1991). Older widows and independent lifestyles. Internal Journal of Aging and Human Development, 32, 41-51.

Ochberg, R. L. (1994). Life stories and stored lines. In A. Lieblich & R. A. Josselyn (Eds.), Exploring identity and gender: The narrative study of our lives (Vol. 2). Thousand Oaks, CA: Sage.

Ozawa, M. N., & Downs, S. W. (1986). Economic and human capital factors in the future work plans of young widows. Journal of Sociology and Social Welfare, 11, 56-75.

Parkes, C. M. (1970). The first year of bereavement. A longitudinal study of the reaction of London widows to the death of their husbands. Psychiatry, 33, 444-467.

Parkes, C. M. (1988). Bereavement as a psychosocial transition: Processes of adaptation to change. Journal of Social Issues, 44(3), 53-65.

Parkes, C. M. (1990). Risk factors in bereavement: Implications for the prevention of pathologic grief. Psychiatric Annals, 20(6), 308-314.

Perkins, D., & Zimmerman, M. (1995). Empowerment theory research and application. American Journal of Community Psychology, 23(5), 569-579.

Personal Narratives Group (Eds.). (1989). Interpreting women's lives: Feminist theory and personal narratives. Bloomington: University of Indiana Press.

Porter, E. (1994). Reducing my risks: A phenomenon of older widows' lived experience. Advances in Nursing Science, 17, 54-65.

Potocky, M. (1993). Effective services for bereaved spouses: A content analysis of the empirical literature. Health and Social Work, 18, 288-301.

Raphael, B., & Middleton, W. (1990). What is pathologic grief? Psychiatric Annals, 20(6), 304-307.

Reinharz, S. (1994). Feminist biography: The pains, the joys, the dilemmas. In A. Lieblich & R. Josselyn (Eds.), Exploring identity and gender: The narrative study of lives (pp. 37-82). Thousand Oaks, CA: Sage.

Riessman, C. K. (1993). Narrative analysis. Newbury Park: Sage.

Rosaldo, R. (1989). Culture and truth: The remaking of social analysis. Boston: Bench Press.

Saunders, J. M. (1979). A clinical study of widow bereavement involving various modes of death. San Francisco: University of California Press.

Scadron, A. (Ed.). (1988). On their own: Widows and widowhood in the American Southwest: 1848-1939. Urbana: University of Illinois Press.

Schneider, D. S., Shuchter, S. R., Sledge, P. A., & Zisook, S. (1996). Dating and remarriage over the first two years of widowhood. Annals of Clinical Psychiatry: The Official Journal of the American Academy of Clinical Psychiatrists, 8(2), 51-57.

Secrist, J. (1996). Voices of midlife tomboys: A narrative study. Unpublished doctoral dissertation, University of San Diego, California.

Sefton, A. (1998, January 31). Couric widowhood brings back memories. The San Diego Union, p. E-3.

Shapiro, E. R. (1994). Grief as a family process: A developmental approach to clinical practice. New York: Guilford Press.

Shreve, D. (1998). The pilot's wife. New York: Little Brown.

Shuchter, S. R. (1986). Dimensions of grief: Adjusting to the death of a spouse. San Francisco: Jossey Bass.

Shuchter, S., & Zisook, S. (1990). Hovering over the bereaved. Psychiatric Annals, 20(6), 327-333.

Silverman, P. R. (1986). Widow-to-widow. New York: Springer.

Sloan, L. (1993, August 28). Your money. The New York Times, p. 33.

Small, S. (1995, November). Action-oriented research models and methods. Journal of Marriage and the Family, 57, 941-955.

Smith, K. R., & Zick, C. D. (1996). Risk of mortality following widowhood: Age and sex differences by mode of death. Social Biology, 43, 59-70.

Social welfare: Social Security: Government welfare programs: Cash benefit programs: Benefits for survivors and single parents below pension age. Britannica Online. <http://www.eb.com:/180/cgi-binlg?Doc F=macro/5005/84/32.html> > [Accessed 14 October 1997]

Spradley, J. P. (1979). The ethnographic interview. New York: Harcourt Brace Jovanovich.

Stoll, M. (1990). Predictors of middle aged widows' psychological adjustment in research explorations in adult attachment American University Study Series 8. Psychology, 14, Karl Potharst (Ed.). New York: Peter Lang, 219-255.

Strauss, A. L. (1993). Qualitative analysis for social scientists. New York: Cambridge University Press.

Stroebe, W., & Stroebe, M. S. (1993). Determinants of adjustment to bereavement in younger widows and widowers. In M. S. Stroebe, W. Stroebe, & R. O. Hansson (Eds.), Handbook of bereavement. New York: Cambridge University Press.

Tesch, R. (1984, April). Phenomenological studies: A critical analysis of their nature and procedures. Paper presented at the annual meeting of the American Educational Research Association, New Orleans, LA.

Thompson, I. (1992). Gracious seasons. Mt. Herman, CA: Andrea Elliot.

Tutty, L., Rothbery, M. A., & Grinnell, R. M. (1996). Qualitative research for social workers. Boston: Allyn & Bacon.

Tyler, A. (1988). Interview with Eudora Welty. In C. McGrath and the Staff of the Book Review Editors, Books of the century: A hundred years of authors, ideas and literature from the New York Times (pp. 341-344). New York: Random House.

Ufema, J. (1994). Christmas without Wynn. Nursing, 24, 58-59.

USAA Educational Foundation. (1991). The surviving spouse.

USAA Educational Foundation. (1994). Coping with the loss of a loved one.

U.S. Bureau of the Census. (1997). Statistical abstract of the United States 1997: Library edition. Washington, DC: Author.

U.S. Department of Commerce. (1995). Women in the United States: A profile. Washington, DC: Author.

Van Manen, M. (1990). Researching lived experience. New York: SUNY.

Walter, C. A. (1997). Support for widows and widowers. In G. L. Grief & Paul H. Ephross (Eds.), Group work with population at risk. New York: Oxford University Press.

Weiss, R. S. (1994). Learning from strangers: The art and method of qualitative interview studies. New York: MacMillan.

Whirlwind Tour of Phenomenology. (1996, Fall). Handout, EDLD 608, Qualitative Methods, Dr. Mary Scherr, University of San Diego.

Wilson, L. (1992). Life after death: Widows in Pennsylvania 1750-1850. Philadelphia: Temple University Press.

Witchel, A. (1995, February, 15). Questions with answers. The New York Times, p. C1.

Zisook, S., & Lyons, L. (1990). Bereavement and unresolved grief in psychiatric outpatients. Omega, 20(4), 307-322.

Zisook, S., & Shuchter, S. R. (1986). The first four years of widowhood. Psychiatric Annals, 16(5), 288-294.

Zisook, S., & Shuchter, S. (1991a). Depression through the first year after the death of a spouse. American Journal of Psychiatry, 148(10), 1346-1352.

Zisook, S., & Shuchter, S. (1991b). Early psychological reaction to the stress of widowhood. Psychiatry, 54, 320-322.

Zisook, S., & Shuchter, S. R. (1992). Depression after the death of a spouse: Reply. American Journal of Psychiatry, 54(10), 368-372.

Zisook, S., & Shuchter, S. R. (1993). Uncomplicated bereavement. Journal of Clinical Psychiatry, 54(10), 365-371.

Zisook, S., Shuchter, S. R., & Mulvihill, M. (1990). Alcohol, cigarette and medication use during the first year of widowhood. Psychiatric Annals, 20(6), 318-325.

## **APPENDIX A**

### **QUESTIONS**

- 1. In what ways has being a widow transformed you?**
  
  
  
  
  
  
  
  
  
  
- 2. In what ways has being a widow transformed your relationships?  
(family, friends, neighbors, etc.**
  
  
  
  
  
  
  
  
  
  
- 3. In what ways has being a widow transformed your career?**
  
  
  
  
  
  
  
  
  
  
- 4. In what ways has being a widow transformed your economic life?**
  
  
  
  
  
  
  
  
  
  
- 5. Imagine you are being asked to contribute to the first book written about women  
who were widowed under age 55. What would you want your readers to know?**



## APPENDIX B

University of San Diego, School of Education

### CONSENT FORM

Louise Stanger, a doctoral student in the School of Education at the University of San Diego, is conducting a study of the lives of widows. The purpose of this research is to gain further insight into the experiences of women who become widows under the age of 55.

As a respondent in this study, I understand I will participate in two individual interviews. The data collection will take no more than four weeks. Participation on this study may involve some emotional discomfort. I can benefit from the opportunity to talk about my life and the ways in which widowhood has transformed me. My participation in this study is entirely voluntary and I understand I may refuse to participate or withdraw at any time without penalty. There are no expenses which I must incur associated with this study.

I understand that these interviews will be audiotaped and transcribed for analysis and that my identity will remain confidential.

I also understand that I will be given transcripts of audiotapes to review and edit.

I also understand that the finished document, after acceptance by the University of San Diego, will be published and become part of public record. Should you desire a mental health referral, I will be glad to provide you with one.

There are no other agreements, written or verbal, related to this study beyond that expressed in this consent form. Louise Stanger has explained the research project to me and answered my questions. I understand that if I have further questions I may contact Louise Stanger at any time at 619 (594-5803) or 619 (551-2604). I may also contact the dissertation director, Dr. Johanna Hunsaker, at the University of San Diego at 619 (260-4858).

I, the undersigned, understand the above explanations and on that basis, consent to voluntary participation in this research.

---

Signature of Participant

---

Date and Location

---

Signature of Researcher

---

Date

---

Signature of Witness

---

Date

APPENDIX C

THANK YOU LETTER TO PARTICIPANTS

Louise A. Stanger, MSW  
5558 Taft Avenue  
La Jolla, CA 92037

July 20, 1998

Dear \_\_\_\_\_:

Thank you very much for sharing with me your experiences and for being a participant in my doctoral dissertation. I have enclosed a copy of your transcript. Please be so kind as to make any corrections you deem necessary. I have enclosed a self-addressed stamped envelope for your use.

If you have any questions, please contact me at any time at (619) 594-5803 or (619) 551-2604.

Again, thank you for your participation. My personal best

Louise A. Stanger