

Half-Widows in Kashmir: A Psychosocial Study

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ABSTRACT

Introduction: Disappearance or enforced disappearance happens when a person comes in contact with an armed group (state and non-state), he is taken into custody against his/her will and his whereabouts become unknown. This phenomenon is very common in conflict situations. It has been experienced in all countries facing the conflict between security forces of the state and anti-state militants. Likewise, in Kashmir, the Armed Conflict situation from the year 1989 has resulted in many enforced disappearances. **Methodology:** Mixed methodology was adopted wherein both qualitative and quantitative methods of data collection was used. The data for the study was collected from half-widows (N=109) hailing from District Baramulla of Kashmir valley using purposive sampling method. The psychological issues were studied using Trauma Symptom Check-List-40 and in-depth interviews were carried out with half-widows to understand their issues in depth. **Results:** The study revealed that all the respondents developed the psychological distress. Majority of the half-widows report anxiety, palpitations, sleep disorders, and lack of interest in everyday activities along with various psychosocial problems. **Conclusion:** Majority of the respondents have moderate to severe symptoms of dissociation, anxiety, depression and sleep disturbances along with other psychosocial issues or problems. They face the double burden of living with the uncertainty about the fate of their husbands and the challenges which are posed to her for ensuring not only the survival of her dependents but also a life of dignity for herself.

Keywords: Half-widows, enforced disappearance, conflict

INTRODUCTION

Disappearance is a worldwide problem. Over the last few decades, the world has been shocked by accounts of tens of thousands of people who are known to have disappeared due to one or another reason.^[1] The phenomenon of disappearance occurring as a result of the armed conflict is often used by humanitarian organizations in the sense of enforced disappearance as it is believed that people are made to disappear by the parties to the conflict as a war strategy. But the fact is whether it is enforced or

voluntary, with no news about their family member the phenomenon leaves the families of disappeared in a state of trauma and pain. The severity of the gruesome act cannot be underestimated. Human rights that are violated are, inter alia, the right to recognition as a person before the law, the right of liberty and security of a person, the right not to be subjected to torture or other inhuman or degrading treatment or punishment and the right to life. The phenomenon of enforced disappearances emerged in Kashmir after 1989, after the outbreak of armed conflict. A large number

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of innocent persons have become the victims of enforced disappearances,^[2] despite the fact that most missing persons had no known prior political affiliations.^[3] There have been incidences reported that the forces enter and search a house and take the eldest son, stating they need to question him. This son is never seen again. In most cases, wives and other family members who go looking for their loved one are sent from one military base and/or jail to another, each suggesting some clue at the next. Many times officials even fix a date and time when they will allow a meeting with the missing person. Later, they restate that they no longer have the person in question in their custody. The person has truly disappeared.^[4] Similar cases can be seen when a person is taken by the militants also. The families, including the wives of such persons, are left in a permanent state of limbo, unsure whether the person is dead or alive.^[4]

Enforced disappearances have an effect on the individual, his/her family and the community as a whole. The problems that wives of disappeared persons face are complex and devastating. Besides the uncertainty about the fate of their missing husbands, they usually have to cope with economic, social, legal and mental problems as well. Most of these women are searching for their missing husbands year after year and are still hoping for their return as it is difficult for them to accept that their loved ones are no more. In many cases, wives of disappeared persons suffer from symptoms of complicated grief, such as intrusive images or severe emotional outbreaks, denial of the effects of loss, depression, anxiety, guilt, pessimism, dissatisfaction with life. As a result, they often find it hard to cope with necessary activities at work and at home.^[5] Moreover, the psychological effects of disappearance and assassination of surviving members have been found so severe that they suffer from trauma, anxiety and truculent feelings.^[6] A number of wives of missing persons face extreme stigmatization in their homes that have led to their being rejected by their in-laws, leaving voluntarily or continuing to live there in terrible conditions.^[7] These hardships leave a deeply

negative impact on the mental health of these women.

Half-widows are the silent or invisible victims of the violence.^[8] They live in the state of disturbed bereavement and suffer from major depressive disorders.^[7] Mental and psychological disorders were a logical outcome in these circumstances.^[9] As per mental health practitioners, female patients suffering from Post-Traumatic Stress Disorders is due to the sudden assumption of male responsibilities, psychological trauma, reported and unreported sexual violence and the overall stressful environment which is largely contributing to the worsening of mental health.^[10] Majority of the Half-widows reported the symptoms of PTSD, sleep disturbances, feeling of anxiety, together with the expression of extreme pain. In addition, half-widows complained of chronic physical symptoms that they ascribe to the disappearance, most often as a result of the constant tension and anxiety and understood as somatic.^[7] Psychologically and emotionally, these women are living two lives one in which they strive to believe that their husbands shall come back home one day, and the other where they have to reconcile with the fact that their husbands may be dead during the course of the conflict. A large number of women were plagued by mental health problems. From chronic depression to psychological trauma, these women were battling several mental illnesses as they struggled with daily life. Often, their physical illnesses were a manifestation of the mental stress that they were going through.^[11] In this juncture, the present study intended to assess psychosocial issues or problems of half-widows of Kashmir valley.

METHODOLOGY

For the present study mixed method was adopted wherein both qualitative and quantitative methods were used by the researchers to collect the data. In quantitative approach Trauma Symptom Check List - 40^[12] has been used to check the psychological issues among half-widows, whereas in qualitative approach an in-depth interviews have been carried with

half-widows to get an insight in the lives of these women. The sensitivity of the issue demanded such type of research due to which the problems of the participants were well understood. There is need to understand the issue in a peculiar way seeking the uniqueness of each case within their context. Both theoretical and empirical aspects of the study were very important to understand the issues and problems of half-widows in a holistic manner. The data for the study was collected from half-widows (N=109) hailing from the district Baramulla of Kashmir valley using purposive sampling technique. The psychological health issues were studied by administering Trauma Symptom Check List - 40. It is a 40-item self-report instrument consisting of six subscales (dissociation, anxiety, depression, sexual abuse trauma index, sleep disturbances, and sexual problems). Each item is rated on a four-point scale ranging from 0 (never) to 3 (often). The sub-scales can be used as per the objectives of the researcher, for the present study the researcher has skipped two sub-scales that is sexual abuse trauma index and sexual problems. The data was analyzed manually by using appropriate statistical methods.

Ethical Considerations: The researchers being trained social workers had kept full consideration of social work ethics and principles while dealing with half-widows. The following broad ethical principles were taken care of:

- An informal verbal consent was taken from each respondent to respect the right of the respondents to refuse or withdraw the consent. As the majority of respondents were not literate a detailed verbal explanation in local language was given to them to explain the purpose and nature of the study.
- The respondent’s right to privacy and any sort of private information shared by them had been kept confidential. Some information had to be withheld for the safety of the Half-Widows. The names of the respondents, as well as their addresses, were kept off the record

to maintain the principle of confidentiality.

- Due care of cultural sensitivity and worth and dignity of the respondents was taken into consideration.
- The principle of controlled emotional involvement and an empathetic attitude was ensured in the entire study as the issue under study was highly sensitive.
- The study was initiated only after the clearance from the University Research Ethical Board.

RESULTS

The study assessed the psychological state of half-widows using Trauma Symptom Check-List 40 as it evaluates symptomatology in adults associated with childhood or adult traumatic experiences. It measures aspects of post-traumatic stress and other symptom clusters found in some traumatized individuals. The findings from the scale have been substantiated with the data from the in-depth interviews and observations of the researcher. The results of the study are as follows:

Dissociation

Table1 Sub Scale Dissociation

Range (0-18)	Frequency	%
Mild (0-3)	21	19.27
Moderate (4-15)	69	63.30
Severe(16-18)	19	17.43
Total	109	100%

The above table reveals that 19.27% of respondents have mild symptoms of dissociation, while the majority of the respondents that is 63.30% have moderate symptoms of dissociation and 17.43% of respondents have severe symptoms of dissociation.

Anxiety

Table 2 Sub Scale Anxiety

Range (0-27)	Frequency	%
Mild (0-4)	13	11.93
Moderate (5-23)	75	68.81
Severe(24-27)	21	19.26
Total	109	100%

From the above table, it is being inferred that 11.93% of respondents have mild symptoms of anxiety, while the majority of half-widows 68.81% have moderate symptoms of anxiety and 19.26% of respondents reported severe symptoms of anxiety.

Depression

Table 3 Sub Scale Depression

Range (0-27)	Frequency	%
Mild (0-4)	12	11.01
Moderate (5-23)	86	78.90
Severe (24-27)	11	10.09
Total	109	100%

The above table reveals that 11.01% of half widows have mild symptoms of depression, the majority of half widows that is 78.90% of respondents have moderate symptoms of depression while as 10.09% of respondents have severe symptoms of depression

A half-widow said, *“At times I feel helpless and want to die and constantly keep thinking what has happened to my husband and often remains worried about the future of my children”*

Sleep Disturbances

Table 4 Sub Scale Sleep Disturbances

Range (0-18)	Frequency	%age
Mild (0-3)	23	21.10
Moderate (4-15)	72	66.06
Severe(16-18)	14	12.84
Total	109	100%

The above table reflects that 21.10% of respondents reported mild symptoms of sleep disturbance, 66.06% of respondents reported moderate symptoms of sleep disturbances and 12.84% of having severe symptoms of disturbances in sleep.

Psychosocial Problems or Issues

In the qualitative measures, in-depth interviews were conducted which and supported the findings of quantitative measures. Apart from that, it has given a range of findings pertaining to psychosocial issues or problems of half-widows life.

The persistent problems identified during the study were irritability, less efficiency to do the routine work, aggressive and difficult behaviour, anxiety and tension. The development of self-harming behaviour or suicidal ideation was also observed in the respondents. The feelings of worthlessness, hopelessness and persistent socio-economic problems can be attributed to the suicidal ideation. Certain negative coping strategies were also present in the respondents as criticizing yourself, becoming aggressive or violent, avoiding family and friends etc. Apart from the miseries half-widows face due to the disappearance of their husbands, the societal pressure, cultural inhibitions and the indifferent attitude of their own family members put them in a state of complete distress. It was also learned from the field that the traumatic experiences in the life of half -widows have created problems in the normal psychological performance in **day to day life**.

While giving vent to her feelings a half-widow said *“I suppose I have this determination and courage because of anger... if he was a militant, then, fine he would have killed and gotten killed... but he was a civilian. This injustice is giving me a feeling of helplessness and insecurity. It has snatched peace out of me. I am in a state of perpetual limbo”*.

In this context, while recollecting the trauma a half-widow, *“said my life turned upside down after the disappearance of my husband. I was depressed after my in-laws abandoned and resented me. My in-laws seem to have a life of their own and didn’t want to bear the expenses of me and my daughters; they threw me out of the house. I had **no place to turn** except my natal home”*.

Stigma and Discrimination

It was observed that most of the half-widows are avoiding the public places and have **restricted their social associations** because they feel **socially alienated and stigmatized**, as one of the Half-Widow expressed *“When people want to hurt me they say things like: your face is like this....., You deserve this, that is why your husband*

got disappeared.” In this same parlance, another half-widow revealed, “I went to a social function, a wedding, people start pointing that, ‘she is the one whose husband was taken by the army and subjected to disappearance’ then they would comment on my clothes, ‘look, she is wearing a nice dress’. Who is she trying to attract? Now I stopped going out....”

They feel surmounted by the negative attitudes, which are generally unusual and unrealistic. The **negative attitude of the society and neighbours** towards half-widows has added up to their issues as revealed by one of the half-widow that *“I along with my family has been socially isolated and stigmatized, some neighbors in our locality reported to police that he has crossed LOC and is living in Pakistan, but reality is not so”*. Such comments from the people living around create a more negative impact on the psyche of half-widows.

It was observed that the respondents (after their husbands were subjected to enforced disappearance) are experiencing a series of psychological downfall which immensely affected their actual and normal physical, mental and social aspects of life which is quite evident in the disturbed patterns of sleep, flashbacks, sadness, loss of appetite and nightmares. *“I always carry a fear in my heart that security forces shouldn’t come and foray our home and make false claims of being militants or being their acquaintances. The fear doesn’t go away even after so many years now. Further adding, she said “this is not actually a fear but a harsh reality which I met long before”*

Single parenting has put these half-widows under profound physical as well as psychological strain besides the persistent family constrictions. While expressing her ordeal a half-widow said *“It is never easy to take care of four children and more so for a single parent and that too with almost no resources at disposal. The psychological condition had rendered me unable to perform daily tasks and care for the family.”*

The consistent psychological trauma and anxiety had a deep impact on the **physical**

health of the half-widows. A half-widow narrated that *“Since he disappeared, I am on medications. My health started deteriorating day by day with several complications like loss of appetite, anaemia, excessive sweating, muscle and joint pain and rapid heartbeat. I usually consume medicines, easily available antidepressants, which results in further health issues.”*

Half-widows are pushed towards various socio-economic incapacities which lead to various psychological complications. They often feel psychological breakdown which leads to uninterrupted stress and perpetual trauma. A persistent state of fear and alienation is common in half-widows. As one of the respondents revealed *“I am not able to sleep properly and feel isolated from others. I easily get irritated even by the sound of mild nature and feels panic if somebody from the family returns late to home. I have many apprehensions regarding the safety and security of my family. Because of these problems, my family suffers immensely”*. The families of the half-widows especially their **children also suffer** constantly; initially due to the disappearance of their father and then by continuously witnessing the deteriorating physical and mental health of their mothers. While talking to the daughter of one of the half-widow she said, *“My mother is not able to sleep at night. Even at day times she limits herself and doesn’t even visit any relative. She is suffering internally which is quite apparent but she won’t tell us either that is what hurts more”*.

DISCUSSION

Half-widows illustrate one of the starkest forms of the general insecurity in Kashmir. The results of the present study had given a glimpse of the agonies of half-widows. Half-widows search for their disappeared husbands, along with the hardships that they face on the daily basis has drastically affected their mental health. The day to day sufferings gets manifested in many forms of psychological problems. As the majority of the respondents have moderate to severe symptoms of dissociation, anxiety, depression and sleep disorders.

The most of the findings of the present study correspond with the results and conclusions appearing in the literature that was put under study related to the issue of disappearance phenomenon in general and half-widows in particular.

It has been observed that the phenomenon of enforced disappearance does not affect the concerned individual only, but the family members also suffer immensely. The fact of the matter is that the families of the disappeared persons have to face numerous challenges which are attributing to the long-term effect of the disappearance. The families of the disappeared also suffer at the hands of society in which they live. There are many reported symptoms consistent with the impact of trauma, with a minority of members disabled by mental illness. Chronic physical symptoms that are attributed to the long-term effect of the disappearance are also widely reported, presumably somatic. These factors indicate that family members may be subject to various depressive and anxiety disorders.^[13] Many women in the sample group suffered from anxiety and depression and required medication. It was not only a health issue but was also an economic burden for them. The study conducted on mental health reveals that most of these women in Kashmir live in the state of disturbed bereavement and suffer major depressive disorders. Almost 50% of female patients suffer from PTSD which experts believe is due to the sudden assumption of male responsibilities, psychological trauma, reported and unreported sexual violence and overall stressful environment which is largely contributing to the worsening mental health.^[10] The mental state of half widows can best be described as complicated grief.^[14] For women most psychological distress was associated with feelings of powerlessness-dependency on others for daily living, and witnessing killing and torture. Women have lower confrontations with violence, which can be partly explained by their being largely confined to the home.^[15] In a vicious cycle, the worsening mental and physical health has adverse effects on their economic situation, which further worsens their social standing and

vulnerability, entrenches their isolation and suffering, further compromising their health and well-being.^[14] Scores of poor half widows, who do not come from wealthy families in Kashmir, are living in desolate conditions and suffering psychological illnesses connected to war conflict, including an inclination towards suicide. Many have fallen prey to psychological problems including depression, phobia, emotional instability and Post Traumatic Stress Disorder.^[8] The various socio-economic pressures together have psychological effects on half-widows that largely go unaddressed. Most of the half-widows report anxiety (often described in terms of speeding up or palpitations), sleep disorders, and lack of interest in everyday activities. Many half-widows would exhibit post-traumatic stress disorder (PTSD); anxiety, panic attacks may be triggered by memories of the disappearance or the disappeared.^[14] The loss of a partner, a major breadwinner, so abruptly, and the assuming of male responsibilities often leads to stress and depression in the half-widows. The constant battle of the mind between hope and hopelessness of psyche. Coupled with this is the social stigma, the pressures to perform, the feeling of being an outcast and constant struggle to know for certain the fate of the missing and locate them possibly, causes mental agony. Many half-widows feel that they live a life worse than that of widows, as they do not know and the widows know and can possibly move on. For the half-widows the grief of losing the dear one is prolonged and in many cases unending.^[16]

Limitation : The study was conducted in only one district of Kashmir, hence the findings of the study could not be generalized.

CONCLUSION

As per the findings of the present study majority of the respondents have moderate to severe symptoms of dissociation, anxiety, depression and sleep disorders. Half-widows face the double burden of living with the uncertainty about the fate of their husbands and the challenges which are posed to her for ensuring not only the survival of her

dependents but also a life of dignity for herself. There are many other psychosocial issues or problems were seen in the life of Half-widows. The study reveals that Half-widows find themselves in the midst of multiple struggles and strife, thus mental and psychological disorders are a logical outcome in such circumstances.

Various types of impacts on the half-widows should be taken into consideration before finalizing any intervention strategy for them. As the findings of the study reveal that half-widows face multiple mental health issues. In this regard, both governmental and non-governmental organizations can intervene in the areas of health especially mental health by providing adequate health facilities and psychosocial support services to the half-widows. The services may include psychosocial counselling and emotional support.

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