The Role of Leisure in Coping with the Death of a Spouse among Women Participating in Bereavement Support Groups

by

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ABSTRACT

Over the life course, most people will have multiple encounters with bereavement, one of which is the death of a spouse. Ongoing research on issues associated with bereavement indicates that such a loss is generally the most highly stressful encounter in an adult’s life across the population as a whole. In view of the fact that our population is growing older and most women outlive their husbands, many women find themselves having to learn how to adapt effectively with their loss.

This thesis presents the findings of a qualitative study, the purpose of which was to explore the role of leisure and social support in dealing with bereavement among eleven women who had been involved in bereavement support groups following the deaths of their spouses. Data were collected using in-depth interviews. The women described their intense experiences of loss, their involvement in bereavement support groups, the factors that led them to become involved and the ways in which this involvement assisted them in dealing with the loss and in reconstrucating their lives. Also, they described the role of leisure in their lives after their loss and the ways in which their involvement in the bereavement support group helped them become re-involved in social leisure. The impact of the support these women received from the professionals and their peers in the bereavement support groups as well as the ways in which their adaptation to their loss was assisted were major themes that emerged from their personal stories.

An attempt was made to develop grounded theory or at least a framework that would aid in understanding the relationship between the participants’ involvement in a bereavement support group and their gradual re-involvement in social leisure. It appears that participation in a bereavement support group contributes to a process whereby widows come to accept the loss and adapt or re-construct their lives as single individuals. Throughout the bereavement process, the meaning of leisure for the women in this study shifted from a means of keeping busy and distraction from the stress and anxiety associated with the death of a spouse to one of shared leisure engaged in for pleasure, enjoyment and social connectedness.

A need for establishing partnerships between bereavement support groups and community leisure service organizations was identified. These types of links would further facilitate widowed women becoming re-involved in social leisure outside of the support groups in which they participate and help them become more involved in community life in general.
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Dedication

I would like to dedicate this thesis to my daughter Chrysa who came into our lives during the writing of this thesis.
# TABLE OF CONTENTS

## CHAPTER 1 .......................................................................................................................... 1

### INTRODUCTION................................................................................................................ 1

- Significance of Study .............................................................................................................. 4
- Research Questions ................................................................................................................. 5

## CHAPTER 2 .......................................................................................................................... 6

### REVIEW OF LITERATURE.................................................................................................. 6

- Leisure Participation as Coping ............................................................................................. 6
- Social Support through Leisure after the Death of Spouse .................................................. 9
- Duration of Grief .................................................................................................................... 12
- Spousal Loss / Widowhood .................................................................................................... 13
- Theoretical Perspectives on Mourning Process ................................................................... 15
- Bereavement Support Groups and the Canadian National Organization for the Widowed (Montreal Branch) ................................................................. 20

## CHAPTER 3 .......................................................................................................................... 22

### METHOD............................................................................................................................ 22

- Sensitizing Concepts ............................................................................................................ 23
- Study Sample and Recruitment Procedures ......................................................................... 24
- Ethical Considerations ........................................................................................................... 27
- Data Collection Procedures ............................................................................................... 29
- Data Analysis Procedures .................................................................................................... 31
- Establishing Trustworthiness ............................................................................................... 32

## CHAPTER 4 .......................................................................................................................... 34

### FINDINGS ............................................................................................................................ 34

- Description of Study Participants ....................................................................................... 34
- Alice ...................................................................................................................................... 34
- Margaret ................................................................................................................................. 35
- Helen .................................................................................................................................... 36
- Nicole .................................................................................................................................... 36
- Sofia ...................................................................................................................................... 37
- Joyce ..................................................................................................................................... 38
- Stacey .................................................................................................................................... 39
- Diana ..................................................................................................................................... 40
- Hilary ..................................................................................................................................... 41
- Janet ...................................................................................................................................... 42
- Emily ...................................................................................................................................... 43
- Emergent Themes .................................................................................................................. 44
- Impact of Loss ....................................................................................................................... 45
- Changes after Loss ................................................................................................................ 47
- Taking on New Responsibilities .......................................................................................... 47
- Lost Companionship and Intimacy .................................................................................... 50
- Social Support Networks / Friendships .............................................................................. 52
- Social Support ..................................................................................................................... 53
- Participants Perceptions of Leisure in Widowhood ........................................................... 55
- Views of the Nature of Leisure ........................................................................................... 55
- Perceptions of Changes in Leisure Following the Death of a Spouse .............................. 58
- Impact on Women’s Non-Couple Leisure .......................................................................... 59
Chapter 1
Introduction

Negative life events are as much a part of living as are positive experiences. Although there are many negative experiences that one may encounter through the different life stages, one inevitable encounter is the death of a family member. Research on bereavement indicates that the most frequent and stressful encounter of adulthood is the death of one’s spouse or common law partner. How do people cope with the loss of their spouse or partner and what role if any, do leisure and social support play in their bereavement coping? The purpose of this study is to answer this question and provide a better understanding of the role that leisure plays in a person’s life during bereavement and whether the different sources and types of social support received through leisure experiences contribute to coping with the loss.

Grief is the natural reaction to loss and it is individualistic and may be continual over a period of time. Mourning is the process that the grieving person experiences, which indicates a cultural response to grief. Bereavement, on the other hand, is the state of having suffered a loss (Worden, 1991). Many studies in the field of death-related phenomena have examined and described the bereavement processes that bereaved individuals must go through in order to cope with their loss. Much of the literature on bereavement over the past century has focused on the work of Sigmund Freud (1917) who was mainly interested in the etiology of clinical distress illnesses such as depression (Bonanno & Kaltman, 1991, p.760). Other more recent studies have focused on the different mourning processes that have been developed in order to cope with loss. Engel
(1964) viewed loss and mourning as a stage. Bowlby (1981) and Parkes (1970) define it as a phase and Warden (1982) as a task. Common to all these various approaches to grief and mourning is that grieving takes time and the process is usually an orderly sequence traversed by individuals to achieve positive outcomes and reintegration into a balanced life after the loss. This reintegration into a balanced lifestyle after the loss is the main focus of all bereavement support groups, no matter which theoretical approach they follow. The various theoretical perspectives on bereavement and the mourning process will be discussed in more detail in the review of literature section.

Other research to date provides some evidence of the significance of leisure in coping with daily challenges but little research has been reported on coping with a life altering event such as the loss of a spouse and the resulting grief, mourning and bereavement. Carpenter and Patterson (1993) found that widows and widowers, who were more involved in leisure, had higher levels of morale. Sharp and Mannell (1996) found widowed women used leisure to keep themselves busy and temporarily escape from the emotional distress they were encountering during bereavement. This pattern of findings supports the theory of leisure as palliative coping strategy (Iwasaki & Mannell, 2000).

Recent research on leisure as a coping resource has been influenced by theories of dimensions of leisure coping beliefs and strategies. Iwasaki and Mannell (2000) distinguish between leisure coping beliefs and leisure coping strategies. Leisure coping beliefs refer to a person’s belief that his or her leisure will help him or her cope with a stressful event. These beliefs develop gradually throughout life and are maintained through the socialization process (p.165). They act as stable dispositions, and by giving
people confidence in their ability to cope, reduce feelings of stress and increase their coping efficacy. Leisure coping beliefs may also lead to the use of active leisure coping strategies, which refer to “actual stress-coping situation behaviours available through involvement in leisure” (Iwasaki & Mannell, 2000, p.167). While Iwasaki and Mannell have been interested in coping with daily hassles, they also suggest that the theory applies to major life events. For example, bereaved persons may seek the company of their friends in order to alleviate symptoms of loneliness that they may encounter after the loss of their spouse. Iwasaki and Mannell (2000) also proposed that there are three sub-dimensions of types of leisure coping strategies that include leisure companionship, leisure palliative coping and leisure mood enhancement (p.168). First, through companionship, leisure provides “discretionary and enjoyable shared experiences in the form of social support” with ones friends (friendships) and companions which in turn provides emotional support, esteem support, tangible aid and informational support (p.168). Second, through leisure palliative coping, people keep their mind and bodies busy with different activities in order to temporarily escape from the stress that a negative life event may entail” (p.168). Last, Iwasaki and Mannell (2000) argued that mood enhancement through leisure assists in transforming negative moods to more positive ones. More specifically, they propose that these leisure coping strategies foster feelings of social support (p.168). In a related theory, Kleiber, Hutchinson and Williams (2002), argue that leisure can function as a resource for transcending negative life events by providing distraction, and generating future optimism, self restoration and personal transformation. They also argue that leisure may be a tool to help people to reconstruct their lives after a negative life event.
The present study explores the impact of bereavement on leisure and leisure’s role in the bereavement process. Women who have lost their spouses or companions were studied to determine if they felt that what they did in their leisure helped them cope with their loss, and if so, in what ways. More specifically, this study focuses on social support in leisure (friendship and companionship) and how these factors determine how bereaved persons cope. Though previous theory and research provide some sensitizing concepts to help frame this research, the goal is to examine the lived experience of a group of people who are dealing with bereavement and to explore their perceptions of the importance and role of leisure in their lives, particularly at a time in their lives when it might be thought that leisure is relatively unimportant or even trivial in the scheme of things.

**Significance of Study**

The present study is significant for a variety of reasons. First, it has the potential to fill a gap in the leisure literature by providing some insights of how leisure and social support help people dealing with bereavement cope after the loss of a spouse. More specifically, the study will explore the reasons that the bereaved engage in leisure and understand how their involvement in different leisure activities with members of their support network, help in their coping.

It is hoped that the knowledge gained will help recreation practitioners to better understand the needs of individuals dealing with bereavement. By understanding the process of bereavement and the interventions that work best to facilitate coping, effective recovery programs can be implemented in order to alleviate any secondary illnesses that are attached to spousal loss, such as depression (King, Barr Taylor & Haskell, 1993). Also, by exploring the needs of bereaved individuals and the ways in which they cope,
recreation practitioners will be able to provide leisure education programs that will specifically address those needs and interests and provide people with a healthy leisure lifestyle that will aid them in overcoming the stress that the loss of a spouse involves.

**Research Questions**

In order to obtain a better understanding of the role of leisure in bereavement and the ways in which social support in leisure may assist individuals in dealing with their grief, the following research questions will be examined:

1. How does the death of the spouse alter a person’s leisure?
2. Does leisure play a role in the way in which people deal with bereavement? What do individuals seek when participating in leisure during bereavement and what are their perceptions of the benefits of leisure during bereavement?
3. Is there a relationship between the type of leisure in which people participate and the support they receive from their social networks? How does leisure foster feelings of social support for bereaved persons?
4. Do bereavement support networks assist people experiencing bereavement in becoming involved in leisure after the death of a spouse?
5. In what ways can leisure as a coping resource change during the bereavement support process?
Chapter 2

Review of Literature

In the last 30 to 40 years, much progress has been made in the study of death-related phenomena. In the field of bereavement, a great deal of information has been assembled about experiences of loss and grief (Doka, 1989; Klass, Silverman, & Nickman, 1996; Nadeau, 1998; Neimeyer, 1998), and various programs of support to help people experiencing bereavement have been developed (Worden, 1991).

Stroebe (1998) refers to the shift of bereavement research from that of mental and physical health consequences to the exploration and examination of factors and ways of coping with loss that may influence the course of recovery and adjustment (p.5). Theory and research suggest that under some conditions leisure may play a role in helping people deal with stressful life events. For example, physically active leisure can help patients reduce hypertension (Pierce, Madden, Siegel & Blumenthal, 1993) and older adults decrease anxiety and symptoms of depression (King, Barr Taylor & Haskell, 1993). In their research, Patterson and Carpenter (1994) found that greater participation in leisure activities was associated with higher levels of morale among widowed men and women. Also, directly related to bereavement, Sharp and Mannell (1996) found that leisure participation helped women dealing with bereavement cope with their loss.

Leisure Participation as Coping

Many researchers believe that leisure contributes to people’s well-being by helping them maintain their physical and mental health (Caldwell & Smith, 1988; Coleman & Iso-Ahola, 1993).
Coleman (1993) argues that sometimes when people fail to cope with negative life events, their health is affected by illnesses such as depression, coronary heart disease, as well as other general illnesses. People have varying capacities to cope with such stressful events and much research has focused on identifying those coping factors.

Consistently demonstrated coping factors include certain personality dispositions (Cohen & Edwards, 1989; Hull, Van Treuren & Virnelli, 1987) and social support (Barrera, 1986), (cited in Coleman, 1993, p.350). “Leisure can also be considered to be a source of coping strength” since it can play a buffering role in counteracting the negative effects of stress (Coleman, 1993, p.351). Caldwell and Smith (1988) found that leisure may help overcome the loneliness that may occur from a significant loss. Coleman and Iso-Ahola (1993) suggest that leisure participation facilitates people’s ability to cope more effectively with life stress through shared companionship in leisure activities that may provide feelings of support. The authors also argued that the emotional support that one receives from a network of friends through leisure may help in dealing with a stressful event. Iwasaki and Mannell (2000) proposed that when people believe that leisure can assist them in coping with their stress (leisure coping beliefs), they are more likely to participate in leisure and decrease their stress. Mannell and Kleiber (1997) suggest that leisure indirectly influences health and well being through its ability to facilitate coping behaviour in response to stressful life events and transitions.

Directly related to leisure participation and its role in coping with death is a study by Sharp and Mannell (1996), who studied the impact of the loss of a husband on women’s lives. They found that the more widowed women engaged in active leisure, the less guilt ($r=-.32$) and sadness ($r=-.29$) they felt. They also experienced greater happiness
during their everyday lives. The more they participated in leisure, the higher was their enjoyment and the lower their emotional distress. Furthermore, 45.2% of the widowed women kept busy with leisure activities as a temporary escape from the emotional distress they were encountering. To the contrary, a large portion of the married women’s group reported keeping busy with leisure for enjoyment and personal development and only 10.5% of them kept busy as a way of distraction from emotional distress. The researchers concluded that leisure served as a temporary distraction from the grief experienced. Although, the findings do not prove that leisure participation helps widows cope with their loss, they do suggest that some widowed women may pursue leisure activities in order to escape from the grief and emotional stress that the loss of their spouse may have entailed. This pattern of findings supports the theory of leisure as a palliative coping strategy (Iwasaki & Mannell, 2000) since the widowed women used behaviour, in this case the pursuit of leisure, to divert their emotional distress to more positive emotions. It will be interesting to explore whether there are other roles, besides that of keeping busy or that of a stress buffer, that leisure might play in one’s life during bereavement.

Current research on the impact of leisure on people’s reactions to negative life events suggests that leisure can function as a resource in transcending negative life events. According to Kleiber, Hutchinson and Williams (2002), these functions are: leisure as distraction, leisure as a generator of future optimism, self restoration and personal transformation, and fourth, leisure as a tool to reconstruct life.

First, leisure as distraction is focused on emotions and includes both positive and negative leisure activities that enable one to avoid or escape from a stressful situation.
Second, leisure may also buffer the impact of negative life events by generating optimism about the future and the hope of feeling better and adjusting to the new situation. Third, personal transformation refers to the fact that people, who have suffered a negative life event, eventually come to terms with the situation and even seek personal growth which leads to the reconstruction of their lives as close as possible to the way it was. These findings indicate that leisure plays different resource roles after a negative life event occurs but they do not inform us about what makes people choose one resource role over another or the type of leisure chosen. The findings are mostly descriptive of the way in which people cope. A greater understanding is needed of why people cope the way they do and what they gain from the specific coping resources they have selected. This study will explore and hopefully provide a clearer understanding of what people seek in leisure and whether it helps them cope with their loss and how.

**Social Support through Leisure after the Death of Spouse**

Social networks are often involved in the development of effective coping strategies for people who are experiencing negative life events and altering them into positive ones; “Social support may mitigate the negative effects of bereavement” (Cleiren, 1993, cited in Scaefer & Moos, 2001, p.152). For instance, Dimond, Lund, and Caserta (1987) discovered that older adults who had larger and stronger social networks experienced a higher level of life satisfaction after the death of their spouses (cited in Scaefer & Moos, 2001, p.152). Scaefer & Moos (2001) argued that individuals’ social resources not only have a positive influence on their ability to deal with bereavement but bereavement also provides an opportunity for people to “strengthen old ties and find new sources of social support” (p.153).
Researchers in the field of leisure and coping argue that leisure involvement can facilitate the development of strong social support networks for people who experience negative life events such as the death of a spouse. Patterson and Carpenter (1994) were interested in the types of leisure that widows and widowers participated in after the death of their spouse. They found that the leisure activities most frequently engaged in by widows and widowers were home-based activities that mainly involved activities with family and friends. Very low participation in outdoor activities such as hunting, camping, boating and fishing were reported. Participation in activities with family and friends were significantly related to increased morale for recently bereaved widows and widowers. The study failed to find any association between participation in leisure activities and adjustment to the significant change in the respondent’s lives.

From the findings of the Patterson and Carpenter (1994) study, we can see the importance of social support networks when a life-altering event occurs. To cite one example of the impact of social support after the death of a spouse, Vachon et al. (1980) reported the differences between a group of bereaved individuals that received a self-help intervention (such as emotional support) and a control group that received no intervention. They found that those who received support reported a better post-bereavement adjustment in terms of lower psychological distress than the control group. Therefore, it is essential to explore further the role that different types of social support fostered by leisure play during bereavement.

Vachon and Stylianos (1988) explored the role of social support among bereaved individuals and found that social support is a multidimensional process, which is related to the nature of a person’s social network. In the case of a death in the family, the
individual requires his or her social network which can be small or large in size and which contains various sources such as family, confidants, friends and community services. The social network serves a variety of functions including the provision of companionship, a sense of belonging, and feelings of value to name a few. Social networks can provide many types of support to the individual, such as emotional support, which is derived from participation in activities that sustain or enhance self-esteem.

A second type of social support is appraisal support that gives the individual confidence and control over the stages of bereavement through comments of others. Informational support facilitates the understanding and cognitive processing of the stressful event and lastly, the instrumental support component refers to the assistance and helping hands of others in the time of distress. Vachon and Stylianos (1988) also argued that the bereaved spouse is not the only party suffering grief. The grieving individual is linked to his or her social support network therefore; people in the network must be suffering the loss too. Therefore, further research should be conducted on the types of social support that are sought at different stages of bereavement. Also, the mode of death plays a role in the way in which an individual who is grieving will seek support. For example, in the case of a sudden death, the widow’s spouse experience may be so overwhelming and unique that most people in the mutual support group cannot easily understand it or assist the survivor in dealing with it. In such cases, the social support networks may not be able to assist and the survivor may seek professional assistance. If we are to understand how social support in leisure contributes to coping with spousal loss we should look more carefully at the mode of death since an unexpected death may have more severe consequences for the survivor.
**Duration of Grief**

Over time, a variety of opinions have been expressed about the length of the bereavement and grieving process. Current research and theory have made it clear that the duration of grief does not last a specific calendar period before people return to a baseline state of well-being (Stroebe et al, 2001). Rather, Stroebe et al. (2001) point out that the contemporary perspective is that most people adapt over time (between 1-2 years, though not everyone) but even then there are still differences after their loss (p.751).

Stroebe, Hansson and Stroebe, (1993) conducted a longitudinal study over a period of two years and found that the majority of bereaved persons adapt successfully to the loss after the first or second year. The limitation of this study is that it focused on the adaptation to the loss and not how the survivors coped with the loss and the influence that leisure may have had on the process. Also, other research studies have shown that the duration of grief varies among people depending on the quality of their relationship with the deceased, the mode of death and their ethnic background to name a few factors. These factors will also be taken into consideration when interpreting the findings of this study.

Hazell (2001) indicates that ethnic variations influence the way people cope in bereavement. Hazell also gave some examples of cultures that accept death as a normal process of life and of some who do not. For instance, cultural groups, such African-Americans, Europeans, and in general Western cultures deny death and therefore it may take them a longer time to cope with the loss. On the contrary, Asian, Latin-American, Native American and in general Eastern cultures accept death and are more likely to cope and adapt to the loss more quickly. Another factor in the duration of grief may be the amount of loyalty that one person feels for his cultural customs and traditions. For
example, someone who has strong beliefs about his or her customs and traditions may feel obliged to grieve for a longer period of time than someone who does not have strong ties to his cultural customs and traditions.

“Certain types of reaction to bereavement are normal within certain subcultures and abnormal in others, but we should not assume that it follows that what is normal is necessarily right, healthy, or harmless” (Parkes, 2001, as cited in Stroebe et al., 2001, p35).

Therefore, it is important when exploring the role of leisure and social support during bereavement to understand the cultural background of the bereaved individuals before making any assumptions about the ways they cope with loss.

**Spousal Loss / Widowhood**

Over the life course, most people will have multiple encounters with bereavement, one of which is the death of a spouse. The death of a spouse has been identified as the single most stressful life event that occurs to an individual. Marriage is regarded as a “central relationship for many adults that provides essential linkages to important social networks and leisure activities” and “widowhood generally occurs later in life when this relationship (marriage) is often well established” (Patterson & Carpenter, 1994, p. 105). The ways a person responds to loss of a spouse varies from person to person; some people experience intense distress and others do not (Wortman & Silver, 1990, cited in Schaefer & Moos, 2001, p. 147).

There is some consensus in the bereavement literature that men tend to become more depressed after the loss of a spouse than do women (Bonano & Kaltman, 1999, p.769). One reason for this difference is that the loss of a spouse may result in different perceived deficits for widows and widowers. The survivor not only loses his spouse and life partner but also the different roles that he or she played in their lives (e.g. financial
provider, decision maker) (Stroebe & Stroebe, 1987; Wortman, Silver & Kessler, 1993, cited in Bonanno & Kaltman, p.769). For example, Umberson et al., (1992) found that widows were more likely than widowers to experience increased financial strain, whereas widowers were more likely than widows to experience the strain of increased household tasks. Umberson et al. also suggest that:

Depression for widows increased with financial strain and strained relationships with children, and decreased with the receipt of help with household tasks. In contrast, depression for widowers increased with time spent doing household tasks but decreased with the performance of maintenance tasks, the receipt of social support from children, and the receipt of social visits and phone calls.

Based on social expectations men should be strong and get over a sad situation quickly, reflecting the “macho”, warrior identity of western men (Parkes, 1972). Women are also socialized to be more vulnerable and seek more emotional support when in distress while men rely more on their own resources to cope (Campbell & Silverman, 1987). According to Wolfelt (1990) men’s grief is naturally complicated because of their difficulty in overcoming their social conditioning to repress their feeling. Men need to appear self-sufficient and cannot let themselves appear non-productive and are not accustomed to seeking help and support. Therefore, more research has focused on how women grieve and cope with bereavement, since men do not tend to display the characteristics of grief and suffering. In 1996, 80% of widowed Canadians were women (Statistics Canada, 2004). Women are more likely to experience the loss of their spouse since they have a longer life expectancy than men and tend to marry older men.
Theoretical Perspectives on Mourning Process

Since the central focus of the study is on bereavement, it is essential to make reference to the different theoretical perspectives that describe and explain the bereavement process. Most theories describe some sort of process or multi-stage sequence that bereaved individuals must go through in order to cope with their grief. Generally, it is thought that the person dealing with the loss of a loved one must go through all the steps of the process proceeding from the first step, which is usually accepting the loss and dealing with the initial shock, to the second and so on, until he or she reaches the final stage which is usually characterized as the ability for the survivor to go on with his or her life. A brief historical overview of the major theoretical perspectives on the mourning process follows.

Until about 1960, primarily the works of Sigmund Freud, Melanie Klien, E. Lindemann and Edith Jacobson were referred to when considering the problems of dealing with bereavement. The primary focus of these perspectives was on the clinical aspects of mourning such as depressive illnesses (Friedman, 2003, p.2). Much of the literature over the past century has been dominated by the work of Freud and his *Mourning and Melancholia* (1917). Freud described the “work of mourning” as that of severing “attachment to the non-existent object” (cited in Bonano & Kaltman, 1999, p. 760). Although Freud was mainly interested in the etiology of clinical distress illnesses such as depression rather than grief, much of the body of literature on bereavement over the past century has been dominated by his views (Bonano & Kaltman, 1991, p. 760).

Other theories have viewed loss and mourning as stage (Engel, 1964), phase (Bowlby, 1981; Parkes, 1970), and task (Warden, 1982). Lindemann (1944) depicts five
characteristics of grief: somatic distress, preoccupation with the image of the deceased, guilt, hostile reactions, loss of patterns of conduct and also describes three stages of grief. In the first stage the bereaved feels shock and disbelief about the loss and often denies that the loss has occurred. Secondly, acute mourning is characterized by acceptance of the loss, lack of interest in daily functions, weeping, feelings of loneliness, insomnia, and loss of appetite. At this stage there is also an intense fixation on the image of the deceased. The third stage describes the resolution of the grief process, which includes the development of a gradual interest and involvement with the activities of daily living and a reduction in preoccupation with the image of the deceased (Friedman, 2003 p.6).

Engel (1964) depicts grief as a six-stage process. Shock and disbelief is the first of the stages. The following step is awareness of the loss and its acknowledgment. Restitution is the third stage which deals with social support, increased expression of feelings, and the development or implementation of coping strategies. The fourth stage includes resolving the loss that involves reviewing the relationship and the development of an image of the deceased devoid of negative features. The next stage is idealization, which describes the adoption of some positive characteristics of the deceased. In this stage, yearnings toward the deceased are replaced with movement toward continued life. The last stage of the grief process is the outcome in which successful mourning takes place within a year or more and is characterized by the mourners’ ability to remember comfortably both positive and negative attributes of the deceased. Between stages five and six, idealization and outcome, the bereaved individual starts replacing yearnings toward the deceased with movement towards continued living (Friedman, 2003, p. 6).
Kubler-Ross (1969) believed that people who are able to accept death and deal with it when it comes into their lives will eventually grow as individuals. Kubler-Ross argued that there are five stages that the bereaved individuals go through when they experience death in their life. The first stage includes periods of denial and isolation which are used positively as a healthy way to cope with the shock of finding out about a death. The second stage is anger. The individual experiencing the bereavement may have feelings of resentment, frustration and helplessness. The feeling of anger is targeted towards family, friends, doctors and nurses but there is also a need to feel cared for and respected. Bargaining is the third stage in Kubler-Ross' theory of grief. It occurs when the initial anger for the death or the anticipated death subsides. The survivor starts bargaining with God, doctors and the illness itself for more time to be cured or because he or she are not ready to let go. Depression and withdrawal is the stage at which there is a great sense of loss either from the past or from the future and it is usually not expressed openly.

Worden (1982) believes that mourning is a necessary process which consists of four tasks that need to be accomplished by the bereaved individual in order to provide balance in their lives, and the opportunity to re-establish their lives after a loss. The first task is to accept the reality of the loss. After a death it is normal to believe that the deceased is not really gone and to hope for an immediate reunion. However this illusion does not last for a long period and the bereaved individual moves to the second task, to experience and work though the pain of grief. According to Worden, if the second task is not completed, the bereaved may later require therapy. The third task is to adjust to an environment in which the deceased is missing, which may vary from person to person.
depending on the nature of their relationship with the deceased and the roles the deceased played in the survivor’s life. The successful completion of this task allows bereaved individuals to recognize the changes that have occurred in their lives as well as redefine their goals in life. An unsuccessful completion of this task, meaning the inability to adjust to the new environment after the loss, does not allow movement towards the final task of the grief process, which is the *emotional relocation of the deceased and the moving on with life*.

Parkes and Weis (1983) argue that there are three distinctive tasks in the process of grief. First of all, the loss must be accepted intellectually, *intellectual recognition and explanation of loss*; secondly, the *loss must be acknowledged and accepted emotionally*, and lastly, the individual must accept the changes that have occurred in his or her life after the loss in order to create a new reality, that is, the *assumption of new identity*.

Schneider (1984) theorizes that the grief process consists of eight stages. *Initial awareness of loss is the first stage of the process*. In this stage, reactions such as shock, numbness, disbelief and disorientation are often experienced by bereaved individuals. The second stage is described as holding *on*. The bereaved feel emotional pain such as depression, anxiety, pessimism and often have thoughts of self-destruction.

*Letting their attachment to the deceased go*, describes the third stage of the grief process. At this stage, individuals let go of their attachments to the deceased, which may be followed by certain emotional pain such as depression, anxiety, and thoughts of self-destruction. After letting go, bereaved persons must *become aware of the loss*, which is mostly associated with mourning. The following stage is *gaining perspective*. At this stage, the griever comes to terms with the loss and tries to balance the positive and
negative aspects of the situation. Some experiences that the bereaved individuals may encounter at this stage are patience, acceptance and reminiscence. Next follows the *resolution of the loss*. This stage is characterized by bereaved individuals saying goodbye and moving on to other life activities that are not related to the loss and that are not a reaction to it. This stage is somewhat related to the *loss as a context for growth* stage. The griever has reconciled the loss as a challenge for personal growth. The last stage consists of *new attachments*.

Dershimer’s (1990) theory on the grief process is similar with the other theorists discussed. According to him, first comes *shock*, followed by *acute grief, straightening up the mess*, and finally, *re-investing and re-engaging in life*.

Another theory of coping with grief is described by Corr (1991) who argues that there are four tasks that have as the objective the enhancement of understanding, fostering empowerment and guiding the helping process. These tasks are aimed at developing coping strategies and facilitating adaptation to change through the continuation of living (Bereavement Facilitator Training Manual, 2003, p. 9). They include the following: *physical needs* such as minimizing physical stress, symptoms and pain control, *psychological needs* such as establishing security, autonomy, and quality of life, *social needs* such as enhancing interpersonal relationships with others and finally, *spiritual needs* such as developing sources of spiritual energy.

Neeld (1992), in her studies of grief, identified seven sets or clusters of experience or phases that mark the grieving experience. *Impact* is the moment of the news of the loss. *Second crisis* is a period of sadness, loneliness and depression. *Observation* is the time when the individual makes a distinction between the loss and the
reaction to the loss, and the turn is the realization that there is a future and that life goes on. Reconstruction is the beginning of building a new life while continuing to maintain a connection with the past, working through is the effort to adapt to the new environment and all the challenges it may entail and finally, integration is when life returns to a balanced state.

Common to all the various approaches discussed, grieving takes time and the process is an orderly sequence traversed by bereaved individuals to achieve positive outcomes and reintegration into a balanced life after the loss. They must go through all the emotions and feelings that each step, stage or phase may entail. For the purposes of this study, it should be noted that when people experiencing bereavement are receiving support during the grieving process, it is difficult to talk about leisure and recreation at a time when they are distressed and dealing with a variety of emotional states. Therefore, I intend to interview persons who have been widowed for over two years and have reached that last step of the grieving process.

**Bereavement Support Groups and the Canadian National Organization for the Widowed (Montreal Branch)**

The Canadian National Organization for the Widowed (CNOW) that served as the site for the proposed study was created to help newly widowed persons by providing ongoing support from peers who have already resolved some of their grief. As well, the organization provides further support in dealing with economic, social, educational and career related issues (Bereavement Facilitator Training Manual, 2003, p.10).

Program services include ongoing self-help groups; out-reach programs, monthly social programs, Sunday programs, holiday and festive observances, workshops, seminars and so on.
CNOW has observed that both the intensity and duration of mourning is different for each person. CNOW is eclectic in its approach, always keeping in mind to provide the most useful and helpful types of interventions to its members. CNOW members have reported that participating in a support group is the first step a widowed person takes in understanding grief and widowhood. By sharing feelings with others, widowed persons are in reality, coping with their crisis. The support group is a safe and encouraging environment to ventilate feelings and to have those feelings validated.

CNOW’s program is intended to ease the distress of the bereaved and assist them in the grieving process. CNOW bases its approach on the theories of Worden (task oriented), Corr (empowerment) and Neeld (allowing choices), in developing strategies to enable regeneration (Bereavement Facilitator Training Manual, 2003, p.11).

The reason for selecting CNOW for my research study was that in collaboration with on-going support and counselling, its participants have the opportunity to engage in social activities which may be considered time for leisure for some.
Chapter 3

Method

Based on the review of the literature, it appears that most of the thanatology and bereavement studies have used quantitative approaches to gather information on the grieving process. Quantitative studies have been useful in identifying the ways in which people cope with a negative life event such as the loss of a spouse but researchers have failed to explore the factors that influence bereaved persons to select and use certain coping mechanisms over others (Bonanno & Kaltman, 1999, p.760). This question could be effectively explored by conducting qualitative research and allowing individuals dealing with bereavement to talk about their own experiences and perceptions. When qualitative research methods have been used in the study of bereavement, they have been found to provide information that expands on that gained with the use of quantitative approaches (Neimeyer & Hogan, 2001), and to help researchers understand the unique meanings that inform the reactions of individuals or groups to death and loss, thereby both “broadening and deepening the scholarly study of bereavement” (Neimeyer & Hogan, 2001, p.110).

Because qualitative approaches are less apt to be constrained by investigator preconceptions than are quantitative approaches relying in ready-made questionnaires, qualitative approaches such as grounded theory, content analysis, ethnography and case studies are better positioned to introduce novelty, scope and depth to the study of bereavement (Neimeyer & Hogan, 2001, p.113)

Qualitative studies are based on a constructivist approach that holds that “human knowledge is socially and personally constructed, with no single view claiming to be universal” (Neimeyer & Hogan, 2001, p.105) thus “allowing the discovery and exploration of unique and common perspectives of the individuals being studied”
Qualitative methods that have been used in research on bereavement include grounded theory, content analysis, focus groups, case study and ethnography.

For the purposes of this study, I adopted Strauss and Corbin’s (1990) grounded theory approach to qualitative analysis and interpretation. According to Strauss and Corbin (1990) grounded theory is “one that is inductively derived from the study of the phenomenon it represents…it is discovered, developed, and provisionally verified through systematic data collection and analysis of data pertaining to that phenomenon” (p.23). With this approach, I “attempted to derive a general, abstract theory of a process, action, or interaction grounded in the views of participants in a study. This process involves using multiple stages of data collection and the refinement and interrelationship of categories of information” (Creswell, 2003, p.14). The two most important characteristics of grounded theory are the “constant comparison of data with emerging categories and theoretical sampling of different groups to maximize the similarities and the differences of information” (Creswell, 2003, p.15). The purpose of theoretical sampling is to continue to sample participants or incidents in order to further develop categories that have already emerged from the data and also make links between them (Strauss & Corbin, 1990).

**Sensitizing Concepts**

Several sensitizing concepts that were derived from the literature provided me with a general direction for my research. These sensitizing concepts allowed me to understand what types of factors were involved in the phenomenon being studied (Patton, 1990). The sensitizing concepts that I employed include widowhood, leisure coping.
beliefs and strategies, social support, mode of death, ethnic and cultural identity, quality of bereaved persons relationship with spouse and finally the different types/forms of leisure that bereaved persons participate in during the bereavement process. These sensitizing concepts contributed to the development of my research questions and helped me during my preliminary collection of the data and analysis (Creswell, 2003). Establishing these sensitizing concepts helped me prepare before embarking on my research, since I did not have any past experience with issues related to bereavement support groups. During my qualitative investigation, these concepts/definitions were modified as categories, patterns and themes started to emerge from the data that more accurately reflected the issues being studied. As the research progressed, I considered the sensitizing concepts of bereavement support groups and bereavement support networks. The literature was revisited as categories, patterns and themes emerged during the data analysis and interpretation stage so that I could relate my findings to similar studies reported in the literature. This process also assisted in the validation of my findings and determining whether my findings coincided with those of other studies (Strauss & Corbin, 1990).

**Study Sample and Recruitment Procedures**

I chose to recruit my participants from the Canadian National Organization for the Widowed (CNOW). It was fairly easy for me to gain entry into this site without experiencing any obstacles since the president of the organization expressed an interest in the present study.

In order to find and select participants for my study, I chose to use the process of criterion sampling. Patton (1990), states that criterion sampling attempts to “review and
study all cases that meet some predetermined criterion of importance” (p. 176). Accordingly, inclusion criteria were established to narrow the focus of the study and to prevent specific factors from confounding the results. More specifically, I felt that it was important for the participants to be widowed for at least two years and have attended the bereavement support group sessions at some point after their loss. I believe that the widows’ responses to the role of leisure and social support would differ from those responses of widows who had not attended bereavement support group sessions and whose loss was more recent than two years. I also wanted to interview both widows and widowers but unfortunately, at the time that I conducted the study there were no widowers attending CNOW or those who had been attending in the past, did not express an interest in participating in the study. This lack of interest did not come as a surprise, since much of the literature that I had reviewed for this study indicated that a man’s grief is perceived to be more complicated because of his difficulty in overcoming his social conditioning to repress his feelings and emotions. Wolfelt (1990) wrote that men express a need to appear more self-sufficient and cannot let themselves appear non-productive and are not accustomed to seeking help and support. Therefore, more research has focused on how women grieve and cope with bereavement, since men do not tend to display the characteristics of grief and suffering, and are more reluctant to talk about it. Thus this study explored the role of leisure and social support in the lives of widows during their bereavement.

The specific characteristics used as inclusion criteria for my study were that participants must reside in Montreal so I could have easier access to them, must speak English, must be 60-80 years of age, must have been widowed for at least two years, and
must have attended the bereavement support group sessions offered at CNOW. Twelve widows participated in the study in total but one of the interviews had to be withdrawn from analysis because although the participant wanted to share her experience, she did not meet one of the inclusion criteria, that being that her husband had died less than a year ago (from the time of the interview). Therefore, the total number of participants was eleven, which I believe allowed me to clearly explore the role of leisure and social support in the lives of widows during their bereavement years.

Patton (1990) states that the “validity, meaningfulness, and insights that are a result of a qualitative inquiry are more relevant to rich information gathered from the participants and to the analytical skills of the researcher than with the sample size” (p.185). The eleven participants provided rich information about their experiences with their loss and it appears that saturation was achieved. Strauss and Corbin (1990) describe saturation as the point when additional data collected fits nicely into pre-constructed categories and when the relationships between categories are well established.

When it was time to recruit my participants, I contacted a grief counsellor that I had met at a lecture on grief a few years ago and after talking to her about my study in general, she mentioned CNOW as a possible recruitment site. I telephoned the president of CNOW and mentioned that I was referred to this organization by my contact (grief counsellor). After talking to her and explaining the purpose of my study, she seemed interested and advised me to send all related information in writing and that she would pass it on to CNOW members. I sent a detailed information letter identifying the purpose of the study and describing the nature of their potential involvement. Those who expressed an interest to participate contacted me directly and others contacted me though
CNOW. Bonanno and Kaltman (1999) found that higher acceptance rates have been generated when recruiting bereaved participants by means of personal referrals from religious groups, former participants or medical professionals rather than random sampling of death certificates (p. 761).

At the time that the participants contacted me to express their interest in participating, all of them mentioned that it would be more convenient to have the interviews at the CNOW office on Thursdays when most of them were visiting the CNOW office for a series of lectures that were offered to CNOW members who had gone through the bereavement group sessions in the past, and had kept their affiliations to the organization.

I made arrangements to meet on alternative Thursdays and when I talked to the president of CNOW she invited me to visit the CNOW office an hour prior to my first scheduled interview and meet with the women over lunch. The women would gather prior to the lecture and have lunch together and chat. It was a nice way to be introduced to all who were attending the meeting. Most of my study participants were among this group.

**Ethical Considerations**

As a researcher my roles was to ensure that ethical considerations were taken into account as they related to the participants. As a first consideration, I received approval for this study from the University of Waterloo Office of Human Research Ethics committee. In addition, prior to the involvement in the study I sent an information letter (see Appendix A) to the participants who met the inclusion criteria, explaining the purpose of the study, outlining the type of information that they would be asked to provide and the
nature of their role as a participant in helping me understand the phenomenon I intended
to explore. In this communication, participants were also informed that I would be
telephoning them within one week upon their receipt of the introduction letter to obtain
their decision regarding participation. Upon contacting the participants who were
interested in taking part in my study, it was decided that the most convenient place to
meet was the CNOW office. The interviews took place on Thursday afternoons (January-
April) when the women were visiting CNOW for a series of lectures offered. Prior to
starting the interviews, I conducted one pre-test in order to assess my interview guide
(see Appendix C). This procedure helped me evaluate whether the questions were clear
and whether an hour was enough time to cover the full range of issues. Upon completion
of the pre-test, I proceeded with the interviews. Prior to each interview, participants were
asked for permission to tape record their interviews. I had also informed the participants
that if they wished at any point during the interview to have the tape recorder paused or
stopped that they should feel free to tell me so and I would turn it off. Therefore, a formal
consent form (see Appendix B) was completed, informing the participants that
confidentiality was my first priority and responsibility. I clearly explained to all
participants that their names and identity would remain confidential and that only
pseudonyms would be used in the reporting of the findings. Participants were also
assured that all data and identifying material and audiotapes will be kept safe during the
research period and destroyed upon completion of the study. Participants were also told
that if at any time they felt uncomfortable with any of the questions and didn’t want to
reply that they should free not to do so. Formal written consent forms were acquired at
the beginning of each interview.
Following the interviews, all participants were mailed a thank you card for their involvement in the study and asked to indicate if they wish to receive a summary of the results of the study when it was completed.

**Data Collection Procedures**

The primary type of data collection that I used was qualitative in-depth interviews. The purpose of the in-depth interview was to uncover and gain an understanding of bereaved person’s perspectives concerning the loss of their spouse, the role of leisure during bereavement and the impact of different social support networks on their grief and coping.

The interviews were recorded using a tape recorder and were later translated verbatim. Memos and notes were written after each interview was over. The approximate duration of each interview was an hour or so.

The structure of the interviews followed a semi-structured interview guide approach employing open-ended questions (Appendix C). A set of questions were used to ask each participant about the same topic but not necessarily using the same words. It was important though that each topic in the guide was discussed to some extent. This facilitated the development of concepts and categories especially during the first few interviews.

During the qualitative interviews, I also used probes in order to encourage more detailed responses to questions and to further explore issues that were raised and were leading in an unanticipated but relevant direction. The interview guide questions were organized around themes that were influenced by my sensitizing concepts and my initial research questions. The guide was composed of demographic questions, questions about
the participants’ participation in CNOW, the methods they used to cope, the role of leisure in their ability to cope, as well as the extent to which their social support networks helped them cope through leisure. The questionnaire consisted of nine main areas, starting with more general questions and proceeding into more sensitive areas.

The first section involved general demographic questions about the participant and their spouse. Next I explored the nature of the relationship that widows had with their spouses and how their loss affected various aspects of their lives. Eventually, the questions led to exploration of the participants’ involvement with CNOW and the bereavement support group sessions, and the strategies they used in order to cope with their loss at the beginning and at later stages of their bereavement. I was specifically interested in the different steps they took to cope with their loss and in what ways, if any, leisure and social support through leisure had influenced coping. I also was interested in the extent to which the social support networks these widows had prior to their loss (their family, friends and their community) were maintained after their loss and if this type of social support influenced their decisions to participate in bereavement support sessions and affected their leisure involvements. In order to learn more about these issues, I asked the women to describe the extent to which they participated in activities in their free time, how they felt about their current level of participation, and how they came to their decision to participate.

The final section of the interview guide was focused on social support through leisure. In particular, I wanted to find out what they thought about recreation groups and programs that are available for widows and widowers in the community. I was also interested in knowing whether such groups where available at the time they were
attending the bereavement support sessions and whether the people at CNOW had talked about the role of free time and leisure at that time in their life.

Data Analysis Procedures

After completing the interviews, I organized and prepared the data for analysis. In my analysis and interpretation of the data, I chose to follow a grounded theory approach. According to Strauss and Corbin (1990), grounded theory is “a qualitative research method that uses a systematic set of procedures in order to develop an inductively derived theory about a phenomenon” (p. 24).

Data analysis involves “preparing the data for analysis, conducting different analyses, moving deeper and deeper into understanding the data, representing the data, and making an interpretation of the larger meaning of the data” (Creswell, 2003, p. 190). Patton (1990) describes this process as letting patterns, themes and categories of analysis rise naturally from the data itself rather than imposing them prior to data collection and analysis.

The first step of analysis in the grounded theory approach involves coding the data. Straus and Corbin (1990) identify three types of coding procedures: open coding, axial coding and selective coding. Open coding is performed during the first pass through the data. During this step, the researcher locates themes and assigns initial codes/labels in a first attempt to condense the mass of data into categories, by looking for critical terms, key events or themes that are then noted. Glaser and Strauss (1967) describe this process as the “constant comparative method of analysis” (p. 101-116). This process results in a number of categories that are developed in terms of their characteristics. Open coding is
the foundation for the other two types of coding: axial and selective coding (Strauss & Corbin, 1990).

During axial coding, the researcher reviews and examines initial codes and moves towards clustering or categorizing the codes together. Axial coding starts to make linkages between the concepts and themes identified in open coding (Strauss & Corbin, 1990). Strauss and Corbin (1990) state that grounded analysis will lack density and precision if axial coding is not used.

Selective coding goes one step further than axial coding. The researcher conducts the analysis at a more abstract level (Strauss & Corbin, 1990). It involves scanning data against previous codes to look for data that illustrate the themes developed in axial coding. The major themes that were identified in axial coding are reorganized into a model or theory backed by evidence from the data. As part of the data analysis, memos and diagrams can also be used to help explain the relationships between categories that will emerge from the data (Strauss & Corbin, 1990).

Establishing Trustworthiness

In order to establish the trustworthiness of my findings, I compared my findings with related literature for similarities and differences as discussed in Chapter 5. Also, after the completion of the interviews, I verified the participants’ responses with them at the end of each interview. I would recap and paraphrase the participants’ answers in order to verify that that is what they meant to convey. Patton (2002) discusses the value of having findings reviewed by “inquiry participants”, meaning that having those who were studied review the findings will help the researcher get accurate, complete, fair and valid findings. He feels that if participants are unable to relate to and confirm the description
and analysis presented in the qualitative report, questions are raised about the credibility
of the findings (p.560). Although I was unable to have the participants review my
preliminary analysis of their interviews, strategy I used served as limited form of
“member check” to verify that my immediate impressions of their comments and stories
were consistent with what they had intended to communicate.
Chapter 4

Findings

Description of Study Participants

The study involved twelve participants (eleven interviews were analyzed), all of whom had been widowed for more than two years. Participants’ ages ranged from 62-81 years, with the average being 73 years. Most of the women were well educated, in a comfortable financial situation, and had been married for many years before their husband died. At the time of the interviews, three widows were involved in intimate relationships and no participant had remarried.

Alice

Alice was one of the oldest of the eleven participants at 81 years of age. She was born and raised in Montreal where she and her husband Alex of 42 years had lived with their two sons. Alex died five years ago and since then Alice had been living alone. Alice is well educated and had opted to staying at home and raise her sons and therefore was never employed. Although never employed, she is in a comfortable financial situation and has always taken care of the household finances. Alice has fond memories of Alex and describes him as a very interesting man who had led a very interesting life. He was a soldier during World War II but was not a “hard man” as Alice describes him. Aside from his military background, Alex was a very gentle man, who spoke nine languages fluently and always had something interesting to talk about. Alex’s death was somewhat expected since he had been sick for about three years before his death, having
re-occurring heart attacks. As Alice mentions, “I never knew from one day to the next whether he was going to the hospital or not”.

After Alex’s death, an acquaintance of Alice suggested the bereavement support group (CNOW) to her saying that she herself had gone through it and found it very helpful. Alice made her own decision to join the bereavement support group (CNOW) within the first year of her loss.

**Margaret**  
Margaret was one of the youngest participants in my study at the age of 69 and was born and raised in Montreal where she met and married her husband Michael 46 years ago. Margaret is Jewish, well educated and had been working as a high school teacher for many years until she retired at the age of 51 so she could travel and spend her golden years with her husband. Margaret leads a very active lifestyle, either by volunteering her time to an association, traveling the world or generally keeping busy all the time as she stated in her interview. Margaret spoke fondly of her husband. It was evident throughout the interview that her loss had a traumatic impact on her life; especially during the first two years of her bereavement in which she consulted a psychiatrist and was medicated. What was so tragic in Margaret’s life experience was that she and Michael were both in a car accident almost four years ago, in which Michael died. Margaret survived but was unable to attend her husband’s funeral because she was unconscious in the hospital. She describes that time in her life as “traumatic and tragic”.

Margaret joined CNOW four months after Michael died and she reported that it was her daughter that “pushed her to join a support group” but it was a friend who mentioned CNOW. Margaret also felt that she “needed the support and to talk to
someone about her loss”. Therefore, she inquired about CNOW and decided that such a group was what she needed at the time. Presently, Margaret is in a relationship with a widower and does not plan to remarry.

**Helen**

Helen is the youngest participant at the age of 62. She was born and raised in Montreal and married Harry when she was 20. Helen spoke of Harry highly. “He was a very pleasant, very talkative, very outgoing, and very courageous man”. Helen and Harry had just celebrated their 35th wedding anniversary when Harry died unexpectedly of a stroke while he and Helen were on a vacation seven years ago. Helen spoke briefly about her husband’s ordeal and death but was “not comfortable going into too much detail about the circumstances surrounding his death”. Helen has three children and was a stay-at-home mom but had been taking some university courses on and off. She practices the Roman Catholic religion and considers herself spiritual.

Helen decided to join CNOW after reading an article in the newspaper about the bereavement support group, approximately three months after Harry’s death. Helen reported the main reason for joining CNOW was because she “felt so isolated” and she “needed some help in the direction of her life”.

**Nicole**

Nicole is 76 years old, Jewish, born and raised in Holland. Her family lived in a concentration camp and after the war was over they moved to Canada when Nicole was 28 years old. It was in Canada that she met and married her husband Ned in 1958. Nicole “wasn’t allowed” to go to work as she mentioned in her interview because her husband wanted her to stay at home and raise their two children. Ned was the financial provider
for the family. He had a good job so there was no economic need for her to work at the
time. Ned was very caring, a very good father (their children meant everything to him),
and a very pleasant person to be around. Ned had lost all his family in the war, and
Nicole did not have any family in Canada. Her parents and siblings had moved to
England after the war. Nicole and Ned grew closer together because they had no family
support nearby. She talks about a strong family relationship amongst her, Ned and their
children. Ned and Nicole were married for 27 years when Ned was coming back from
work during his break to have lunch with Nicole. Nicole was waiting for her husband at
the window when she saw his car arrive in the driveway. She waited for a while and was
puzzled about what was taking Ned so long to get out of the car. She approached his car
and found Ned sitting still; he had suffered a heart attack and had died. It has been 20
years since Ned died and since then Nicole has not remarried or been involved in any
intimate relationships.

After one year following Ned’s death, Nicole joined CNOW after talking to a
friend who had gone through the same bereavement support group, which she felt had
helped her cope with her loss.

**Sofia**

Sofia is a 71 year old woman born and raised in Montreal. She used to work for
the railway and now she is retired. Sofía has suffered three losses in her life. Nineteen
years ago she lost her husband of 28 years; She describes him as a “wonderful person,
very kind, but the only thing was that he did not want to have children”. After her first
husband died, she was involved with an abusive and very controlling man. Her life during
those years with Sam was not very pleasant at times but she remained with him to take
care of him while he was sick with cancer until he died eight years ago. A year after Sam died, she met the “love of her life” Steve, and they were common law partners for seven years until he too died of lung cancer in 2002. Sofia describes this relationship as the most loving one; she was very happy and very much in love with Steve, therefore, in her interview she talked about her experience of Steve’s loss. Sofia has gone through the bereavement support group at CNOW twice; once after Sam’s death and the second one after Steve died. She is still involved in CNOW but in another capacity. Sofia talks about Steve in the warmest and kindest words. He was a well educated man from a very prosperous Montreal family; he was an economist and geologist and had lived in more than 50 countries during his life. Sofia was very attracted to him and appreciated his kindness and that he would allow her to have her own independence. Presently, Sofia lives in her own home and is not in a relationship and does not plan to remarry.

A newspaper article featuring CNOW prompted Sofia to join the bereavement support group because she “wanted help, since her friends and family could not help her at the time due to their own responsibilities”.

Joyce

Joyce is a 79 year old woman with an Irish background. She was born and raised in Montreal where she lived with her husband James and their five daughters. They were married for forty-five years and almost ten years ago, James died of a heart condition. His death was very sudden and a shock to Joyce and her family. It is still hard for her to talk about him; she cried throughout the interview but did not want to drop out of the study because by talking she felt that she was honouring him:

Almost 10 years and it is still hard to talk about him. There are so many things that I remember and cherish about James. I shared my life with him. I mean it is
the most important thing, isn’t? Sharing my life with him….and…we have lived so many happy memories that is why I still feel sad, you know? Because he was a good person, you know? Sharing my life…everyday…can I say more? (Joyce)

Joyce keeps seeing a psychologist once a week to talk about her loss. She is Catholic and considers herself very spiritual. She made many references to God and the power of faith throughout her interview. James was well educated, an engineer by profession, a “very good man, husband and father” as Joyce states. After James’s death, Joyce moved into a retirement apartment complex in Montreal so it could be easier for her to get around on her own. Three of her daughters live in Montreal so she has them close by for support. Joyce has not pursued any relationships after her husbands’ death; such an idea doesn’t match her values and beliefs.

Joyce joined the bereavement support group one year following James death after hearing about CNOW from an acquaintance who had gone through the same bereavement support process at CNOW.

Stacey

Stacey is 72 years of age, born and raised in Montreal. She is Jewish but does not consider herself religious. Stacey is a retired school teacher by profession; she worked for nine years and then stayed at home to raise her children. Stacey and her husband Robert lost their son when he was eleven; a very tragic event in their lives until this day. At the time of her son’s death, Stacey did not go through bereavement support because there was none available or none that she knew about. Stacey and Robert had another son and later on adopted a daughter. Stacey and Robert were married for thirty nine years when Robert was diagnosed with stomach cancer in February 1991 and died in November 1991. Although Stacey knew about Roberts’s illness she considered his death
very unexpected and a “double whamming” because it brought back the loss of her son.

When Stacey was asked to describe her husband, she replied candidly:

He was a very caring person; he was a great person to be married to…our interests were similar which was great; we enjoyed theatre, music, the arts…he was an engineer, a professional engineer by profession, and we just got along very well…we were able to speak to each other about anything; and I don’t think either of us would have survived the death of my son too well had we not have each other (Stacey)

Stacey participated in a support group for family members of cancer patients while Robert was battling cancer and after his death she was referred to CNOW. She knew she had to get involved in a support group because she “wanted to help herself get better and get out of all the emotional mess” she was feeling with Robert’s illness and eventual death.

**Diana**

Diana is 71 years old, born and raised in Montreal and has always worked in the family importing and exporting business that she and her husband created. Diana was married to David for forty-four years and they have four children. Diana identifies with the Jewish religion but not in an orthodox sense. Diana describes her husband as:

He was a very positive person…with a little control problem; (giggles), he liked to control…but he is an Israeli, had an army background and he was a good father and a good husband. For the better part of our marriage, he was the financial provider and he sort of designed the pattern of our lives (Diana)

Diana was brought up in a more conservative generation were women were socialized to allow men have certain control over them.

I was taught to allow people to sort of dominate and make choices for me and to a large extent that was true with my relationship...so I became dependant and then when I was widowed I had to learn to…I had to grow up finally (laughs), I had to finally become an adult (laughs) (Diana)
David’s death was expected. He had been diagnosed with lung cancer six months before he died and his prognosis was not good. Seven years have passed from David’s death.

About a year after David’s death, Diana decided to join CNOW after a widowed friend who had been involved in the same bereavement support group suggested that Diana got involved too. Diana was aware of the significance of bereavement support groups and as she mentioned she was the one who encouraged her friend to get involved in the bereavement support group years ago when the latter had lost her husband.

**Hilary**

Hilary is 81 years old, born and raised in Montreal and identifies with the Jewish religion. When Hilary was asked about her present marital status, she replied directly:

I am a widow and I do not envision myself allowing another man in my house or my bedroom; it is just the way I am (Hilary)

Hilary has worked in sales and customer service. She too stayed at home to raise her children and went back to work when her children were old enough. Hilary and Brian were married for almost forty-five years. They would have been celebrating their 45th wedding anniversary three weeks after the day Brian died nine years ago. His health was considered poor, since he was suffering from a number of health problems, such as diabetes, high blood pressure; he had suffered a stroke when he was fifty followed by a heart attack and bypass surgery. Later on he was diagnosed with Alzheimer’s disease.

He had NOTHING compared to the sadness that I felt as I watched him deteriorate because of Alzheimer’s disease (Hilary)

Hilary joined a support group for family members of people with Alzheimer’s disease after her husband’s diagnosis. Her participation in that support group made “the transition into widowhood much easier” she replied and “much easier to accept the death
of her husband”. Hilary was Brian’s primary caregiver and when Brian’s behaviour became violent as his health deteriorated (he had tried to rape Hilary on many occasions), Hilary made the decision to place him in a nursing home. She still feels “guilty even after so many years for not being able to provide for Brian at home and having to place him in an institution”. Her first reaction to his loss was “relief and gladness”. When Hilary was asked to elaborate on that statement she replied honestly:

You have to understand that I had gone through a lot with my husband’s illnesses and Alzheimer’s that I was so happy that he didn’t…first of all, he didn’t know me, he couldn’t talk, so he was just vegetating in there; it was frustrating to see him in that condition…and I am sure that he felt that I had rejected him….I am sure of it (looks down to the floor). I am sure he felt it (Hilary)

After Brian’s death, Hilary’s networks from the support group for family members of people with Alzheimer’s suggested the bereavement support group offered at CNOW. She did not hesitate to join CNOW because she needed the extra support.

Janet

Janet, 72 years old, Jewish, born and raised in New York, moved to Montreal after she married John. Janet and John have two adopted children – a daughter and a son and two grandchildren. Janet is a retired teacher by profession but decided to leave her job in 1983 to join her husband’s manufacturing business. Janet and John were married for almost forty years and it has been eight years since his death. John was suffering from a heart condition for years. He had a massive heart attack when he was 48 years old so “there was always the fear in the back of his and Janet’s minds”. Janet said she had noticed a big change in John’s health the last few months before he died. John and Janet were on a business trip out of town when John suffered another massive heart attack at a friend’s house where they had been staying during their trip. When the paramedics
arrived at the scene, John had been without oxygen for too long so there was no brain function and after numerous neurological tests and no sign of brain activity for the next 48 hours, Janet and the doctors decided to take John off life support. Janet was negotiating with the doctors to keep her husband on life support but they had told her that if there is no brain activity within 48 hours following unconsciousness, the possibilities of John regaining brain activity were very slim:

I had two neurologists come and they both said that there was nothing they could do. I argued that John was an intellectual man; but I said…I would take him even if he has a 90 IQ, you know…as long as he could enjoy the children and the grandchildren…it is a pleasure out of life…I would keep him on the machines if we could bring him back; but they told me that it wasn’t the case; it wouldn’t work like that….I was on his side when the numbers started dropping and I was with him for his last breath (Janet cries)...you know it was awful to see (crying)...he was gone…I knew he wouldn’t live for another ten years (because of his heart condition) but I didn’t expect it to be that fast…I never expected it (Janet)

Although John had a chronic heart condition, Janet describes his death as unexpected. It has been eight years since John’s death. Prior to that, Janet was diagnosed with breast cancer and John was the one person Janet “could rely on for emotional support”.

Janet was encouraged to join by a close friend who had lost her spouse a couple of years earlier and was attending CNOW. Attending the support group together with her friend helped Janet in the sense that Janet did not drive and relied on her friend to drive her to the meetings.

Emily

Emily is 71. She was born and raised in Montreal and identifies with the Jewish faith. She was a nursery school teacher for 34 years and also an artist (painter and sculptor). She was married to her husband Edward for 37 years and she has been a widow for the past 14 years. In our interview, I asked Emily about her present marital status. She
seemed a little irritated with the question but answered that she is a widow but has been in a relationship with someone for the past 11½ years. Emily and Edward have two sons; one who lives in Montreal and one in New York. Emily lives with her companion in a condo. She talked about Edward and described his sensitive character, his kindness, his handsome looks and that he was a very warm and caring man. Emily also mentioned that what she missed the most was that Edward supported her in a way that allowed her to grow and develop as a person within their relationship. He always showed “admiration…motivation and appreciation” for what Emily did. Edward died six months after he was diagnosed with liver cancer. His death was considered expected.

At the time of the interview, Emily was in a relationship, indicating that it was very different from the relationship she had with her husband. She further explained that she was prompted to engage in a relationship to feel warmth and companionship after losing her husband.

**Emergent Themes**

The experiences of the participants interviewed were comprised of and influenced by many factors, namely their relationships with their spouses or common law partners, the impact of their loss, their participation and involvement in the bereavement support group, as well as their ability to cope with their loss. I was also interested in the role that leisure played in the widows’ lives after their loss and whether it had any impact on how they coped. Past and present leisure lifestyle, leisure beliefs, as well as past and present social support networks were also examined in order to better assess and understand leisure involvement in widowhood.
The analysis suggests that leisure had a great influence on the widow’s ability to cope with the loss of their spouses, especially as a means of distraction. The following chapter describes and highlights these findings and explores the experiences of these widows and the role that leisure and social support played during bereavement.

The findings will be presented as an analytic story that will include the main categories that emerged from my analysis and the sub-categories that support them (Strauss & Corbin, 1990). Throughout the analysis I have attempted to keep a balance between data description and data interpretation (Patton, 1990) and in the next chapter compare and contrast my findings with related literature and findings.

**Impact of Loss**

Although the focus of this study is on the role of leisure in the lives of persons who have lost a loved one, an interesting and important finding emerged from the analysis that needs to be addressed in order to better understand the impact that the loss had on the women and how it may have influenced their decisions to participate in CNOW, as well as their involvement in leisure activities. This important theme is the extent of the *impact of loss*, which includes the changes that the women had to make in many domains of their lives. The inquiry into the impact of loss was focused on two areas: the type of relationships the participants had with their husbands and the mode of death. These two factors help understand the impact of the widows’ loss and eventually the way they coped. The most important and most strongly felt impacts for these women were physical and emotional. Those who lost their husbands unexpectedly or suddenly like Margaret, Helen, Nicole, Joyce, Stacey, Janet and Emily reported a more intense
shock and emotional reaction to the loss, so therefore, their ability to deal and cope with their loss was somewhat more hindered:

I was unconscious for a day and a half after the accident...so when I woke up, the nurse came up to me and said.... well I said “Where am I?” ..I didn’t know where I was and she said (the nurse) “You are in the hospital, you had a car accident and your husband is gone”. And it didn’t even enter my mind at that moment...I couldn’t...cause I was still in a state of shock...so while I was in the hospital and even for a while longer it really DIDN’T REGISTER (emphasis)...it took a while and after that of course, I was very depressed...so I went to a psychiatrist and I was on anti-depressants and I went to a psychologist for “talking” (smiles) because the psychiatrist had no time to talk...he just gave me the medication...so I was on anti-depressants. I went to the psychologist for at least a year and a half and still go occasionally (Margaret)

I have been living with someone for 42 years and then they are not there. It’s like loosing an arm or a part of you...it’s just a part of you, so unless you’ve lost it you can’t...you don’t know how it feels to lose it....it is so tragic (Margaret)

When you have your husband you are TWO…but when...well it works the other way around too....but when you don’t have your spouse, when your spouse leaves...you are ONE person. HALF OF YOU IS GONE. It is very difficult to overcome that obstacle in your life (Alice)

To the contrary, widows who were somewhat expecting their spouses’ death due to illness reported less shock since they had more time to deal with the illness and its prognosis. Most participants were primary caregivers for their spouses after they were diagnosed with an illness. There were some sentiments of “relief and gladness” among the widows after their husbands’ death that can be associated with the cessation of the strenuous work of being caregivers.

I can almost admit that it was a bit of relief (when Alex died)...because I was always on tender rocks, you know...I never knew....cause you know...he kept saying to me “I find it a little difficult to breathe”...well that meant that something was happening and that he was going to end up in the ambulance within maybe an hour or so...so...I don’t have that, because I didn’t realize the other side of the coin...when it happened (emphasis)...I didn’t think about myself then...that I can relax now at least...it doesn’t work that way you know (Alice)
I was shocked when we found out that Edward had liver cancer. I wasn’t as shocked by his death. My mourning had started before his death because I knew he was going to die soon (Emily)

**Changes after Loss**

Most participants reported changes in various domains of their everyday lives after their loss, such as changes in responsibilities, companionship, and free time and leisure.

**Taking on New Responsibilities**

The most common responsibility that these women had to deal with was taking charge of the finances: paying bills, preparing taxes, and making financial decisions on their own. The women who were financially dependant on their husbands found the task of learning how to take care of the finances a burden. Women who were well educated and had been employed in the past found that taking charge of such tasks was not difficult but rather it was a hassle having to learn to be financially independent.

When Michael died it forced me to become more independent, and take charge of the house, preparing the taxes, the insurance and all things around the house like gardening, repairs...you know things like that... things that I never did before but I did them now; it wasn’t difficult, just a hassle (Margaret)

His death changed everything in my life, because we were no longer a couple, and it’s funny because I don’t really think of it so much…but… you LOOSE your SPOUSE, but you also LOOSE that life that you had....and I think now looking back in retrospect it is very important to make a new life; and that’s what I did (Helen)

I had to start doing what my husband used to do before; just the resentment of doing the income taxes, when it comes to the financial end of it, he used to do it; and I still resent it to this day. I can do it now with a smile but used to do it with anger...It was something I had to take over…that I used to feel that this is sort of not fair; it’s all falling on my shoulders…it was extremely stressful (Stacey)
You have to learn to live alone, how to cope, how to do things; I mean, not always easy...for instance, now I am getting my papers ready for my income taxes...TIRING; my investments...I mean my husband Thank God was so good to me. He left me, not with a lot of money, I am not rich but I am comfortable. Thank God...I mean I don't have to worry about what to do in terms of money because I never worked so that would have been even more difficult. I am careful, don't waste my money and live within my budget (Joyce)

Oh...everything changed COMPLETELY because he was no longer there....I no longer had...I had to take care of myself, I had to in some aspects, although I had been independent...I had to learn many things...things like caring for my car...I had never put gas in my car in my life, never mind wind chill fluid (giggles) so I had to do all that; the responsibility for my home; (voice changes; becomes deeper, more solid), financially I probably would have had the edge on that over him...but everything; I had to make a new life (Helen)

Another change that is somewhat related to the financial adjustments that the widows had to make, was adapting to their widow’s employment status. Those who were working at the time their husbands were diagnosed with an illness quit their jobs in order to stay at home and take care of them. Janet, who used to work with her husband John at their manufacturing business, went back to work after Shiva (a week of mourning according to the Jewish tradition) and this is what she reported:

I couldn’t function on my own; I mean I am a very capable woman; I can do a lot of things but not emotionally. I went back to work...after a week of Shiva, and wherever I looked, John was there...I mean it was difficult....but I could not go because it was also our place...so I used to run to the washroom every while and cry my eyes out and come back and continue working until something would trigger it again and I would run back....I was triggered all the time (Janet)

Emily, quit her job when Edward was diagnosed with cancer so she could care for him at home. When Edward died, Emily was struggling with the decision of going back to work and with the help of a friend and social worker decided to take on a couple of hours per week at her old job at a nursery school.

I didn’t want to go back to work because I was working with children and I was afraid that the parents would think that I would have a breakdown in front of the children; just cry at those happy moments with the children but no...I just got lost
in those two and a half hours with the children and the parents were very supportive (teachers and parents) but you have to understand that I had been working there for 54 years so it was like my family (Emily)

Similar comments were made by other participants:

I wasn’t working…well for a while I was working but then I had stopped when Robert got sick and never went back…it changed my life in the point that I had no one to lean on and I had to become quite independent; I had to do everything by myself (Stacey)

I had to learn to look after the finances. I had to learn to look after the bills and make sure they were paid on time, and taxes which still frighten me; make decisions when you have to make major repairs or buy major appliances let’s say…I have to make those kinds of decision all by myself...mainly my generation is very different from yours I think; We didn’t do those things; there was certainly a division on the roles the wife and the husband did (Diana)

I learned to do new things around the house since it happened (Ned’s death)... I was always the one taking care of the house, taking care of my husband, raising the children and because my children had left the house at that time to go to university…I learned to do new things…I am so independent, you know? I was fine with money, because I know that some ladies have difficulties when their husbands die because they don’t have enough finances to take care of themselves and some women don’t know how to write a cheque because this is something that their husbands used to do for them. That was never a problem for me because I always took care of things; that was the most difficult thing or change I had to deal with…taking care of a big house, and do things, you know…appointments, to write this down and that down and that is being one of the biggest challenges I had to overcome (Nicole)

I had nothing to do in the house…I had no cooking…I made up my mind that I wasn’t going to cook, I had no baking…I don’t have to clean the house all the time; I had nothing to do…I mean now that I was on my own I didn’t have someone to care for…to prepare meals for. I had more time to my hands to do nothing (Alice)

Taking care of the house was something that just passed by though the side; because first of all, I am the one living there so it is not that I have to tidy up after the children, or prepare meals for my husband (Diana)

Joyce had to deal with the changes of moving to a smaller apartment and getting used to public transportation. She reported that it was difficult getting around on her own by public transportation especially during winter therefore she moved closer to the city
and into a smaller apartment were she wouldn’t be responsible for house maintenance.

Still, she had to adjust to the changes that a move often entails:

We lived in Saint Lambert (town outside of Montreal) for many years, but I came to the conclusion that...well he died in January, and that spring I left and came to live in Montreal to be closer to my children, to the support group; because I didn’t drive and I didn’t want to rely on public transportation especially at night and in the winter. I moved into an apartment building for people who are retired; I couldn’t stay at home alone; so that was a BIG change, very big change, so you know consequently, I had to start fresh in a new city; It is like I was a single person again (Joyce)

These aforementioned changes were part of the bereavement process, a means for the women to accept their new roles as widows and, as we will see, part of the coping process. Diana referred to a particular bereavement support session, in which women talked about the changes in their lives after their loss, and how CNOW helped them realize that what they were going through at the time was a normal part of healing.

The reason why CNOW worked with our coping and helped us accept the changes and the different responsibilities that came into our lives was that we could talk about what we were dealing with daily; we could share things that bugged us the most, which in an ordinary group (non bereavement support group), you wouldn’t be able to bring up because you know in your head that it is stupid; it is immature, it is nonsense but it really bugs you; it really does; and this is something we could talk about in our group here, because we were angry for instance because we were the ones that had to go out and clean the windows (now that the husbands were gone), clean the snow off our windows of our car (giggles); we never did that and it made us angry (laughs) and I will never forget what was told in that meeting; that it was alright to be angry, that it was part of growing and that there was no reason why WE (widows) couldn’t be the ones doing all these things; so we stopped resenting doing some of the things that we had never done before because we thought that it wasn’t our job...so we started moving into the reality of living life as an individual, as a person; not as a pair, a couple (Diana)

**Lost Companionship and Intimacy**

Widowhood does not entail only the loss of a husband. It also involves the loss of the various roles that the spouse played in the marriage such as: the father, the financial
provider, the homemaker, the friend, and the companion to name a few. The most
common and important role missed was that of the companion. All widows reported that
the loss of companionship and the feeling of loneliness that accompanies loss were the
most negative aspects of widowhood and the hardest ones to deal with.

It’s not easy. It’s not easy. The loneliness, the loneliness, I would say is the most
important, not important…but saddest part of it all. It is the loneliness (Alice)

I miss HIM to sit down with me for meals, you now; just having him home at
night and having someone to talk to; basically the companionship (Hilary)

What I miss about him? Well…just the closeness…the closeness is…he could be
in one room watching TV….I could be in another room doing something else and
not even seeing him but knowing he is there and I could tell myself “He is there,
if I want him I will go in the other room and get him”…but he is not here…it is
the emptiness, you know? (Joyce)

I am still lonely…still lonely; There comes the evening and if I have something
planned that is fine, but I just can’t handle the emptiness in the house, having
someone in the house with me even if they are doing something else in another
room…so the loneliness is the saddest part of losing your husband; you miss the
companionship, the discussions, simply someone being there (Alice)

I miss the touching and the feedback; just the verbal communication, you know;
things like that…I mean people care, I have good friends who care, I have
children who care but nobody cares like your husband. I miss the interaction…the
caring (Janet)

I miss him. I miss everything. I miss just being with him; just him being there;
that was the hardest thing you know…just you know, coming home to an empty
house. I missed the companionship and the warmth; more I would say the warmth
because the companionship you can have with your friends and other women
(referring to the other women in the support group) but of course the
companionship with the other women is at a different level from that
companionship you share with your husband (Emily)

A few of the women who did engage in intimate relationships after their spouses
died did so primarily to fill the void of loneliness. Remarkably, they also reported that
they wouldn’t remarry. They were simply seeking companionship but didn’t want to take
on the responsibilities that marriage entails.
We shared our roles in the marriage. We had a lot of fun together, we traveled together, we danced together...he was an excellent father and a good friend. Well, I am in a relationship now and it kind of fulfilled what I was missing after my husband died; mostly the companionship (Emily)

The companionship and having a man in my life; it is a different relationship with a man than with a woman. You can talk about different things and it is still different; and there is still the physical need...the things that you MISS is being touched, and I think everyone loves to be touched and be liked and so on (Margaret)

The loss of companionship was also noted in the widows’ leisure which will be discussed later. The increased feeling of loneliness may have prompted these women to engage in leisure activities in their free time in search of companionship.

**Social Support Networks / Friendships**

Post bereavement, the women indicated that friendships with single friends, with life long friends, and with friends who had gone through the same experience, became much more important and closer than friendships with married couples.

The women believe that their friendships with couples faded out after the spouses’ deaths, probably because the latter did not know how to act around them. The couples may have thought that the widows were mourning and that they would have declined any invitations therefore did not make any. Also, they may have thought that widows are no longer part of a couple so they would not be interested in participating in things that “couple friends” were involved with in their free time.

Those who joined the bereavement support group at CNOW formed social networks with others from within the group mainly because they could relate with one another since they were sharing the same experience. Holding on to friendships from the past, is undoubtedly difficult, especially when the other parties cannot relate to ones life
experience of the loss of a spouse. When participants were asked to describe their social networks following the death of their spouses, they indicated:

Friendships changed drastically because when you are alone...when you are a couple you do so much together; you are with other couples, you go to dances...who wants to go out dancing when you are alone? And the other couples, they are nice but that’s their life and that’s your life, you know…it is a big change. It’s a BIG BIG change. They act like you are a single person again (Joyce)

Well...the couple friendships we had, most of them fell by the way side. Most of them did and that is why CNOW became very important, because there were people who you could identify with; you could discuss things with, who understood you and you made friends. My friends from before weren’t there for me...not so much because they don’t understand; they haven’t gone through it (loss of a spouse)...they don’t fully understand. It is amazing how they can lack that compassion...they don’t know how I would be...so it is hard for me to judge why they weren’t there but fortunately I made new friends here (Margaret)

It changed friendships with couples; we had a nice social life with coupled friends but all that has changed...I am no longer invited; sometimes I wish I was, but I no longer am so that was very hard actually; so I rarely see these couples anymore....now I don’t really know the reason why the friendship progressed that way...I don’t know...I think they probably...when you have a dinner party, you have an even amount of couples...I think for those reasons. I never really asked them; you know...but often I wish I would be involved (Helen)

The friendships I made here were good friendships basically because they were all widows. So when somebody calls me and tells me that they are having a bad day; and very often you don’t know exactly what is going on...and when you call someone who is a widow and they tell you the same thing, they know exactly what you are talking about. If I were to call a friend who is still with her husband, I would think to myself after talking to her...what is she “bitching” about...On the other hand, if I talk with a friend who happens to be a widow too, we have a different kind of understanding; most other people (friends who are not widowed) cannot understand (Diana)

**Social Support**

During their marriages, all women reported that in terms of support they mostly relied on their spouses, then their children and finally their friends. Following the death of their husbands, most women relied on their own interpersonal resources as well as on
the assistance received by CNOW. They also leaned on friends they made from their participation in the support group. The women reported that receiving formal support with the combination of informal friendships with other widows who had gone through the same experience were important factors that helped them deal with their loss.

Surprisingly, none of the widows relied on their immediate families for support after their husbands’ death, even if such support was available. The reason given was that they felt that their children were also suffering the loss of their father and the rest of the family was also grieving the loss in their own way and the women did not want to burden them.

Initially, I went to stay with my daughter but it was hard for her too, she had lost her father and had two young children of her own and I didn’t want to burden her with my pain, so I turned elsewhere for support; right away I became a volunteer at the hospital, joined CNOW and kept busy with things (Joyce)

My daughter isn’t an emotional person; she did what she could but she would never ask me how I am or how I am feeling. My son would do that but I didn’t want to upset him too at the same time because he was going through his own loss at the time; so I couldn’t talk to them much; so I found out about CNOW, joined and then I met other women who were widowed and I could talk about my sadness and my pain with them because they could understand; and I would listen to them as well. It was a two way relationship (Stacey)

I didn’t go to my children for support…no, no because they were going through their own thing. It was very hard until I joined the group; it helped me to talk to the group…you could cry, you could tell what was bothering you…there was no need telling the children how I felt, since they were going though their own thing. I don’t think they would have understood…well they knew I was unhappy but they didn’t understand what was going though my mind, all the changes…at the group (CNOW) I could speak from my heart and nobody….well you know? We were all in the same boat…all sharing the same experience to some degree (Nicole)

I thought at first that it would be ok because I had my children with me…but they felt it too, they were very close with their father so they were very upset too; it was a shock for them too and I didn’t want to put more pressure on them (Margaret)
It was evident that these widows did not want to burden their children and other family members with their pain and grief. This concern perhaps explains why the widowed women chose to seek support through the bereavement group.

**Participants Perceptions of Leisure in Widowhood**

**Views of the Nature of Leisure**

The assumption that prevails after the loss of a loved one is that individuals dealing with bereavement have an excessive amount of time on their hands, particularly free time or leisure time. This excessive time is thought to be especially true when they are not working or taking care of other everyday tasks. In this inquiry about leisure beliefs, meaning of leisure and leisure participation and lifestyle, emphasis was given to exploring the ways in which widows defined leisure and if and how they perceived it to be beneficial during their bereavement. The following findings support the notion that leisure entails different meanings for different people at different times in life.

Most women reported that leisure in widowhood is having free time to do things for pleasure. They also defined leisure as a means of “keeping busy” from thinking about the loss, as well as spending time in “shared” and “social” leisure. The different views of leisure expressed portray the altered perceptions that the women had of leisure after their husbands died. The women talked about leisure meaning free time to indulge in pleasurable activities alongside their spouses during their marriages and presently they talked about leisure meaning keeping busy with basically any “social” activity in order to alleviate the sadness and negative impact of the loss. The women participated in social activities with other women from the support group they had attended and in that way
have somehow substituted the once “shared” leisure with their spouses with that of other companions (friends and other women whom they met at the support group).

Leisure is things that you enjoy doing…I don’t know how exactly to explain it; you have to be busy, to keep your mind occupied and you know; go on with your life (after loss) and that’s my leisure really you know; doing things I like…and sometimes not doing anything but then slowly you get over it and that is the best thing…to keep going and to keep busy especially with things you like to do (Nicole)

Leisure means…well it depends on the time or place…it is different things at different times. Leisure sometimes is just sitting and watching TV, reading a book, going out for dinner with a friend; it is different things at different times. Also, it has a different meaning now than before because you miss it (leisure). You are used to having someone there and doing things together (in terms of leisure) (Emily)

Leisure is basically being occupied…whether it is, things you really want to do or things that you would like to do. As long as you are busy I think that it gives you less time to think about yourself, your journey and your loss…that is the only way to describe it (Hilary)

Leisure is actually free time, in my feeling. It is free time; what you do…you can stay home and read a book…you can go to the movies; now I know that isn’t social, but you go out with your friends and usually after you will go for dinner or coffee…the meeting is the important part here; the things you discuss…it’s basically the social aspect of the meeting…that is how I define leisure…It is something you choose to do in your free time…but what leisure is for me doesn’t mean that it is leisure for someone else; it depends…so you can’t say that for some it is something and for some it is something else; there is no set rule to what leisure is (Stacey)

Leisure is something pleasant…some pleasant activity that you like to do (Helen)

Janet and Alice had difficulties accepting the term “leisure” as it is widely used.

They talk about activities and past times rather than leisure:

I am troubled by the term leisure. Leisure is a misleading name; activities are fine but leisure would probably kill me (so when you say activities, what do you mean exactly?)…I mean activities, social activities with other people (Janet)

I wouldn’t say leisure…I would say it is past time…doing something; something constructive…not sitting around doing nothing and saying it is leisure time….I
don’t know what leisure time means…I knit, I watch TV, I do get out…I mean I have plenty of time for myself but I do have other things to do (Alice)

Joyce talked about leisure being a blessing because it fills your time with something to do.

Leisure is a blessing; it’s a blessing…you have to do something in your leisure time, you have to and even if you are alone you know; I do things…I am always on the go…you have to keep going (Joyce)

A different perspective was expressed by Diana who considered involvement rather than leisure as being a blessing:

I don’t consider leisure being a blessing. Actual involvement is a blessing; if you can make yourself really become involved (being busy); but just “leisure” I don’t know...maybe my definition of leisure is wrong; to me leisure is a time without responsibility. I think we don’t understand it when we don’t have any responsibility; having no responsibility takes the edge out of life; you are not quite living (Diana)

According to Diana, for a widow such as herself, leisure is not fulfilling or meaningful because there is too much free time on her hands. She reported that the only way for leisure to be truly meaningful and valuable and not just a passing of time is when one is working or is keeping occupied with obligations. Then, people value leisure time more since they have smaller amounts of free time and look forward to leisure as a break. Diana also described having too much leisure as being a punishment because then one has too much time on her hands and perhaps the things she selects to do may not be as meaningful. Therefore a leisure lifestyle that is “balanced” with obligations is more preferable and beneficial.

Leisure now? In my capacity as an older woman and a widow? I say that leisure is a punishment. Leisure is an empty thing; you fill it with little things for your own maybe pleasure; maybe it is not even pleasure; it is just a means to an end. It is not as relaxing or as wonderful when it is when you have little increments of it; when during your young years you are busy, you value it more because it is something special; when all of a sudden, you have got half an hour for you, you
can take five…you can do things for yourself, it is wonderful; but when you only
get leisure (no work), you resent it terribly, because the way you fill that time is
not so fulfilling. You simply do things; but it is not fulfilling; it’s not meaningful
(Diana)

Leisure doesn’t benefit you if you just are free and have nothing to do…it is
actually the opposite. It is not a benefit…it is a hazard…leisure, if you don’t have
anything to do it is a terrible thing…leisure when you are busy is a great thing; it
keeps your mind away from sadness and situations (Janet)

Perceptions of Changes in Leisure Following the Death of a Spouse

Along with the many changes noted above that occurred in the widowed women’s
everyday lives as a result of losing their spouses, certain changes were evident in their
leisure and free time. While married, these participants shared their free time with their
husbands, engaging in leisure activities that they both enjoyed; mostly hanging out with
friends and engaging in social activities.

A major change in the women’s leisure was evident in the changed meanings of
some of their leisure; for example, when they participated in social events that they used
to participate with their husbands. Most of the widowed women noted that they dreaded
attending family affairs and social gatherings because it simply reminded them of their
spouse and the time they spent together in such activities.

We would spend time with our friends; we had poker nights on Saturday; we were
6 couples who played together, we would have dinner at each others’ houses and
so on…that was more or less our social life. If we didn’t play poker we would do
things together but then unfortunately, as life goes on, people sort of pass away
and it came to the point that the group broke up because of the fact that people
didn’t invite widowed people; but that was part of our social life. We were
involved in many groups at our synagogue where we had made a lot of friends;
we would go to each others’ houses for parties, dinners and things like that
(Hilary)

All participants reported that shared leisure with their spouses had been an
important time for them as a couple to grow closer, as well as time for relaxation and
enjoyment. After their spouses’ deaths, these women engaged in “shared” leisure with other women whom they met at CNOW and who had experienced the same type of loss. This new “shared” leisure has created a somewhat negative impact on how the women perceive and participate in leisure.

**Impact on Women’s Non-Couple Leisure**

Most women talked about the personal time they had for leisure during their marriage when they were unaccompanied by their spouses. They were involved in activities either on their own or with friends when the activities did not pertain to their husbands’ interests. After their loss, most of these widows stated that overall their non-couple leisure did not change as much as they had expected.

Most things didn’t change after Brian died. The things that changed were the things Brian and I did together…Now (after loss), I know that when I have to attend a family affair or something, I… I dread going to it…I don’t enjoy family affairs anymore the way I did before because as I said, Brian was a good dancer and we used to dance together at such affairs and by going to them, it simply reminds me of him and the times we spent dancing and it hurts…they play music and songs that we liked and would dance to and it is difficult, you know (Hilary)

My free time and leisure changed drastically; like night and day…I mean, you are not with your husband anymore…you are with OTHER people so you have to make the most out of it…otherwise, if you don’t do anything, you will end up like a wallflower…you have to try…you have to join a group; you have to do things. I am doing things now that I am a widow; I come to this widow’s group…I do volunteer work at a hospital, my whole life has changed; I wouldn’t be doing these things if my husband was here (Joyce)

Women who were independent throughout their marriages and who were involved in leisure activities beyond the ones shared with their spouses reported that their leisure did not change as dramatically because they were already involved in other leisure activities such as volunteering and socializing with friends.
Impact on Couple Leisure

The loss of their companion was the most difficult adjustment that these women had to learn to live with. This loss was also evident in the women’s leisure. The loss of spouse had a negative impact on the women who had been sharing their leisure time with their husbands for many years and were now suddenly dealing with a new kind of leisure; that of non-couple leisure.

I miss the companionship. I mean even if we went for a walk in the afternoon he would always hold my hand; so I miss that…we did a lot of activities together; we didn’t have a car so we did everything on foot…he would always hold my hand; we had a good time together; so those sort of things are hard not to miss (Hilary)

Well to be honest, I think that when you are with a husband or a partner, there is more acknowledgement from outside; there is more respect from outside; you are taken more seriously I think and then whatever you are experiencing, whether it is a play or whether it is an illness or something, you have someone to share it with; you have someone to discuss it with…and someone who will listen to you and help you make any decision; those things I miss a great deal (Diana)

You know it is difficult in the beginning, especially when it concerns things you used to do WITH your husband; to go back ALONE, even what we found very difficult and to some extent we still do; family weddings and so on….and this is your own family but it doesn’t matter you are ALONE, you know? It is difficult…everybody gets up to dance and you are alone…you know, it is difficult (Diana)

Women who were more dependent on their husbands and spent most of their free time with them reported that there was a change in their free time and leisure because joint or couple leisure was the only thing they knew how to do. With the absence of their spouses, they did not feel that they could participate in any kind of leisure in the early stages of bereavement. Immediately following the death of the spouse, the women were more preoccupied with receiving professional bereavement support and dealing with the loss. With the constant support from CNOW through the bereavement process, the
women were gradually and informally introduced to social and leisure opportunities such as: luncheons, going to restaurants, plays and recitals, and seminars to name a few. All the women attended these types of activities at some point, even if they were not active participants, but some admitted feeling guilty for “allowing themselves” to laugh and have fun.

Mostly during the bereavement it was like crying sessions, you know; I don’t even know if they had any of these activities because it wasn’t appropriate at that time…it was a different time. It was AFTER…AFTER the bereavement when you are sitting there like a human being holding your head up. If I remember correctly that is when they emphasized leisure and things to do in your free time because before that you had to deal with your pain, your loss and your emotions were all over the place (Alice)

This group helped me cope, well…by hearing the other women and their experiences, and they…well when I went to the first Christmas party, this was just six months after it had happened, and I saw them laughing and enjoying themselves I couldn’t believe it and I said to myself: How can they be laughing and how can they be so happy? And then the next year I was telling the jokes you know…so it gave me good role models, that you know; it is going to get better (Margaret)

As time progressed and they became more involved in such activities, they kept receiving ongoing support from CNOW and their peers (appraisal support) and soon realized that it was all right to have an enjoyable time. The women’s re-involvement in leisure was a result of the ongoing support received by CNOW along with the women’s natural adaptation to their spouses’ deaths. By that time the women had concluded the steps of the bereavement support program and through CNOW had taken charge of their new lives as single people. CNOW facilitated this gradual re-involvement as members of the group would share announcements of events taking place in the community and women who were interested in the activity had the opportunity to attend together.
Usually the women who come in for the weekly lectures will let the others know about anything that is going on and if they would be interested in going, like at the library if there is a concert and people haven’t heard about it; I will tell them and ask if anyone would be interested in going together…we have gone to the theatre, to concerts, plays (Margaret)

All the participants viewed their current social involvement with CNOW as leisure time because they were not obliged to attend. They appeared to derive pleasure and gain information by attending the weekly sessions as well as having the opportunity to meet and socialize with friends made during the bereavement support programs.

**Bereavement Support Groups and the Process of Leisure and Social Re-Involvement**

**CNOW Facilitates Social Leisure**

Many of the study participants looked to others for support within the bereavement support program. With respect to the latter, they hoped that their involvement would assist them in learning more about the bereavement process and provide the necessary interventions to resolve their grief allowing them to cope.

Looking to others for support (mostly to people from within the CNOW group) did appear to be an effective means of coping at the time of the loss for many of the women in the study. Also, all of the women reported that their involvement in the bereavement support group was important to overcoming their grief and that the social networks and friendships that were created with other women who shared the same experience were catalysts in their coping and their eventual involvement in social leisure.

Coming here was very effective; not only the bereavement group but the PEOPLE that I met; the new relationships that I made; because our group bonded beautifully, and it broadened my social little world…we were participating in social activities together; everything we did, we did together all of us…it helped the slowly easing back to society…we started going, nothing exciting; shopping
or for lunch and whatever; and I started rejoining the “human race” and I have to say that it was instrumental (Diana)

I think the activities helped me because it took out my frustration, you know you don’t sit around and think about sad things…you feel a lot better when you are doing something, especially in the presence of others…you release your anger, your frustration and it helps you heal and cope (Nicole)

**Gradual Process of Becoming Re-involved in Leisure**

Regarding whether bereavement support groups had any impact on the women and their involvement in leisure, the findings indicate that such support groups allow the gradual involvement of its participants into social and leisure activities as the latter go through the bereavement process. As the women described in their interviews, their re-involvement in leisure was not planned but rather spontaneous; it just “happened” as many women said. They also stated that during the bereavement program, they had started to deal with their issues of grief and were more open to being involved in social and leisure activities. Perhaps this was due to the fact that CNOW provided a safe environment for the women to network and eventually assist them with their re-involvement in everyday tasks and leisure.

CNOW helped me connect, network with other women who had gone through the same experience and to do things with (Margaret)

It is important to have social activities; they have to get together (bereaved persons) and see people and especially seeing people who have experienced the same thing…and seeing that they survived, they are alive and they are enjoying life and that they smile; that is very important…When they first mentioned something about a social gathering here, I was able to do it…even if I came and I didn’t partake (passive)...I was just there…just being there, and slowly I became more involved; look how long I have been here; I come once a week for the past fourteen years…they brought me out of my madness, you know; and the ability to meet new people; that was very important…and it not so much a matter of age group here, but rather it is the situation you are in; we have all gone through the same experience…some went through it (program) earlier and some later…and it feels almost like a place were you can feel comfortable (Stacey)
It is important for people to get on with their lives and obviously they have to go through the process; you can’t just say that I will go on with my life just like that, but once the grieving and so on is over, you have to realize that life goes on, and that this is your life and you are not going to get it back and you have to try and enjoy whatever you could, and I think socialization is very important because people never live alone; and it makes it much better for you, and now that I met somebody, and he is a widower too, it makes it much more better, because you have someone to share things with and you also have someone who has gone through the same experience (Margaret)

If you are using leisure well and if it is taking you out and if it is taking you amongst people, then it is the best thing (Diana)

At the beginning of the bereavement process there was not much room for leisure and free time. The pain and loss appeared to be too intense to allow the participants to think about free time and leisure. The main priority for the women was to come to terms with the loss, realize the changes in their life and find ways to deal and eventually cope with the loss. Subsequently, there was room for social and leisure activities in free time.

Well, we first had to go through our support group; and then they had other things going on but we didn’t go until after our bereavement support sessions were over…and slowly you get into some activities; some activities are fun but some of them are not so fun…and then we used to have like a luncheon once a month, and you know? It was…then we would find jobs to do, we were a bunch of volunteers (when there were social activities offered at CNOW); it kept us busy (Nicole)

During bereavement, free time and leisure are not important; not in the beginning, but later, yes I think it is important later…but not at the beginning…well you know, and that depends on the individual also, in my case not at the beginning…that was the good thing about the bereavement support; the social component to it and the bonding with the other women who had gone through similar experiences (Helen)

We had one girl in our group who used to be very active; she used to do sculpting, she used to do skiing and square dancing amongst other things and she hadn’t been back, especially square dancing, where when you are couples you go…and she hadn’t gone back to it because she used to go square dancing with her husband and she found it very difficult; and I remember clearly how she was encouraged (by CNOW) to make the phone call, to go, to be involved; and she is back where she was and she does all those things that she used to do before (Diana)
Despite the intense emotions of grief at the beginning of the bereavement process, counsellors encouraged the widowed women to accept invitations to social activities from their social networks. The rationale was that if widows kept refusing invitations eventually these would cease, and then when they were ready to engage socially, there would be no invitations forthcoming. In this case, this recommendation of accepting invitations for social involvement even though one is not yet ready do so may have influenced the way in which these widows were reintroduced into social leisure rather than non-social leisure activities. A few of the women noted that it was particularly hard accepting invitations from friends to go out and socialize but they felt that if they refused the invitations their friends would not repeat the gesture.

At the beginning I stayed at home; I really couldn’t force myself to go out; and then, I started coming here and one day they told us that if we kept refusing invitations that they would at some point stop coming; and when we would be ready they wouldn’t be any invitations; you have to start, no matter how you are feeling about being socially involved at that stage, you have to start accepting and the very next day I got a call from a cousin for dinner and…it practically choked me to say yes (laughs); it was a difficult first time but after that it became easier (Diana)

Once the initial denial and pain of the loss had decreased in intensity, the potential increased for involvement in free time and leisure.

The duration of grief differed from person to person but the general sentiment was that one could accept the fact that her loved one had died and deal with her loss within the first year and within the second year at the most, without suggesting that they were not still grieving or dealing with some of the changes that were created by the loss.

I started being more involved and being more social about a year after his loss. I think that it was a short time; I don’t know if people can do it before that; perhaps some people can, but basically you need the year to find out where you are, which
world you are living in and adapt to the changes that occur in your life after your loss (Diana)

Leisure, Coping and the Bereavement Process

Social Leisure Serves as Distraction

All of the women indicated that when they participated in social leisure with other widows these activities served as a distraction from their negative experience with loss. Once they were immersed in leisure activities, the activity itself was the only thing on their minds (no matter they type of activity). Leisure helped them take their mind off the pain of the loss and for the entire duration of the activity, they were focused on the task at hand and not on the death of their spouse.

I can only speak about bridge…when you learn to play bridge; there is not another thing that you can concentrate on EXCEPT to learn how to play; so in that instance I was not thinking of my husband; I was thinking of the activity (Helen)

I think the busier you are doing activities and taking your mind off your own self, is the best therapy…It doesn’t matter really what activity you do…just being involved in something you like; let it be taking a course or seminar or whatever; it takes your mind away…and you don’t think of all the sad things (Hilary)

Besides the coping function of keeping busy and distraction with leisure activities, participants talked about some additional coping functions that emerged in their leisure. Margaret reported that when she would engage in social activities she would not allow herself to be sad or cry but rather wanted to portray a composed face and mental state to the world.

Well I would go to the gym, take yoga classes and such…if you do gym it’s physical and it takes up some of the stress and then most importantly you are occupied; and once you are occupied you can’t think about your own troubles, and you can’t start crying in front of other people, so you have to put on a good face and you do feel better once you do it, so you have to do it…Leisure is good because you are with other people, you socialize and see the world outside of yourself and also see the reality of the world; that other people have problems too, but then when you are participating in an activity with a group or with others you can’t be thinking about your own situation, your mind isn’t a hundred percent on
your loss...whereas if you are sitting home alone and you are looking at things that you did together or things that you see are missing from your life, then obviously it is much worse than if you are out with other people and you are distracted (Margaret)

This theme was reflected in the observations of other women as well.

Well, you know...being occupied whether it is things you really want to do or things that you would like to do, or things that need to be done. As long as you are busy I think that it gives you less time to think about yourself, your journey and your loss (Hilary)

For ME keeping busy and doing activities with other people was the best thing in the world; because if I will be mourning I have less time to be mourning if I am with others. I mean if you are going to feel sorry about yourself, you have less time to do so when you are involved with others and with activities together (Janet)

Diana talked about an experience she had shortly after her husband died.

I remember meeting an old friend at the mall, and it was very shortly after my husband had died; at that point it was costing me to dress up in the morning and go out. It was a supreme effort to do that...and I did...I was dressed and even put lipstick on and I went to the mall to meet my old friend and she said “But you look well” it was the way she said it that bugged me in other words “You don’t look like you are upset about anything”. There was no point in explaining to her but I was very insulted that she actually believed that I wasn’t mourning; that I wasn’t grieving, because my hair was combed and I had lipstick on (laughs) you know? (Diana)

Social Leisure Perceived as More Effective than Solitary Activities

Janet made an interesting point when she talked about the solitary and social activities in which she participated after her husband died. Janet viewed leisure as a means for distraction only when she was involved in social activities with other people rather than solitary activities.

When you are doing things on your own I don’t think that there is anything beneficial about that; because you can’t do those things and enjoy them; I mean your mind is...whatever you are doing...gardening, sewing, cleaning, knitting...whatever you are doing, your mind is too free to wander; if you are with other people you talk about other things; your mind is more preoccupied...so
I would say that leisure is a misleading name; social activity is much more appropriate (Janet)

**Potential of Leisure for Women during Bereavement: Views of the Importance of Bereavement Support Programs**

The potential value of social or leisure programs offered in conjunction with the bereavement support programs was identified. All the women indicated that there was potential for leisure during bereavement as long as they participated in a bereavement support program first. They believed that involvement in such programs assisted them in managing more effectively their grief and provided them with helpful resources to adjust to the loss. The women thought that they would not have been able to overcome the death of their spouses if they had not participated in the bereavement support group at CNOW. Receiving professional support from trained individuals on bereavement and coping issues was considered to be very important in their initial coping with loss. For example, Joyce gave an example of how she sees herself being different from a widowed friend who had not participated in a bereavement support group after the loss of her husband.

You know, there is a friend of mine, a neighbour…she is a widow too and if I…I am sorry I can’t just sit there and do nothing you know; and she sits there for hours and hours and she will say to me “you are always busy, you are always going…” and I say “yeah, that’s me…sorry I can’t sit there and hold your hand and watch TV for hours”; there is nothing to talk about…only that “ I am depressed, I am so lonely” things like that….and I tell her that she has to keep going, to join a group and everything will fall in place, like it happened with me…sure I was sad and angry at the beginning but I talked to other women, I sought help from CNOW and that is why I am here today; being busy with volunteer work, doing things in my free time and basically keep going (Joyce)

On the same issue, other women also talked about the importance of seeking participation in support groups after a loss.
I think a support group is vital at the beginning. It is vital for the information you get and the encouragement you get; it is important for the contacts you make and the people you meet; at the beginning it is very important…it is THE way to start. The bereavement group was what is was all about in terms of coping. Now in terms of the activities…they did help because you rediscover people and you become very close to your friends; now most of my friends are widows from here so their time is the same as my time (no other obligations so they can get together)...so they are free and we do things together; all those help me heal (Diana)

I think it is important that people have to get on with their lives and obviously you have to go through the process (bereavement support); you can’t just say that I will go on with my life just like that but once the grieving and so on is over, you have to realize that life goes on, and that this is your life and you are not going to get it back and you have to try and enjoy whatever you can…and I think socialization is very important because people never live alone; and it makes it much better because you have someone to share things with and you also have someone who has gone through the same thing and you understand each other (Margaret)

The support you get is absolutely phenomenal...not only from the counsellors but the people you get to meet and acquaint with is tremendous. I definitely think it would have been harder to deal with my loss on my own and cope with it. I am sure I would have been much lonelier if I hadn’t attended CNOW, no doubt about it (Hilary)

**Leisure Involvement during the Bereavement Process**

Opportunities for participation in leisure and social activities were provided to the women participating in CNOW. The women reported that they could not pinpoint exactly when they first talked about engaging in leisure and social activities in their free time but that it happened rather unexpectedly. They did remember though, that it happened when they had accepted the loss. They were still dealing with the impact of the loss on their everyday lives but had also started to reconstruct their lives as single persons.

It was when I was starting to slowly ease back into society; we started going, nothing exciting, shopping or lunch and whatever…and I started rejoining the “human race” and I have to say that it was instrumental (Diana)
It assisted me because it helped me cope with daily life. Instead of staying at home alone and crying and telling myself I am a widow, I met with people and the benefits were very good. It is a matter of knowing people or being totally alone; there are a lot of benefits…it’s the social aspect and companionship that you receive from being involved in leisure activities that is very important. By being involved in these activities, it gives me a sense of belonging and that someone cares (Joyce)

**Community Leisure Resources Not Available**

The final theme to emerge from the analysis of the information gathered from the participants involves the study participants’ feelings that it would have been beneficial to them if leisure resources were available in their communities at the time of their early bereavement. More specifically, they felt that if they had been aware of leisure and social programs in the community available for people who were widowed, they would have participated in these opportunities as well as the bereavement support group. They indicated that being surrounded by other widows and widowers in such bereavement support programs was important because they could relate to one another since they had gone through the same experience. They also felt that they belonged in such groups because they thought that the other widows and widowers could understand their behaviour without judging it. Due to these factors, most of the respondents indicated that it was easier and more comfortable to engage in social activities with other widows and widowers, rather than participating in “mixed” programs.

Another interesting point that some of the women mentioned was that they would have found it valuable if information about community leisure and social opportunities was targeted at them instead of them having to go out to the community to seek it. They did not feel comfortable going alone to inquire about activities and programs; they would have preferred if services were provided to them through a program such as CNOW.
I am not just aggressive enough to go and look for things to become involved with. I tend to sit back and wait for them to fall in my lap (giggles). I would appreciate it more if activities were offered to me....I guess through word of mouth; what other people are into; what sounds good and to have someone to go with; I think that is really the issue; that there is someone to go with, someone to encourage you to go with them and have the same interests of course. I want to go and be involved but to show up somewhere by myself, even though I know that I will meet people there and socialize....but it is still difficult for me to walk in as a stranger (Diana)
Chapter 5
Discussion

Overview of Key Findings

Overall, the experiences of these women who had dealt with and were continuing to deal with the loss of their spouses were influenced by their relationships, the impact of the loss as well as their involvement in the bereavement support group. The analysis suggests that attending the bereavement support group played a significant role in the way these women managed their grief and dealt with their loss.

One of the themes that emerged from this study was that the impact of the loss was enormous for both women who had lost their husbands unexpectedly and for those who had expected their spouses’ deaths. However, unexpected loss appeared to exacerbate the emotional impact due to the initial shock of the death. The loss brought on several changes in the everyday lives of the women, mostly because they had to take on new responsibilities as single persons and they also had to deal with the loss of their companions and partners. Some friendships from the women’s pasts were gradually terminated and new friendships were developed with other female participants from the CNOW support group. Negative changes were also found for the women’s leisure when they had to deal with the loss of their “couple” leisure.

Another theme was that CNOW played a significant role in the process of leisure and social re-involvement of the women by gradually and informally introducing women to participate in social leisure with other participants of the group and eventually with others outside the group. The women’s involvement in social leisure allowed them to
temporarily distract their thoughts from the impact of the loss and the changes that were brought on as a result.

A new and interesting finding that emerged was that social leisure was perceived to be more effective in terms of dealing with the loss than solitary activities. Optimistic views for the potential of leisure during bereavement as well as the importance and effectiveness of bereavement support groups in the leisure re-involvement of women were also reported.

One more new finding suggests that the women’s leisure involvement primarily occurred with the beginning of their involvement in the bereavement support group, a time when the women had started accepting the loss and had begun to realize that it was important to reorganize their lives.

An additional finding suggests that the women were not aware of any community leisure resources available to them when they were going through the support program at CNOW. Such resources could have been beneficial if available at that time, and may have eased the women’s re-involvement in community leisure much earlier.

In my inquiry about the role of leisure in bereavement and the ways in which social support through leisure may assist women in dealing with their loss, several research questions were posed when the study was developed. An interesting finding emerged from the analysis that is related to these questions but was not the specific target of the research questions. This finding concerns the types of changes that occurred to the women’s everyday lives with the death of their spouses. I first will note these changes and impacts on the women’s lives in order to better understand their involvement in the
bereavement group and the ways in which their leisure may have been altered after the loss.

**Impact of Loss on Women’s Everyday Lives**

Based on inquiring about the type of relationship that study participants had with their spouses and the circumstances of their deaths, it appears that these factors play a role in the bereavement and coping of the survivors. Those widows, who lost their husbands unexpectedly due to an accident or suddenly due to the fast progression of an illness, reported a more intense shock and emotional reaction to loss. This finding suggests that a traumatic unexpected death such as a car accident may not only lead to the development of traumatic reactions but they may also tend to “exacerbate” the more general grief response (Bonanno & Kaltman, 1999, p.767). In terms of widows’ social engagement after their loss, research has established that those widows who have cared for ill spouses have spent most of their time in caregiving. With the death of a spouse, these individuals have substantially more time to engage in social commitments and leisure.

Future widow(er)s and those with ill spouses may have a sense-of-death forewarning and devote their time and energy to their spouses in their final days or months, thus reducing their pre-loss levels of social engagement (Utz., Carr., Nesse & Wortman, 2002, p530).

Also, those women who lose their husbands due to a long term or chronic illness report less shock and a lower level of impact. For those widows who were the primary caregivers for their husbands and who reported relief and gladness when their husbands died, the death marks the end of the suffering and their responsibilities as caregivers. As
noted by Hegge and Fischer (2000), these individuals often experience a restoration of energy levels after the spouse had died and the provision of care completed.

Regardless of the marital relationship and the mode of death, the women in this study appeared to have been able to accept the loss within the first year even though the powerful sense of loss may always continue. This finding supports research that suggests that most people do adapt over time, usually during the first couple of years of the loss but even then there are still differences amongst individuals (Stroebe et al, 2001, p. 751). The quality of the marriage also is pivotal to grief resolution (Hegge & Fischer, 2000, p. 36). The widows in this study for the most part overcame the shock of their loss, managed to deal and adapt to their new situations and reconstructed their new lives within the first few years.

**Taking on New Responsibilities**

The assumption of new responsibilities and the numerous changes that were brought on by the loss of a spouse were part of the bereavement process and a means for the women to accept their new roles as widows. However, as other researchers have found, new responsibilities also cause anxiety and stress.

According to Stroebe (1998), when people go through the process of grieving they also go through a restoration-orientation process. This process entails that when a loved one dies, not only does a person grieve for him or her, but one also has to adjust to substantial changes that are secondary consequences of loss (Stroebe, 1998). These extra changes add a significant burden for the bereaved individual and may cause more anxiety and distress.
These include mastering the tasks that the bereaved had undertaken (e.g. the finances); dealing with arrangements for the reorganization of life alone (e.g. move to a smaller apartment); developing a new identity from “spouse” to “widow” (Stroebe, 1998, p.10).

The most strenuous responsibility that widows had to take on was taking care of the finances. They reported a high amount of anguish in terms of paying bills, preparing taxes and making financial decisions on their own after so many years of marriage where husbands took on these responsibilities. Dependent spouses and those who have ambivalent feelings about unfinished business or who have to take on new responsibilities have more difficulty adjusting (Hegge & Fischer, 2000, p. 36).

Although the finances were a burden to most of the widows, they reported a decrease in housework responsibilities such as preparing meals, cleaning and in general doing housework, which supports previous research on the strains of widowhood (Umberson et al., 1992).

**Lost Companionship and Intimacy**

The widows talked about the many roles that were lost when their husbands died. The most significant role loss and the most negative aspect of widowhood was that of the companion. There is some consensus in previous bereavement research that individuals who loose their spouses tend to become more depressed after the loss (Bonano & Kaltman, 1999, p.769). One of the most important reasons is that the loss of a spouse may result in different perceived deficits for widows and widowers. The survivor not only looses a spouse and life partner but also the different roles that the deceased played in their lives such as the companion, the financial provider, the decision maker and so on (Stroebe & Stroebe, 1987; Wortman, Silver & Kessler, 1993, cited in Bonanno &
Kaltman, p.769). Also, in previous research widows have reported that they felt more depressed because of financial strain and strained relationships with children. However, they also report feeling better because they do not have to do as many household tasks (Umberson et al., 1992).

These aforementioned changes in the women’s everyday lives reflect modifications that occur to women’s leisure as well. The first question that guided this study dealt with this issue.

**Impact of Loss on Women’s Leisure**

Most widows in this study felt that the absence of their husbands was an important constraint to participating in those leisure and social activities they used to engage in together. Some participants stated that immediately after the death of their spouses there was a reduction in their leisure activities because they did not feel comfortable in engaging in those same activities without their partners. These types of activities were social in nature such as going to dances, going to the theatre and socializing with mutual friends. This study provides support for earlier research (Patterson & Carpenter, 1994) that found that the absence of the spouse was a major constraint to participation in leisure activities. Also, after the death of a spouse, most widows in the Patterson and Carpenter study expressed a lack of purpose and motivation to become involved in certain leisure activities especially during the first two years after the death.

Interestingly, in spite of the loss of a leisure partner, the women in the present study felt that overall their leisure interests did not change as much as they would have expected, meaning that they were still interested in the same social activities. The only
aspect that had changed was that they did not have someone to go out with to social occasions as a couple. The loss had a negative impact on the women who had been sharing their leisure time with their husbands for many years and were now suddenly dealing with a new kind of leisure; that of non-couple leisure. The increased feelings of loneliness that these women had encountered immediately after the death of their spouses may have prompted their participation in shared leisure with peers from within the bereavement support group.

The negative impact of the loss on the women’s leisure was mostly reflected in the loss of companionship in shared leisure, which was gradually substituted with the companionship of other women from the support group. Therefore, eventually, these women were able to continue engaging in the activities of shared and social leisure. This continuation is not to say that they did not miss the companionship of their spouses while engaging in these activities. As noted in the previous chapter, for many of the women, even though many years had passed since the death of their spouses, there are events that trigger the pain of the loss such as attending family and social events.

**Leisure Plays a Role in Dealing with the Loss of a Spouse**

This study established that social leisure had an important influence on the widows’ abilities to deal with their loss, mainly because it served as a means of distraction. In the beginning, widows would take on activities (the type of activity did not appear to matter) simply to keep their minds busy and away from the loss. This phenomenon is quite common in older widowed women. Babb & Glass (1997) found that women who had been retired professionals and had lost their spouses believed in the
importance of keeping busy and participating in joyful activities in retirement, and attributed their good attitudes to their busy lives.

In relation to leisure as a coping resource, this study provides support for some of the coping functions of leisure identified by Iwasaki and Mannell (2000). Their research suggests that leisure beliefs and behaviours can lead to a reduction in stress and increases coping efficacy. There was some evidence of leisure coping among the widows in this study.

Early in the bereavement process, there was not much opportunity for leisure involvement. Once support group members started accepting the loss and the new changes in their lives, they were more likely to participate in leisure. Though, they had accepted the loss, their leisure time was not considered as free but rather served as a distraction. Findings indicate that women were encouraged to participate in social leisure (either on their own initiative or as an organized group) by CNOW representatives. As the women indicated, they preferred participating in social activities with other female members of the support group since the lack of a companion to participate in shared leisure was one of the obstacles they encountered when becoming re-involved in leisure. Their involvement with other women from the group allowed them to substitute the lost “couple leisure” created after the loss with that of “shared and social leisure”.

As the women continued their involvement with CNOW, they kept receiving support from the group itself as well as from their fellow group members and became more involved in leisure activities. As time went by, the women did not perceive leisure only as a means of distraction but rather had started enjoying their time in those activities. Eventually, they reported that once they felt more comfortable with their involvement in
leisure activities, they became more selective in their participation of types of activities offered. They would not simply attend just to spend time and get out of the house but rather had started expressing interests in certain types of leisure activities. For example, some became involved with volunteering at hospitals. Although such an activity has a social component to it, it was pursued individually compared to the group activities attended with other CNOW members, such as: luncheons, recitals and concerts and seminars.

Also, the women who kept attending CNOW (after the bereavement support program was completed) were kept informed by other participants in the group about different events that took place in their community. The point here is that as time passed, participants stopped viewing leisure as a way to distract their minds from their loss but rather for enjoyment, fun and personal development.

A new and interesting subtheme that emerged suggests that besides social leisure serving as a coping resource, additional coping functions appear to be operating. A few participants talked about how their participation in social leisure forced them to present a composed self and mental state to the world. Because they wanted to be involved in “normal” leisure, they did not want to be looked upon as grieving widows by others in the same activity. Therefore, their emotional composure assisted them in blending in with the crowd and taking their minds off the loss. Being involved in social leisure also provided a way for the women to network with others (beyond the networks they had established with other widows in the group), socialize with them and see the world and reality that existed beyond their pain; that other people experience negative situations but they still go on with their everyday lives.
Another insight suggested by the findings implies that certain types of activities are more beneficial and serve as better distractions for women who are dealing with the loss of a loved one. In particular, social activities seem to be more effective as a distraction than solitary activities. The reasoning is that with solitary activities one may be focused on the task but the mind is free to wander. By participating in social activities, that is, when engaged with other people, besides focusing on the activity, there is also the social component involved in which, participants, talk to each other and therefore the mind is more occupied and not as free to wander on to negative thoughts and emotions.

The women also participated in social and shared leisure while they were attending the support group at CNOW. The support group provided a sense of belonging since all the women shared similar experiences in a safe, non-judgemental environment. In this type of support group, there was a sense of understanding and compassion. This environment encouraged them to seek social leisure together and develop strong social networks. Through social leisure, the women sought to fill the void of loneliness that was created by the death of their spouses. As well as distraction from their daily reminders with their loss, it was a way to reconstruct their lives and replace some of the missing features.

**Leisure Fosters Feelings of Social Support through Social Activities**

The widows’ reports of the development of new social networks with other widows who had gone through the same experience suggest that such networks are essential in dealing with loss. On numerous occasions the participants stated that they felt safe when they were in the presence of other widows (in the support group and outside) because they shared the same experiences and they had compassion and each other. Also,
they felt more comfortable engaging in social activities with other widows with no fear of being judged for simply having a pleasurable time in such activities.

Oddly, these women did not rely on their immediate families for support after their husbands died. One would expect that family ties strengthen after such a loss but in this case, the widows reported that they mostly relied on themselves. One probable reason for not relying entirely on family is the fact that these women took matters into their own hands and joined a bereavement support group. They did not want to burden their children and other members of their family since they were grieving the loss in their own way. This supports findings by Vachon and Stylianos (1988) that the spouse is not the only party suffering grief. The grieving individual is linked to his or her social support network therefore people in the network must be suffering the loss as well. Thus, these women relied on new support networks comprised of the counsellors at CNOW and their peers in the group. Vachon and Stylianos (1988) indicate that social networks serve a variety of functions including the provision of companionship, a sense of belonging, and feelings of value. For the women in the present study, such functions were established and enhanced through the widow’s involvement in the bereavement support group. Vachon and Stylianos found that when individuals dealing with bereavement are surrounded by a strong social support network and receive supportive comments from others, it gives them confidence and a sense of control over the bereavement process.

Hegge & Fischer (2000) found that widows who successfully went through the process of bereavement gradually accepted their loss and eventually reorganized their life by developing new identities, new ties to others and new roles. The same can be said for the widows in the present study who successfully attended the bereavement support
program at CNOW and managed to effectively accept widowhood, even though they still felt sad many years after their loss. These widows restructured their lives by accepting their new identities as single women, their new social networks, and the new roles that they adopted.

**Bereavement Support Networks Assist Gradual Re-involvement in Leisure**

A finding of this study that has not been reported in the literature previously is that bereavement support groups facilitate gradual re-involvement in social leisure. This re-involvement happened informally and gradually when the women had accepted their loss and strong ties amongst the bereavement support group members had been established. The review of literature suggests that survivors deal with their loss within the first and second year of the loss (Stroebe et al., 2001). Based on the findings of the present study, it would seem that participation in a bereavement support group might enhance or facilitate this adaptation. The same is presumed for survivors’ re-involvement in leisure.

This study found that bereavement support groups, besides providing professional assistance to people experiencing the loss of a loved one, also help them deal with the loss and adjustment to a new life by creating important new social interactions among participants who have been widowed and who share similar experiences. The gradual re-involvement of the women in social leisure was facilitated also by the sense of belonging and togetherness that had been established in the support groups. This finding supports past findings that bereavement support groups in addition to providing opportunities to learn coping skills and face new challenges (Caserta & Lund, 1993; Gartner & Riessmann, 1982; LaGrand, 1991, as cited in Caserta & Lund, 1996, p. 538), help
strengthen informal support networks, address problems of loneliness and social isolation and create a sense of belonging among the participants (Gottlieb, 1988; Lieberman, 1993, as cited in Caserta & Lund, 1996, p. 538).

The women’s participation in the bereavement support group facilitated their gradual re-involvement in leisure. Of course, this likely would have happened eventually, to some extent, even if they had not attended the support group. However, for the women in this study, it seems that their involvement with CNOW, the strong social ties that were facilitated among the group members, and the encouragement they received to participate in social leisure played a role in the women seeking social leisure outside the group. This supports past findings on the outside social contacts of members of bereavement support groups. Tedeschi and Calhoun (1993) speculated that many bereavement support group participants leave the groups feeling closer to other members of the group and that the sense of community that evolves among the members eventually allows them to concern themselves with issues other than those related to their bereavement as they begin to reorganize their lives (as cited in Caserta & Lund, 1996). Our ability to generalize a number of the findings of this study to people experiencing bereavement who do not participate in bereavement support programs and who do not re-engage in leisure is however limited.

The research evidence for a relationship between leisure and adaptation to bereavement and widowhood is relatively sparse and inconsistent. Patterson and Carpenter (1994) found that there was no significant relationship between participation in leisure activities and adjustment to widowhood among their participants. Widows who participated in leisure activities had not adjusted better to widowhood than other widows
who participated less frequently. However, Sharp and Mannell (1996) found that women who had lost their husbands showed fewer signs of psychopathology, felt less guilt and were happier the more frequent their participation in enjoyable leisure activities.

The findings of this study show that the widows dealt with their loss within one year of the loss of their spouse. One to two years after their husbands’ death all the women appeared to have come to terms with their loss and were socially engaged in activities offered within CNOW and outside. This appears to contradict the findings by Patterson and Carpenter (1994) and Sharp and Mannell (1996) that the leisure activities most frequently participated in by widows and widowers were home–based activities that were solitary or involved activities with family and friends. The participants in this study were engaged mostly in social activities that took place outside the home. Of course, these differences may have something to do with the fact that women who choose to participate in bereavement support groups are different than those who do not.

Another finding of some importance for leisure service providers is the perception by the widowed women that there was a lack of known leisure resources and opportunities for people dealing with bereavement in their communities. At the time these women lost their spouses, they felt that there were limited leisure resources available for widows, let alone the provision of formal structured leisure opportunities. The women indicated that they would have been very interested in participating in social/leisure activities had they known of their availability.

**Development of Grounded Theory or Framework for Further Inquiry**

From my study of women who had been widowed and their participation in the bereavement support group, I attempted to develop some grounded theory or at least a
framework to help understand the process by which widowed women come to be ready for leisure during their experience with bereavement. I have also attempted to include the bereavements’ support group influence on the women’s gradual re-involvement in social leisure and the changing meaning that leisure takes on during the participant’s involvement in the bereavement support process (see Figure 1, p. 88).

Women experiencing the death of their spouses have to deal with the impact of their loss on their everyday life activities. Being overwhelmed by the numerous changes in their lives, some women seek out help to deal with their loss when it is available. Consequently, they may seek participation in a bereavement support group/program in order to receive professional counselling and to deal with their loss along with peers.

The bereavement support group provides a safe environment for participants to communicate their thoughts, emotions and concerns about the impact that the loss may have had on their lives. By receiving support, information and encouragement, the women realize that they are not the only ones suffering from the loss; and that death is a normal part of life. By accepting this, the participants accept the loss and are more open to reconstructing their lives as a single person and making the necessary adjustments to the changes created.

The ongoing professional support provided to the participants in the bereavement group is not the only influence on the way in which participants accept and deal with loss. The new social support networks that are created within those groups such as the strong ties with fellow support group members also have an impact on the way participants deal with their loss and the way in which they decide to reconstruct their lives and adapt to them. Also, the feelings of social support, compassion, understanding
and the sense of community that is built within the bereavement support group environment, allow the women to go on with their new lives as single women.

The continuous support from peers and professionals keeps playing a significant role in the women’s adaptation to their lives. The informal and gradual involvement in leisure activities with peers in the group facilitates the gradual re-involvement of these women in social leisure. The bereavement support group at this point in the women’s lives, when they had adapted to their new lives, served as a social leisure network, which encourages the use of leisure activities as a way to help them normalize and adapt to their new re-constructed lives. It also should be noted that leisure took on a different meaning for the women who had gone through the bereavement support group and had accepted the loss and had become re-involved in leisure. Leisure shifted from that of a means of *keeping busy* and of *distraction* to include that of shared leisure for enjoyment and pleasure.

Figure 1 depicts the relationship between the participants’ involvement in the bereavement support group and their gradual re-involvement in social leisure. The findings of this study are significant in that they provide insight into how participation in a bereavement support group helps a person dealing with the loss of a loved one accept the loss and adapt to her new re-constructed life as a single person. Once individuals receive the help required to adapt to their loss, the bereavement support group serves as a social leisure network in which participants embark on social leisure with peers from within the group but also with others outside the group. Therefore, we can say that a bereavement support group can help the bereaved individual adapt and reconstruct a new leisure life as well.
Figure 1: Gradual Re-involvement in Leisure through the Bereavement Support Process

Impact of Loss

Loss

Bereavement Support Group Process

Ongoing Professional Support

New Social Networks within Group

Support Professional/

Adaptation

Leisure within Group

Social Leisure Involvement/Social Leisure Network

Leisure Outside of Group

Changing of the Meaning of Leisure and Gradual Re-involvement in Social Leisure

Feelings of support, compassion, shared experiences, understanding and safe environment
Limitations of the Study

There are several limitations to this study that I would like to acknowledge at this point. The first limitation is that all of the women who participated were Caucasian, in similar age groups and in a comfortable financial condition. Most of them practiced the Jewish faith and had also completed their post-secondary education and were therefore, well educated. The extent to which the results of the present study can be generalized to other groups of women (and men) is not known. However, a number of the findings support previous research.

Another limitation is the use of criterion sampling in order to recruit the participants. By using criterion sampling, some potential participants whose experiences and views may have been different were excluded from this study. More specifically, when I chose to interview English speaking women who had been widowed and who resided in the Montreal area, I immediately excluded any allophone speaking women who had gone through the same experience, and perhaps their different cultural perceptions would have provided different insights into the process of bereavement. Thus, the findings of this study may not be generalized to other ethnic groups for whom differences may exist.

Also, the fact that the participants were financially established may have influenced the results since not all women who are widowed have the same resources to participate in leisure. Recruiting participants from the same source (CNOW) also may have led to a study group who were different in some way from the many women who do not choose to participate in such groups. It may be that women who participate in such groups are more social and gregarious to begin with. Consequently, the findings would
not apply to women who are less social in nature. In fact, people who do not seek out support groups may prefer solitary leisure involvements following the death of a spouse contrary to the findings of this study.

One last limitation is that this study focused only on women, although I had intended to interview men as well. There were no men attending the bereavement support group at the time that I started my research. Stroebe (1998) has reported in previous research that there are sometimes gender differences in “expressiveness of emotions and emotional sharing” with women seeking more social support than men, while the latter rely on their own resources to cope. Also, men are less willing to talk about their loss in interviews, to seek social support and or to talk to others in general than are widows.

**Recommendations for Future Research**

The literature review that was conducted for the purposes of this study indicates the need for further research in the area of leisure and spousal bereavement. Some recommendations for future research include the following areas. First of all, there is a need to examine closely the issue of leisure coping and gender. It was noted that most of the research has focused on women but it would be interesting to explore the role of leisure in the lives of men who have lost their spouses. Since previous research on gender issues and bereavement have noted that men are less likely to talk about their experiences in interviews, perhaps a more effective recommendation would be for researchers to consider self-administered questionnaires in order to include widowers’ experiences in their studies.
This study provides evidence that bereavement support groups besides assisting individuals to reconstruct their lives also allow for or foster their gradual re-involvement in leisure. Our ability to generalize these findings to people experiencing bereavement who do not participate in bereavement support programs and who do not re-engage in leisure is however limited. Thus, another future research area includes a comparative study of individuals who have lost their spouse and have participated in a bereavement support group and individuals who have lost their spouse but haven’t attended such programs.

One other consideration for future researchers is to more closely examine what individuals who have lost a loved one seek in bereavement support groups, besides the professional support. This study suggests that those who attended had a positive experience with their involvement in the bereavement support group, adapted to their loss and eventually resumed involvement in social leisure. This experience may have something to do with the personality of these women and not with the actual involvement in the support group. Therefore, a closer look at the personalities of individuals who seek participation in bereavement support groups may suggest that it is a matter of the individual’s personality or social orientation that allows them to get re-involved in social leisure and not the bereavement support group process.

**Recommendations for Practice**

More extensive research on spousal bereavement coping will aid practitioners in the field of recreation either in clinical or community settings to better understand the growing needs of bereaved individuals. In recent years there has been a tremendous growth of long term care facilities throughout the country. By understanding the process
of bereavement and the best practices that aid adjustment and coping, practitioners will be able to implement more efficient recovery programs in order to help alleviate secondary effects that are attached to spousal loss, such as depression and loneliness. Also, by exploring the needs of people dealing with bereavement in terms of the way they cope will enable recreation practitioners to provide leisure education programs that will specifically address those needs and interests and provide them with healthy leisure opportunities which will aid in overcoming the pain that the loss of a spouse involves.

This study suggests that recreation practitioners and providers should communicate with representatives of bereavement support groups in order to better attend to the needs and interests of people who have lost a loved one and still want to be involved in leisure. There was no mention in the literature of such organizations existing or of any partnerships between bereavement support programs and recreation/leisure service providers.

Summary and Conclusion

The present study attempted to fill a gap in the literature by providing some insights into how leisure and social support help persons experiencing bereavement cope with their loss. This study provided an in-depth look into the experiences of women who had lost their spouses and attended a bereavement support group to assist them in adapting to the loss and reconstructing their lives. This study also demonstrated that the bereavement support group besides providing professional support to these women, assisted in their gradual re-involvement in social leisure both in and outside the group, through on-going support and the strong social networks that were formed among members of the group.
This study would not have been possible without the readiness of the bereavement support group’s administration to evaluate their services and find ways for improvement. After discussing some of my preliminary results with participants and the president of CNOW, the gradual re-involvement of participants in social leisure had not been perceived as a direct outcome of the bereavement support process. The informal leisure introduced within the group was considered to be a normal transition in the participants’ newly re-constructed life. The idea of close partnerships with community leisure service providers as well as providing knowledge of leisure resources within the participants’ community was well received.

The involvement of all the participants who volunteered to participate in this study is greatly appreciated. I would like to thank these women who took the time to answer my questions and to openly share their experiences.
REFERENCES


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Appendix A

Introduction Letter

Dear (Participant’s Name),

I am a Graduate student in the Department of Recreation and Leisure Studies at the University of Waterloo conducting exploratory research on the role of social support and the impact of bereavement on people’s daily living including the use of their free time. This letter is an invitation to participate in my study and help me learn more about the influence that people, activities and events had on your life after the loss of your spouse.

This exploratory research involves meeting with me and participating in an interview sometime during the month of January 2005. Although I hope to conduct the interviews during this period, I would be very happy to arrange another time if you prefer. Although the questions are quite general, you may decline answering any questions you feel you do not wish to answer. All information you provide will be considered confidential. Further you will not be identified by name in any report or publication that may result from this study.

This study and the interview questions and procedures have been reviewed by, and received ethics clearance through the University of Waterloo’s Office of Research Ethics (ORE) to ensure that it complies with ORE guidelines.

Thank you in advance for your participation in this study.

Yours Sincerely,

Maria Menounos
Department of Recreation & Leisure Studies
University of Waterloo,
Waterloo, Ontario, Canada, N2L 3G1
Appendix B

Study of Spousal Bereavement Consent Form

I agree to participate in an interview being conducted by Maria Menounos, on the role of free time/leisure and social supports in spousal bereavement coping. I have made the decision based on information I have received from Maria Menounos, and I have had the opportunity to ask questions and receive the additional details I wanted about the study. As a participant in this study, I realize that I will be asked to take part in an interview, which may take 45-60 minutes to complete. I may decline answering any of the interview questions if I so choose. All information which I provide will be held in confidence, and I will not be identified in any report or publication that may result from this study.

I am also aware that some anonymous quotations from my interviews will be used to provide support for any findings. I understand that I may withdraw this consent at any time by asking that the interview be stopped. I also understand that this project has received ethics review and clearance through the Office of Research Ethics at the University of Waterloo. In case I have any concerns or questions about my involvement in this study, I can contact the following people:

Maria Menounos (514) 856-0834  
Trudy Friedman   (514) 931-3935  
Dr. Roger Mannell (519) 743-5809

Participants Name:  
Participants Signature:  

Date:
Appendix C

Interview Guide- Sample of Interview Questions

Introductory Statement (Information to be covered prior to the commencement of the interview)

Before we start our conversation, I would like to thank you for agreeing to meet with me to discuss your experience as a widow/widower. I realize that this decision may have been a difficult for you to make and I appreciate your willingness to participate. I would like to make this a comfortable experience for you; therefore, I would like to remind you that you may decide not to answer any specific questions, or you may choose to stop the interview at any time for any reason. In such a case, please feel free to say so, and we will end our discussion. During our discussion, if you have any questions, comments or suggestions, please feel free to interject at any time. I would also like to mention that all information you provide will be held in confidence, and you will not be identified. Before we start, do you have any questions for me? (pause). If not, let’s begin. May I turn the tape recorder on? (Wait for the participant to respond, and then turn on the tape recorder). O.K., let’s begin.

Interview Guide Questions

1. General Questions

• Please tell me a little bit about yourself?
• Do you identify with any particular culture?
• How old are you?
• What is your marital status now? Have you remarried?
• Do you have any children?

Probes

• If so, how many?
• How close do you live to your children?
• Do you see your children often?

• Do you have any relatives and friends who live close by? Do you see them often?
• Where do you live presently? (house, condo, retirement home, assisted living home, with others)
2. Relationship with Spouse

- How long were you and (spouse’s name) together?
- I would like you to tell me a little bit about (spouse’s name). Are there any specific characteristics that you would use to describe (spouse’s name)?
- What are some unique aspects of the relationship that you cherish?
- Besides, the role of a spouse and a life partner, what other roles did (spouse’s name) play in your lives together?

   **Probe:**
   - When I say roles I mean such things, as financial provider, homemaker, family caregiver, to name a few
   - Are there any roles that you particularly miss?

3. Impact of Loss

- How long has it been since the death of (spouse’s name)?
- Under what circumstances did (spouse’s name) die?
- Was (spouse’s name) death expected or unexpected?
- Can you tell me a little bit about your initial reaction to your loss of (spouse’s name)?

- How do you think (spouse’s name) loss changed other aspects of your life?
  **Probes:**
  - For example, your job?
  - Your relationship with your children (if, participant has children)
  - Your friendships?
- How did you deal with your loss in the beginning?
- How did you initially try to cope?

  **Probes:**
  - Looked to others for support?
  - Participated in special activities in your free time, leisure?

- Was this an effective means of coping at the time?
- Was there something or someone who helped you overcome the initial shock of (spouse’s name) death?

  **Probe:**
  - If not, what supports would have been helpful but weren’t available at the time?
4. Participation in CNOW

- After your spouse’s death, how long did it take you to decide to participate in the bereavement support group offered by CNOW?
- How did you decide to register with CNOW?
- What made you contact CNOW?
- How often have you attended?
- Was there someone who encouraged you to do so?
- Was it your own decision?
- How did you feel when you went to your first meeting?
- What was it that made you stay with the bereavement support program?
- How did CNOW help you cope with your loss?
- What strategies/tips did you learn at CNOW?

Many people have said that following the loss of a loved one time often hangs heavily on their hands, particularly, free time or leisure time when they are not working or taking care of other everyday tasks. I would like to ask you a bit about your experience of dealing with free time or leisure.

5. Leisure Participation before the loss

- In your free time, when you were not busy with work and other daily activities or tasks what did you do for pleasure/enjoyment before your loss—with your spouse; on your own by yourself or with other?

  **Probes:**
  - What was your situation prior to your loss? Were you living at home? Was (spouse’s name) hospitalized?
  - With whom did you do these activities?
  - Were they done together with your spouse, with others, on your own?
  - How did you feel during your participation in these activities?

- In what types of leisure activities did you participate in together with (spouse’s name)?

  **Probes:**
  - Did you enjoy that? Tell me a little bit more about that experience?
  - Was it important to you to participate in leisure together with (spouse’s name)?
  - According to your perception, how do you think (spouse’s name) felt about your time together in leisure activities?
6. Leisure Participation after the loss

- How did your work and everyday activities change as a consequence of your loss?
- How did your free time and leisure change as a consequence of your loss?

**Probes:**
- How did you respond to this change? How did you deal with it?
- I am sure you miss (spouse’s name)... but what aspect of (spouse’s name) do you miss most when participating in leisure activities that you used to do together in the past?

- What kinds of leisure activities did you engage in the early stages of your life after (spouse’s name) loss? How did this participation change over time?
- What do you do in terms of leisure now?

**Probes:**
- How do you currently use your free time? Are there any activities that you would like to participate in that you aren’t?
- How would you rate your current level of participation? What are some reasons for that? (high or low participation levels)
- Do you believe that your involvement in leisure activities will change significantly in the future? If yes, in what way?
- Do you think you have been able to resume and continue to engage in the important and enjoyable leisure activities that you were involved in before (spouse’s name) loss?

- Were or are there any obstacles in resuming and maintaining your leisure or free time activities—those that were important and meaningful to you before your loss?

**Probe:**
- If so, how did you overcome these obstacles?

- How long after (spouse’s name) loss did you start participating in leisure activities?

**Probes:**
- Was there someone in particular who encouraged you to do so?

- Do you think that it took you a short or a long time before you participated in leisure again?

- Does or did your participation in any activities in your free time (however you define them) assist you in your ability to cope?
Probe:
- Are you satisfied with your current level of leisure participation?
  Yes, No and why is that?

7. Leisure Beliefs

- In your opinion is there a role that free time or leisure activities play in helping people during bereavement?
  - Probes:
    - How would you define leisure in your own words?
    - What are some of the benefits of leisure during bereavement?

- Do you believe that there is potential for leisure involvement immediately after the death of a spouse?
  - Probes:
    - Could you give me an example of how you got involved in leisure after your loss?
    - In what types of leisure activities did you participate? Do you still participate in those activities?
    - What do you gain from your involvement in such leisure activities?
    - How would you define your involvement in leisure?
    - What impact did the bereavement support networks have on your involvement in leisure after your loss?

8. Social Support

- Please describe your social networks during your marriage, in other words who would you rely on for any kind of support (family, friends, the community)?
- How would you describe your social support networks after (spouse’s name) loss?
- Who did you rely on the most after (spouse’s name) loss?
  - Probes:
    - In what ways did this person(s) assist you?
    - Did you find that helpful? Did you like it?

9. Social Support through Leisure

- How much interaction or contact do you have with those people who are the most important to you as part of your support network?
Probe:
- When you interact or get together with them in which types of activities do you participate (e.g., work, socializing in free time, volunteer activities, leisure activities)?

- While I am not suggesting that such recreation groups are available, do you think that you would enjoy participating in recreational groups with other widows and widowers?

Probes:
- Would you like to have contact with people who have gone through the same experience as you? Why or why not?
- If so, how would you want these activities to be arranged (i.e., through service providers, independent of service providers, part of CNOW)?
- Would you prefer for these programs to involve just widows/widowers?
- Do you think that participating in such activities will help in your coping with your loss?
- During your attendance in the CNOW bereavement program, did you have any thoughts of participating in activities in your free time/leisure?
- Did the people at CNOW talk about the role of free time/leisure at that time in your life?
- What types of activities do you feel would be beneficial to participate in as part of this group?

10. Wrap-up
- Is there anything else that I may have missed that you wish to discuss further?
- Is there any advice that you would like to give to newly widowed persons?

Thank you for your participation.