

Research Article

Lived Experiences of Widows Living in Mzuzu City, Malawi

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Received 20 December 2022; Revised 9 May 2023; Accepted 31 January 2024; Published 7 February 2024

Academic Editor: Tushar Singh

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The aim of the study was to understand the experiences of widows in Mzuzu city, Malawi. The study utilizes a qualitative narrative inquiry to explore the experiences of widows. Participants were identified in Chibanja, Zolozolo, and Chasefu townships within the city of Mzuzu. Ten participants were purposively selected and consented to be interviewed. Data were analyzed using Reisman's approach of thematic narrative analysis. The study has revealed that some widows had their property seized following the death of their husbands. The findings have shown that most of the deceased husbands had small-scale businesses and were living on what they had earned that day. This study recommends the Government of Malawi introduce social service programs where widows could be economically empowered through grants and monthly upkeep to help widows who are facing challenges in meeting their needs and to reinforce policies to prevent widows from facing challenges.

1. Introduction

Widows are considered to be one of the vulnerable groups in society due to the experiences they go through after the death of their spouses [1]. Women who are widowed go through physical, social, and physiological experiences that impact their well-being [2]. A woman is considered to be a widow once she has lost her husband [3]. Evidence has shown that widows are a vulnerable group but their needs are not considered in the community as their property is grabbed, discriminated, and isolated [4]. Reports indicate that widows are subject to patriarchal, customary, and religious laws that predispose them to discrimination on issues related to inheritance rights [5].

According to Burnett [6], widows' distinctive needs remain unrecognized by society, organizations, and health systems. The experiences that widows go through have an impact on their physical, social, and psychological well-being [7]. Malawi has culturally and religiously diverse practices regarding issues of property ownership in times of the death of a spouse. Many widows report that property is withdrawn from them by relations of the deceased husband [8].

The increasing number of women who have lost their husbands globally is a public health concern and has become an issue of priority for national and international organizations [1]. According to the World Health Organization, it is estimated that approximately 250 million women worldwide are widows [1]. The problem has further been exacerbated by pandemics such as HIV and AIDS. The World Widows Report of 2015 has ranked countries that have the highest number of widows. The number is increasing in countries with high rates of HIV and AIDS infection as well as civil conflicts [9]. Platzer [10] indicated civil war as a contributor to widowhood as men are killed during the war. It has further been observed that widows outnumber widowers in both developing and developed countries [11]. This has been attributed to the longer life expectancy of females and age differences between married couples as older men marry young women, hence making the number of widows to increase [7]. Approximately 22,153,903 women in sub-Saharan Africa are widows in which 10% of the population is currently aged 45 years [11]. The Malawi Demographic Health Survey (MDHS) of 2015 indicated that there were 3,262 widows in Malawi [12]. Although the 2018 Malawi population and housing census

indicated the total population to be 17,931,637, the magnitude of widowhood was not highlighted [13]. Therefore, the actual number of widows in Malawi remains unknown. Despite the lack of this information, there is anecdotal evidence regarding the physical and psychosocial challenges that widows in Malawi suffer from. These challenges include property grabbing, financial hardships, and sexual cleansing rituals which lead to sexually transmitted diseases such as HIV and AIDS [9]. Some widows might be suffering in silence, hence the need to conduct the study to understand their perspectives.

There is a scarcity of reported evidence regarding the lived experiences of widows in a Malawian context. Nonetheless, the nature of the studies conducted in other countries rendered their findings limited in representing the experiences of women in Malawi. Conducting a study in this area would help in the development of evidence-based strategies that would provide a guide on how widows can be supported in Malawi and other similar settings. Therefore, this study aimed at exploring the lived experiences of widows in Mzuzu city.

2. Methods

2.1. Study Design. This study utilized a qualitative narrative inquiry where the lives of each participant were explored. This was carried out through storytelling whereby each participant provided a narration of her widowhood trajectory. The approach was chosen as it is participant-centered [14]. The design focuses on studying a single person, gathering data through the collection of stories, reporting individual experiences, and getting meanings out of those experiences [15]. Thus, qualitative studies discover meanings, uncover multiple realities, and do not generalize findings to a target population [16].

2.2. Study Setting. This study was conducted in Mzuzu city in the areas of Chibanja, Zolozolo, and Chasefu townships. Mzuzu is the only city situated in the Northern Region of Malawi with a population of about 1.7 million people [16]. The majority of people living in Mzuzu city come from districts within the northern region and a considerable number of dwellers from other regions for both work and business ventures [16]. The setting was chosen because anecdotal reports indicate that most widows in the northern region of Malawi live in these areas. Kothari [16] defined a study population as an entire aggregation of cases in which the researcher is interested. According to 2018, preliminary census reports that Mzuzu city had approximately 390,169 widows [16].

2.3. Study Participants. The study participants included widows who did not remarry and were above 18 years of age. Widows with less than six months of widowhood were not included in the study, as this could not give a true reflection of their experiences. In addition, those who were not able to express themselves due to emotional distress and those who could not communicate effectively in any of the languages

used in this study were not included, as this could have misinformed the researchers. Ten widows were purposively sampled until data saturation was reached. The researcher contacted the widows in their homes where the nature and purpose of the study were explained. Appointments were made for individual in-depth interviews with the widows at a place and time convenient to the research participants.

2.4. Ethical Approval. The study was reviewed and approved by the College of Medicine Research and Ethics Committee (COMREC) certificate number P. 08/20/3103. Mzuzu city council office granted permission to conduct the study in the study sites. Clearance was obtained from the block leaders before starting the study. Study participants were informed about the study, and their participation in the study was voluntary. Written informed consent was obtained from each participant prior to conducting interviews. All the data that were collected from participants were kept with utmost confidentiality.

2.5. Data Collection. The in-depth interview for each participant took place in a quiet place within their homes. A semistructured interview guide was used to allow participants to narrate their experiences of widowhood. Interviews were conducted in Chichewa and Tumbuka languages based on the language preferences of the participants. During the interviews, widows were asked to narrate what it felt to be a widow. Probes were used to unfold more information from the participants. Each interview lasted approximately 30 to 45 minutes. Interviews were recorded with participant consent. Data collection was carried out from July 2020 to March 2021.

2.6. Data Analysis. Data analysis was carried out concurrently with data collection [14]. The audio-recorded voices of the interview were transcribed verbatim. Since the interviews were conducted in Tumbuka and Chichewa languages, transcription was initially carried out in the same languages. The transcripts were then translated word for word into English to allow for proper analysis and understanding of participant's experiences. This was carried out to make sure that all relevant information from the participants was captured. In this regard, the transcribed materials were presented to two colleagues, and both were health workers who were conversant with Tumbuka, Chewa, and English to check if the retranscribed content reflected what was said in the initial transcripts.

Then, the researcher re-read the content to get immersed in the data before identifying richer meanings to come up with condensed meaning units and identify content codes and similar categories.

2.7. Trustworthiness of the Study. This was made possible by making sure that the interview guides captured the research objectives so that they yielded data that were relevant in describing the psychosocial needs of widows [17]. A comprehensive description of the research design and

methodology which was accompanied by an extensive literature check to maintain clarity was employed. Mathews and Ross [14] assert that qualitative researchers are unconcerned with issues of applicability but rather work with a few cases that are demographically nonrepresentative to study a phenomenon in greater depth to ensure transferability. Furthermore, there was a comprehensive description of the research design and methodology which was accompanied by an extensive literature check to maintain clarity. Confirmability was ensured by including raw data, thematic categories, interpretations, and process notes to ensure possible audit.

3. Results

Table 1 shows the demographic characteristics of the ten participants in the study. Participants' ages ranged from 35 to 71 years with a mean age of 56 years. All participants were Christians. Six of them were doing small-scale businesses whilst one participant was employed as a civil servant. The remaining participants were housewives. Seven participants attended primary school education, and three were educated up to secondary school level.

3.1. Key Themes. The following themes emerged from the participants' responses to the study: property grabbing, economic burden, and psychosocial challenges.

3.2. Property Grabbing. Participant's accounts indicate that property was grabbed by force and not in accordance with the Wills Inheritance [18]. For instance, one participant reported having no control over her property as her brothers-in-law took charge of the whole deceased estate. This has been illustrated in the following quote:

"My in-laws told me that they will be in control of all my properties. Then I started hearing stories that the company is going down. When I ask for money for food, they said things are not working. . . then I heard from my relative that all the money from my business was used for buying beer and later the cars were sold." (Participant 2)

Furthermore, another participant lamented that her property was grabbed immediately after the burial ceremony of her husband as her in-laws took advantage of the funeral situation. This was indicated in the following quote:

"In my case, after I buried my husband, I realized that my in-laws had taken everything even plates, they did not even consider that I had children who might need these things" (Participant 3).

The property grabbers could create false stories pertaining to the whereabouts of the family assets. One participant reported that her brothers-in-law cheated her and that the deceased property was used during the funeral ceremony when it was shared among themselves. The following is the quote from this participant:

"I lost all the maize I harvested that year and goats which were four in total. . . My inlaws lied to me that they used it during the burial ceremony but only to be told by my relatives that things were taken by my in-laws" (Participant 4).

Although the narratives above show that property was seized by in-laws, the study also revealed instances where property was not grabbed by some widows. One participant indicated that her husband's estate was left to the biological children and the wife of the deceased. No property was taken by any immediate family member. The following excerpt elaborates:

"My in-laws did not take away anything as they said it has to be used by the children as they grow up" (Participant 5).

In addition, the findings have established that property grabbing was influenced by the quality and quantity of the available assets. For instance, one participant reported that it was difficult for the in-laws to grab any property due to the limited financial resources that the deceased relation had left.

She explained the following:

"To be honest, none of my in-laws took part in owning my wealth. It just ended because it was little, even my husband did not even have a bank account that his people could say let's inherit his wealth." (Participant 6)

Another participant also narrated

"There was nothing new after the death of my husband as no one came to grab our property as he was only relying on piece-works, and he did not even have an account. We relied much on my stepdaughter from his first wife" (Participant 7).

This excerpt further elaborates on

"My husband relied on piece-works . . . we had no property for someone to grab" (Participant 8).

Individual personality had an influence on property grabbing. One participant narrated that despite being a second wife, no property was taken away from her, and she inherited all the property as illustrated in the following quote:

"My in-laws were nice, and they did not take away anything from me. . . (Participant 5). People from my husband's side were good as no property was grabbed and that property is what am using" (Participant 7).

Having prior knowledge and information on the rights of a woman to own property had an influence on property grabbing. It was revealed that some relatives could not grab property because they were aware that the wealth accrued was realized from both parties as expressed by two participants:

TABLE 1: Characteristics of participants.

Participant	Age	Educational level	Years in widowhood	Religion	Occupation
1	52	Secondary	10	CCAP	Civil servant
2	65	Secondary	12	Seventh Day	Business
3	35	Secondary	7	Roman Catholic	Business
4	43	Primary	7	Church of Christ	Business
5	61	Primary	7	Anglican	Business
6	70	Primary	20	CCAP	Housewife
7	71	Primary	36	Roman Catholic	Housewife
8	61	Primary	5	CCAP	Housewife
9	68	Primary	5	CCAP	Business
10	36	Secondary	4	Anglican	Business

“To be honest, none of my in-law took part in owning my wealth.... It was just enough to take care of my child” (Participant 10).

3.3. Economic Burden following the Death of a Spouse. The economic hardships experienced by participants were due to the demise of their spouses. One participant reported the hardships she encountered because she could not provide for the basic needs of her family. The following excerpt elaborates

“Poverty has even made me to be taking roasted maize with boiled water with little sugar as a meal.... I never did this with my husband. Life is hard without my husband!” (Participant 1)

Some participants had difficulties to sustain the standard of life that they lived prior to the death of their spouse. They reported failing to pay for the necessities of life such as utility bills and other basic needs such as sugar or soap, as narrated by two participants:

“Life in town needs you to pay bills for electricity and water and to buy food that’s when you realize that being a widow life is very painful....” (Participant 2)

3.4. Psychosocial Challenges Experienced by Widows. Participants were asked to share the psychosocial challenges they experienced after the death of their husband. Most women reported negative psychosocial experiences depending on the conditions they went through. For instance, one participant reported that she could not freely mix with other people as illustrated in the excerpt as follows:

“I felt uncomfortable to socialize with people as I was labeled a transmitter of HIV” (Participant 3)

Participants were affected psychologically through illusions as one participant narrated that she could not socialize with other people thinking that she was eying for other men. This is illustrated in the following quote:

“It was very difficult for me to mix with friends for wherever I went, people could talk about me. Even when I tried to take a walk, they assume am looking for men, this was depressive.” (Participant 3)

Another psychosocial challenge that emerged from the study findings was that some widows experienced insomnia and remained helpless in their day-to-day life.

“I do have sleepless nights almost every day thinking of what tomorrow will bring in terms of food. . . . Life in town needs you to pay for electricity, water and to buy food that’s when you realize that being a widow life is very painful. This has even rendered me voiceless I have nothing, and I don’t know how I will move on; this really makes me not to have peace.” (Participant 2)

Participants felt embarrassed by the passing on of their spouses. Other people in the community were of the view that the widow contributed to the death of her husband as evidenced as follows:

“It was painful to go through the cultural practices regarding that my husband has just passed on and looking at the kind of treatment I was getting; it was as if am the one who has killed him.... this was a stressor to me.” (Participant 5)

One participant remarked that she stopped visiting her relations due to the torture that she went through following the death of her husband. Instead, she was engaging in income-generating activities to take care of her children as illustrated as follows:

“Now Life is different as the frequency of interacting with my friends has gone down, what is important for me is going around looking for what to do in order to support my children as such the time needed to visit relatives and friend It becomes difficult to find.” (Participant 10)

The death of their spouses with whom they used to share intimacy, caring for children, and various life challenges, left them desolate. This left them to solve problems alone; hence,

they were left with intense feelings of loneliness due to lack of support. This is what some participants commented on their experiences.

“For me it’s me alone taking care of my children and all the challenges at first, we were six in our family all have died, both my mother and father they are also both gone.” (Participant 8)

“As a widow most of the time I was alone in a house no one to eat with.” (Participants 2, 4, 5 and 10).

4. Discussion

We discovered that being a widow is a complex and multifaceted experience that is often fraught with difficulties. The findings of the study are based on what widows experience in their day-to-day lives as they struggle to keep up with the demands of everyday life.

The findings revealed that following the death of a husband, widows face the challenge of property grabbing. In-laws were the principal perpetrators of this activity, and it was their only opportunity to possess property because widows had no say as they were accused of killing their husband. Adeyemo [19] reflects similar findings in a study conducted in Zimbabwe which indicated that property grabbing was carried out by in-laws and widows were blamed for the deaths of their husbands. We also established that participants resolved to listen to what their in-laws were demanding. Arguably, Jones [20] in his study found that property grabbing was carried out due to the belief that the property belonged to the husband’s side. This was given justification due to the issue of bride price according to their customs and cultures. Although data are sparse concerning property grabbing in Malawi, this is one of the significant findings in this study. It provides the suggestion that measures to curb this behavior must be taken into action since most widows do not have a say on taking over the property that they accumulated with their late husband. Participants experienced challenges of finances after the death of their spouses. Narratives from participants showed that most of the deceased men had small-scale businesses. We found that the husband’s death exacerbated the situation as a woman assumed the role of being head of the house. She was now responsible for paying school fees, electricity bills, and feeding the family. It can be suggested that women should be involved in income-generating activities so that they should be self-sustaining despite the passing on of their husbands. There is evidence that once a woman is widowed, she struggles in order to support her family [20]. Azumah and Nachinaab [2], in their study on the case of widowhood rituals among the people of the Bulungu community in Ghana, established that widows would send their children to beg in the streets whilst they could be engaging in commercial sexual practices.

We found that some widows were experiencing psychosocial difficulties because of discrimination. Most of the widows could not freely mix with their friends due to discrimination and societal norms. The limitations and atmosphere in which these widows found themselves in made it impossible for them to engage in income-generating activities.

They were unable to interact with their peers, resulting in poor psychological well-being and stress. This is in keeping with a study conducted by [21], which posited that some widows were left alone and barred from visiting their friends and family. Azumah & Nachinaab [2] found that mourning rituals are inherently gendered as they are more concerned with the death of a man than that of a woman. Arguably, the authors of [7] found that it is not only women who are psychosocially affected when it comes to the loss of a spouse. He discovered that men were more affected physically and socially once widowed due to loneliness. This provides the suggestion that there is a link between losing a spouse and psychosocial well-being since loneliness may impact on human life. However, the author of [22] found that the process of losing a spouse poses its own unique challenges such as property grabbing and financial grabbing to the surviving spouse.

4.1. Strengths and Limitations. This is one of the few studies that have delved into the lives of widows in the Malawian city of Mzuzu. The research findings provide an “insider’s perspective” and significant insights into how widows in Malawi deal with the difficulties they face. However, the study’s limitation was its reliance on the type of research design. The study could have been better if phenomenological research design had been employed, but instead, narrative inquiry design was used as this could not fit the period of the school calendar.

4.2. Recommendations on Challenges Faced by Widows. Based on the findings from this study, the researcher recommends Government of Malawi to introduce social service programs where widows could be economically empowered through grants and monthly upkeep. This would empower widows who are facing challenges in meeting their needs. The authors of [23] noted that economic support among widows promotes health and well-being as they can meet their needs.

Furthermore, the Government of Malawi needs to reinforce policies such as the Property Inheritance Act (2017) to prevent widows from facing challenges of property grabbing and for the abolition of violence against women as most widows are not aware of the policies. Some countries in the sub-Saharan region such as Zimbabwe and Kenya have made sure that issues of property inheritance are resolved through law as this helps in making sure that no property is grabbed [21].

Data Availability

The data supporting the current study are available from the corresponding author upon request.

Ethical Approval

All methods were performed in accordance with the relevant guidelines and regulations. For example, ethical approval for the study was obtained from the College of Medicine Research and Ethics Committee (COMREC) of the University of Malawi (reference number is P.08/20/3103).

Consent

Informed consent was read to each participant in the study, and written consent or thumbprint was acquired and participated voluntarily with the option to withdraw. To ensure anonymity, participants were assigned codes and names were not used in the study.

Disclosure

The content is solely the responsibility of the authors and does not necessarily represent the official views of the National Institutes of Health.

Conflicts of Interest

The authors declare that they have no conflicts of interest.

Authors' Contributions

V.C., J.B., and I.C. contributed equally towards study conception, study design, data collection, analysis, interpretation, and manuscript preparation and read and approved the manuscript.

Acknowledgments

We wish to acknowledge the study participants and the village heads for their support during the study. We would like to acknowledge the sponsors of the manuscript writing retreat, the Blantyre Institute of Community Outreach (BICO) and the University of Malawi's ACEPHEM Project. The study was supported through family resources.

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