



**A STUDY OF PSYCHOSOCIAL CHALLENGES OF ARMY  
PERSONNEL WIDOW  
“WAR BEGINS AFTER ITS END”**

**Dr. Naina Sharma**

Assistant Professor, Department of Distance Education, Punjabi University, Patiala

**Professor Ritu Lehal**

Director Women Studies Centre, Punjabi University, Patiala.

**ABSTRACT**

*The history of our glorious nation has had many instances of invasions by foreign enemies, and every time, they funnelled into our country through the land of five rivers, Punjab. India after independence has gone through 4 major wars viz. In 1962, 1965, 1971 and Kargil war in 1999. The martyrdom of Indian soldiers left behind widows and orphan children. This study aims to share the pains and challenges of widows from Financial, Legal, Psychological and Social perspective. This research of 51 case studies of 'Veer Narees' (war widows), presently residing in Punjab, revealed that majority of them had to suffer because of social and family discriminations.*

**Key words :** War widows, Psychosocial challenges, Post Traumatic Stress, Remarriage.

**Introduction**

Owing to the strategic location of India and neighbouring countries (Pakistan, China, Nepal, Bangladesh, Bhutan, Myanmar and Sri-Lanka), India has to face many security problems and had to fight wars in 1947 (at the times of partition), 1962 (Indo-China war), 1965 (Indo-Pak war), 1971 (Indo-Pak war and birth of Bangladesh) and 1999 (Kargil War) to protect its borders. It is estimated that no other country has as many war widows as India.

---

Our brave hearts have bravely marched into battle with little care for their lives. Many returned with injuries that they shall bear proudly as medallions of their service, and many more laid down their lives in the service of our nation. Families of these war heroes were presented gallantry awards but only a few were able to get actual emotional and material support for their livelihood.

However, till the turn of the 20<sup>th</sup> century, little was known and done about the emotional effects of war on soldiers' families. It is understandable, that the outbreak of war brings with it a paralysing fear of losing their loved one fighting on the border in the hearts of the families sitting and praying for him. Whenever a family member is deployed in a war zone, everyone is affected emotionally, and sometimes the emotional distress manifests into physiological repercussions as well. Parents, spouses, and children of deployed service members are the most directly affected members of the family; however, the extended family may also be affected by the grimness that grips the house as they anxiously wait for a message from their family member deployed in the war zone. Widowhood is anyway a traumatic experience, but if it included financial perils and social stigma, life could become unbearable. Despite their startlingly high numbers, war widows remain amongst the vulnerable members of society. Widowhood in our society is an ominous term that signifies deep loss. Women lose their husband, but unfortunately, they also lose their status and importance in their families. Being a widow translates to possible isolation, loss of dignity, individual identity, changes in social relationships and autonomy leading to psychological distress (Umberson, Wortman & Kessler, 1992). Most widows don't get the socio-economic support from the husband's family and also the required help to fight against their psychological distress. They have also reported being subject to sexual harassment. All these situations predispose them to develop anxiety as well as substance abuse disorders (Barrett, 2000)

It is also observed that besides psychological problems, war widows also have to face problems related to their legal rights which they are usually denied, such as Inheritance Rights. "The Hindu succession Act, 1969" made women eligible to inherit equally as men, but widows in many cases are deprived of their legal right. Patriarchal society and property inheritance is one of the primary reasons for poverty and social exclusion of Indian widows.

Another problem faced by them is the prohibition of remarriage. Remarriage of widows is socially looked down upon and even prohibited in the rural societal setup. Some

families though, come to terms with the issue of remarriage, given that it is within the family, often with the sibling of the deceased, to prevent the division of property. Widows are often put under tremendous economic stress if they are uneducated and unemployed. Their dependence on relatives takes away any sort of financial independence, and they're often coerced into foregoing the education of their children, or majorly compromising with the quality of it. They are also bound to accept responsibilities for child rearing and care of elders, as well as to bear with sexual harassment and assaults (Tambiah, 2004). We can see now, that widowhood entails a multidimensional challenge that can push a woman to the brink of breaking point, if she does not receive the support that is necessary in this time of extreme hardships.

It is not the widow alone who suffers, but her children too have to face adversities. The provision of education of children becomes difficult for women due to loss of income. The lack of proper education hinders the future employability due to which the entire family falls in the vicious circle of poverty and deprivation. All these circumstances predisposes women to various psychological problems as it gets difficult for them to cope with the myriad problems that routine life puts them through. They end up suffering from low self-esteem and anxiety related disorders as they are too uncertain about the future outcomes of their lives. They also find themselves in the midst of a torrent of practical problems of living alone. Their psychological distress manifests into physiological problems that eventually lead to exhaustion. Some, due to severe stress and lack of a solid support system develop Post-Traumatic Stress Disorder and in some cases they opt for suicide as a way of escaping from the perpetual agony.

This makes the support of war widows that must become a primary concern for policy makers as this assures the youth that their wives and family shall be taken care of, were they to lay their lives down for the country. A stable link between existing policies and the women desperately in need of the support entitled to them ought to be established. There is an urgent need of a holistic approach towards the upliftment of financial adjustments, emotional support and well-being of the dependents, social status of war widows and resolution of their family conflicts to get them back to the normal life.

From the review of the literature it has been found that veer naris have been passive recipients of various welfare schemes given by the central and state agencies. No comprehensive work has been done so far to understand the psychosocial barriers preventing

them from attaining their rightful status in the society. It is the need of the hour to adopt an all-inclusive approach. To achieve this, we have to encourage these widows and bring them in the main stream so that they become active contributors. There has been very little empirical research done on the experiences of these women who continue to fight even when the war is over. Thus it is pertinent to understand and record their experiences related to economic, social, psychological and legal struggles after their husband's death. *Realising the sensitivity of the issue and to bring these widows to the mainstream, Women's Studies Centre of the Punjabi University, Patiala initiated a project "A War Begins After its End : A Case Study Of Military Personnel widows".*

Keeping in view the need mentioned, following objectives of the study were proposed.

### **Objectives**

1. To understand the challenges and struggles faced by veer naris.
2. To study the economic hardships of veer naris.
3. To highlight the legal challenges and social discrimination of Veer Naris.
4. To study the post- traumatic stress of Veer Naris.
5. To have a comprehensive need assessment to help them to live with dignity.

### **Research Design**

For the present investigation to assess the challenges and struggles faced by Veer Naris both quantitative and qualitative research techniques were employed. The purpose of the quantitative technique was to study the differences in the legal, economic, social and psychological challenges with respect to certain demographic variables viz education, employment status and re-marriage of veer naris. To understand the lived experiences of veer naris phenomenological approach was adopted. Case studies were taken to make a documentary to preserve the oral history of the relentless struggle of these brave widows

### **Sample**

The sample of the present study comprised 51 veer naris in the age range of 40-80 years from middle class families. Veer Naris were randomly selected from Patiala, Banur, Fatehgarh and Sangrur. Only those women were interviewed who consented to be the respondents. Veer naris willingness to go through the in-depth interview was also an important criteria.

## **Research Tool**

To study the demographic profile and assess the extent of legal, financial and social challenges structured questionnaire has been used. Section A of the questionnaire consisted of statements related to the age, education, employment status, re-marriage and family support. Section B of the questionnaire covered legal and financial issues faced by veer naris. The questions were related to pension, property, inheritance, insurance, education and health needs of the children and self. Social status and discrimination is assessed in section C of the questionnaire. This section comprises nine statements to assess respect and honour in the family, family support, emotional support and exploitation or physical harm if faced in the family or in the social settings.

Section D of the questionnaire measures the satisfaction of veer naris with the legal, health, financial services and support provided by the Army headquarters. Statements pertaining to veer naris need for counselling services to overcome depression and bereavement are also included.

The PTSD Symptom Scale (Elizabeth A. Hembree, Edna B. Foa, & Norah C. Feeny) contains 17 items that diagnose PTSD and assess the severity of PTSD symptoms. PTSD diagnosis is determined by counting the number of symptoms endorsed (a rating of 1 or greater) per symptom cluster. PTSD is determined by totalling the 17 items 0-3 symptom ratings. Score range from 0-51. Higher scores mean more symptoms related to PTSD.

- Nominal data was used to assess the demographic profile viz age, education, employment and marital status.
- Likert scale was used to assess the extent of legal, financial and social challenges faced by veer naris.
- PTSD is a standardized tool on 0-3 rating scale.

## **PROCEDURE**

Keeping in mind the sensitivity of the issue and the psychological pain involved in asking questions related to the challenges and hardships of widowhood, each participant for the present investigation was contacted personally and an initial connection was established. This rapport building was facilitated by 43 ARMD Brigade as the participants (Veer Nari) were invited to the university and were honoured for the supreme sacrifice of their brave husbands.

The project team also visited the 43 ARMD brigade in September 2015 to have a better view of the services provided by the army wives welfare association (AWWA) to these Veer Naris. The participants' consent was taken on phone and then the interviews were conducted with the help of the structured interview schedule by going to their place of residence. They were requested to answer the questionnaire truthfully and they were assured that their personal information will be kept strictly confidential. Each participant was given clear instructions in English/Hindi/Punjabi depending on the comfort level of the participant. The participating Veer Naris were also provided counselling pertaining to facing challenges in their day to day lives.

The consent of the participant and their families was taken to take a phenomenological view of the life challenges faced as a veer nari. This data is presented in the form of a documentary as a tribute to the unending struggle of these Veer Naris.

## Results and Discussion

The raw data of this investigation comprised the scores on sociodemographic profile, legal, financial, social issues, post traumatic stress symptoms and psychological distress present in Veer Naris.

Sociodemographic Profile is depicted in Table 1(i-x)

Table1: Percentage of Veer Naris According to Different Age Groups.

**Table 1(i): Age Group of Participants**

Age Group	Number of Respondents	Percentage
Up to 40 years	7	13.7
41 to 50 years	15	29.4
51 to 60 years	7	13.7
61 to 70 years	16	31.4
71 to 80 years	6	11.8
<b>Total</b>	<b>51</b>	<b>100.0</b>
Mean=55.92; Median=54.50; Range= 32 (minimum), 80 (maximum)		

Age of respondents varied from 32 (minimum) to 80 years (maximum) with the median age as 54.50 years. The mean age was 55.92 years.

**Table 1(ii): Percentage of Educated vs Not educated Veer Naris**

Education	Number of Respondents	Percentage
Educated	22	43.1
Uneducated	29	56.9
<b>Total</b>	<b>51</b>	<b>100.0</b>

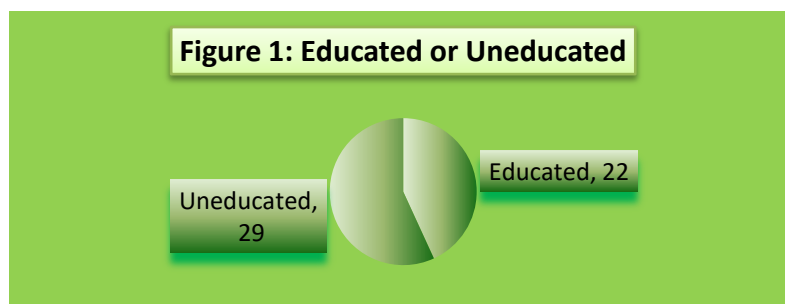


Figure 1 indicates distribution of participants according to their educational status and it indicates that 57% of Veer Naris were not educated.

**Table 1(iii): Area of Residence**

Area	Number of Respondents	Percentage
Rural	42	82.4
Urban	5	9.8
Semi-Urban	4	7.8
<b>Total</b>	<b>51</b>	<b>100.0</b>

Perusal of Table1(iii) Depict distribution of participants according to their residential area and 82% of the participants live in the rural area.

**Table 1(iv): Employed or Home Maker**

Occupation	Number of Respondents	Percentage
Employed	9	17.6
Homemaker	42	82.4
<b>Total</b>	<b>51</b>	<b>100.0</b>

Overview of Table 1(iv) indicates the distribution of participant with respect to employed/unemployed category and only 17% of the participants were employed.

**Table 1(v): Number of Children**

Qualification	Number of Respondents	Percentage
One Child	13	25.5
Two Children	20	39.2
Three Children	12	23.5
Four Children	2	3.9
Five Children	2	3.9
No Children	2	3.9
<b>Total</b>	<b>51</b>	<b>100.0</b>

Table 1(v) indicates the distribution of number of children of the participants

**Table 1(vi): Living in Joint/Nuclear Family**

Type of Family	Number of Respondents	Percentage
Joint Family	23	45.1
Nuclear Family	28	54.9
<b>Total</b>	<b>51</b>	<b>100.0</b>

Perusal of table 1(iv) indicates the distribution of the participants living in joint/nuclear family and it shows that 55% of Veer Naris lives in joint families.

**Table 1(v): Re-married/not re-married**

Re-marriage	Number of Respondents	Percentage
Re-married	14	27.5
Not Re-married	37	72.5
<b>Total</b>	<b>51</b>	<b>100.0</b>

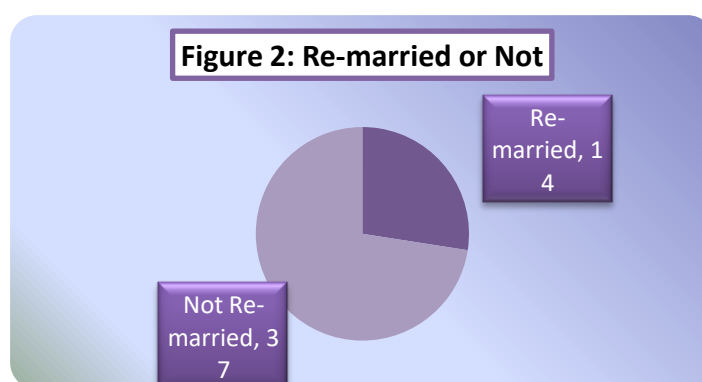


Figure 2 indicates the distribution of subjects who got re-married/not. It depicts that only 27% got remarried.

**Table 1(vi) If Re-married, with Whom**

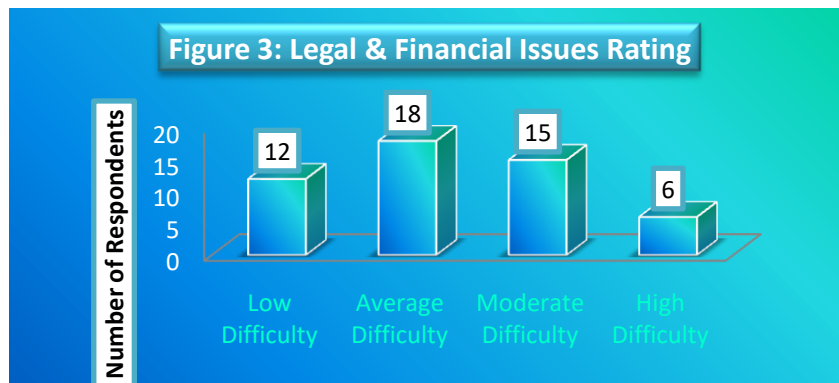
Re-married with	Number of Respondents	Percentage
Brother-in-Law	14	27.5
Not Remarried	37	72.5
<b>Total</b>	<b>51</b>	<b>100.0</b>

The perusal of table 1(vii) depicted that all veer naris married within in-laws family. (their brother in-laws)

**Table 2: Difficulty level in Legal & Financial Issues**

Scores	Number of Respondents	Percentage
0 to 13 scores (Low Difficulty)	12	23.5
14 to 26 scores (Average Difficulty)	18	35.3
27 to 39 scores (Moderate Difficulty)	15	29.4
40 to 54 scores (High Difficulty)	6	11.8
<b>Total</b>	<b>51</b>	<b>100.0</b>





Difficulty level in **Legal & Financial Issues** had been measured on a six point scale with 9 items. Scale coding (reversed for data analysis from the questionnaire) means 1=The Most Straightforward; 2= Very Less Difficult; 3=Less Difficult; 4=Moderately Difficult; 5=Quite Difficult; and 6=The Most Difficult. Category of difficulty levels are provided in Table 13 as *Low*, *Average*, *Moderate*, and *High Difficulty*. This table shows that 12 (23.5 percent) respondents had *Low Difficulty* in Legal & Financial Issues, followed by a little more than one-third respondents with *Average Difficulty* (n=18, 35.3 percent). Respondents having *Moderate Difficulty* were 15 (29.4 percent) and 6 (11.8 percent) had *High Difficulty* in Legal & Financial Issues. However, it may be noted that the overall range of scores varied from 9 (minimum) to 52 (maximum) scores with a mean of 24.65 scores and standard deviation of 11.5 scores.

**Table 3: Change in Social Status Rating**

Scores	Number of Respondents	Percentage
0 to 13 scores ( <i>Low Difficulty</i> )	2	3.9
14 to 26 scores ( <i>Average Difficulty</i> )	21	41.2
27 to 39 scores ( <i>Moderate Difficulty</i> )	16	31.4
40 to 54 scores ( <i>High Difficulty</i> )	12	23.5
<b>Total</b>	<b>51</b>	<b>100.0</b>

**Change in Social Status** was also measured on the same six point scale with 9 items as in the case of Legal & Financial Issues. There were just 2 (3.9 percent) respondents with *Low Difficulty* (Table 14) and majority (n=21, 41.2 percent) of the respondents had *Average Difficulty* for Change in Social Status. 16 (31.4 percent) respondents had *Moderate Difficulty* and about one-fourth (n=12, 23.5 percent) had *High Difficulty* level for Change in Social

Status. Furthermore, it may be of interest to note that the range of scores in this case varied from 10 (minimum) to 50 (maximum) scores with overall mean scores of 29.04 and 11.52 standard deviation.

**Table 4: Health Services Given in Military Hospital**

<b>Rating</b>	<b>Number of Respondents</b>	<b>Percentage</b>
Very Poor	1	2.0
Poor	2	3.9
Fair	5	9.8
Good	12	23.5
Excellent	31	60.8
<b>Total</b>	<b>51</b>	<b>100.0</b>

A perusal of Table 4 reveal that the most of the respondents considered health services provided in the military hospital to be excellent. Only 6% of the respondents showed dissatisfaction with the services provided in the military hospitals.

**Table 5: Financial / Legal Advisory Given by Headquarters**

<b>Rating</b>	<b>Number of Respondents</b>	<b>Percentage</b>
Very Poor	1	2.0
Poor	3	5.9
Fair	4	7.8
Good	11	21.6
Excellent	32	62.7
<b>Total</b>	<b>51</b>	<b>100.0</b>

The overview of Table 5 indicated that most of the respondents were satisfied with the financial and legal advisory provided by army headquarters.

**Table 6: Administrations Process for managing the death of a Spouse**

<b>Rating</b>	<b>Number of Respondents</b>	<b>Percentage</b>
Very Poor	4	7.8
Poor	5	9.8
Fair	13	25.5
Good	17	33.3
Excellent	12	23.5
<b>Total</b>	<b>51</b>	<b>100.0</b>

The table 6 indicated the army headquarters were able to help the family in performing the last rites of the martyred soldiers.

**Table 7: Whether sought & received help from any Support Services**

<b>Yes / No</b>	<b>Number of Respondents</b>	<b>Percentage</b>
Yes	13	25.5
No	38	74.5
<b>Total</b>	<b>51</b>	<b>100.0</b>

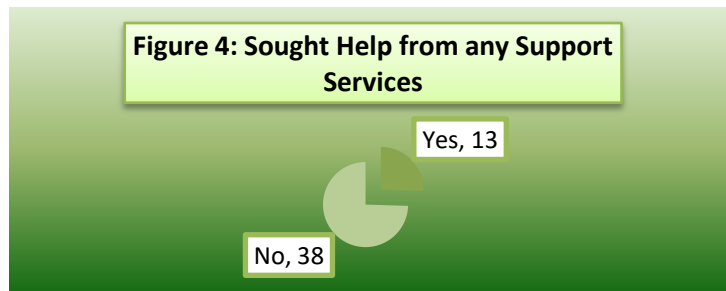


Figure 4 indicated that 78% of respondents did not get any support/help from any other state/central/civil agencies in the resettlement process.

**Table 7: Belief that Widows Face Particular Health Problems following Loss of a Spouse**

Yes / No	Number of Respondents	Percentage
Yes	43	84.3
No	8	15.7
<b>Total</b>	<b>51</b>	<b>100.0</b>

The overview of table 7 indicated that majority of the participants believed that they had number of health problems after the death of their spouse. They all believed that widowhood brings a toll on the health due to no emotional support given during the bereavement period.

**Table 8: Need of improved access to counselling services**

Rating	Number of Respondents	Percentage
First only (Bereavement counseling)	-	-
Second only (Help with loneliness or depression)	2	3.9
Third only (Manage health/mental health or care dependents)	5	9.8
First & Second only	1	2.0
First & Third only	4	7.8
Second & Third only	1	2.0
All Three Statements	36	70.6
No Response	2	3.9
<b>Total</b>	<b>51</b>	<b>100.0</b>

The overview of Table 8 indicated that the most of the participants were in favor of initiating better counselling services in dealing with bereavement, depression and carrier guidance for their children.

**Table 9: Percentage of respondents with respect to different levels of PSS**

<b>PSS Total (17 items)</b>	<b>Number of Respondents</b>	<b>Percentage</b>
0 to 17 scores	15	29.4
18 to 34 scores	22	43.1
35 to 51 scores	14	27.5
<b>Total</b>	<b>51</b>	<b>100.0</b>
Mean = 26.12; Std. Dev. = 11.02; Range = 9 (minimum), 45 (maximum)		

A perusal of Table 9 indicated that 43% respondents suffer from moderate symptoms of Post Traumatic stress Disorder (PTSD) while 28% reported of very high symptoms related to PTSD.

**Table 10: PSS Re-experience Category**

<b>PSS Re-experience (first 5 items)</b>	<b>Number of Respondents</b>	<b>Percentage</b>
0 to 5 scores	18	35.3
6 to 10 scores	18	35.3
11 to 15 scores	15	29.4
<b>Total</b>	<b>51</b>	<b>100.0</b>
Mean = 7.67; Std. Dev. = 3.73; Range = 1 (minimum), 14 (maximum)		

An overview of Table 10 indicated that 29 % of the respondents do get emotionally upset and feel as if the situation or trauma were actually happening again.

**Table 11: PSS Avoidance Category**

<b>PSS Avoidance (6<sup>th</sup> to 12<sup>th</sup> items)</b>	<b>Number of Respondents</b>	<b>Percentage</b>
0 to 7 scores	15	29.4
8 to 14 scores	24	47.1
15 to 21 scores	12	23.5
<b>Total</b>	<b>51</b>	<b>100.0</b>
Mean = 10.71; Std. Dev. = 4.31; Range = 4 (minimum), 19 (maximum)		

Table 11 indicated that 24% of respondents used avoidance/distraction as a coping strategy to deal with the past traumatic experience. They even avoided activities, situations or places that remind them of the trauma. In certain cases respondents reported of having intense negative feeling such as fear, horror, anger, guilt and shame.

**Table 12: PSS Arousal Category**

PSS Arousal (13 <sup>th</sup> to 17 <sup>th</sup> items)	Number of Respondents	Percentage
0 to 5 scores	16	31.4
6 to 10 scores	20	39.2
11 to 15 scores	15	29.4
<b>Total</b>	<b>51</b>	<b>100.0</b>
Mean = 7.75; Std. Dev. = 4.18 ; Range = 0 (minimum), 14 (maximum)		

An overview of Table 12 indicated that 29% respondents had the symptoms like irritability, hypervigilance, difficulty in concentrating or falling to sleep.

**Conclusion:** The quantitative analysis of data indicated that these Veer Naris are vulnerable section of the society due to lack of education, employment and living in the rural areas in a patriarchal society may culminate there psychological distress. Veer naris reported of social isolation and inability to adjust to the social system (Levinson, Winskell et al. 2014). Most of these women didn't go for remarriage and those who remarried is within the inlaws family thereby indicating there lack of decision making even in the issues pertaining to their resettlement. Further data reflects that most of the veer naris had health issues due to stress, anxiety and depression as there are no support services for handling mental health problems. Thereby these participants are suffering from PTSD and indulge into avoidance coping skills.

**Case Studies were taken to form a documentary and to have an in-depth understanding of the psychosocial issues they face. In this paper only two case studies are given:**

1. 40 year old Raj Kaur, wife of Shaheed Sipahi Mohinder Singh recollected her woes in the wake of being widowed 21 years ago. She lost her husband in a terrorist attack in Kupwara on 12 August, 1995. She was married only 2 and a half years and had a son and a daughter from the marriage. The daughter, unfortunately, never got to see her father. Raj Kaur never remarried since she had the support of her in-laws, and till date, she lives with her in-laws. Although she hasn't faced any major legal or social problems, yet there have been numerous financial difficulties owing to her unemployment. The problem becomes more acute since there are four people dependent on her late husband's pension. Shaheed Sipahi Mohinder Singh was cremated in their native village. Since the past two years, 98<sup>th</sup> Brigade helped her in opening a shop in the CSD area of the Patiala Cantonment and they give her Rs 3000 per month, which has uplifted her financial wellbeing, although the education of her children is hard on this meagre income. Her daughter is currently enrolled in M.Sc and

her son has graduated but is currently unemployed. The settlement of her children is her prime focus, as no tax exemption or bus passes are provided to them. She hopes to see her son getting employed in the near future, not for her sake, but for his own. It is, after all, every mother's dream to see her children shouldering their own responsibilities.

2. 43 year old Harwinder Kaur, wife of Shaheed Naik Jaswinder Singh, with tears in her eyes, recounts the hardships that she faced and is still facing since the demise of her husband in 2000. She got a job on compensatory grounds as per the guidelines of Punjab Government. Initially, she faced resistance from her in-laws against taking up the job, but with the intervention of friends and relatives, they agreed. She has resorted to religion as her coping mechanism to move forward in life. She had two daughters from her husband and also adopted one son from her brother in-law. She went on to tell us that being employed has immensely helped her in rebuilding her self-esteem and leading her life with her head held high. Simultaneously though, the feeling of being alone, and the emotional trauma still haunt her. She hopes that the government authorities initiate more schemes that can ease the financial burden that befalls a Veer Nari on losing her husband. For instance, tax exemption, free pass at toll plazas, and complete reimbursement of their children's education.

## **Conclusion**

The phenomenological review of Veer naris suggests that their war begins after their husbands' death. Support from the in-laws is a big factor in rebuilding the life as it eases the emotional burden. Employment of these women not only brings monetary up-liftment but also helps in holistic well-being as it fortifies the faith in the system and their own capabilities. Religious coping and faith helps these veer naris to have an optimistic view of the world and also helps them to accept the things that can't be changed.

## **Findings**

The study revealed that more than 50 percent of the total participants were uneducated, living in rural or semi-rural area and more than 80 percent were unemployed/ homemakers. Thus, demographics indicated that most of the Veer Naris were vulnerable in the face of adversity.

The results revealed that only 28 percent widows remarried and they all married their brother in law (late husband's elder or younger brother), thereby this revealed that due to division of

property and pension issues, veer naris were given the choice to remarry only within the in-laws family.

Percentage distribution revealed that 40% women had difficulty in handling financial and legal issues after their spouses death. In depth interviews have revealed that the major road blocks were created by their in-laws family. Furthermore a few veer naris stressed upon the role of education and employment under various support schemes of government agencies has been instrumental in managing their life.

All Veer Naris felt that it has been hard to reorient life in the wake of the agony of losing their spouses, which is magnified by the social barriers and challenges attached to widowhood in a typical patriarchal society. Veer naris also reported of various health issues due to the emotional and mental agony at the loss of their war heroes.

The results indicated that the battle to fight with the psychological distress is the toughest as veer naris reported of post traumatic stress symptoms.

The phenomenological analysis has highlighted the fortitude that these women showed in pursuing the education of their children despite not having being well educated themselves.

Furthermore veer naris who didn't have the backing of their in-laws were more emotionally anguished and were also found to be suffering from various psychosomatic illnesses. The apathetic attitude of in-laws and patriarchal societal norms led them to suffer in silence.

Veer Naris explained the difficulties of being a single parent while providing education and settlement of their children. Every occasion maybe diwali or good marks of their children brought tears in their eyes. Some reported of getting emotionally candid while participating in some weddings or family occasions.

Most of the widows appreciated the smooth disbursement of pension and provision of regular medical facilities by the Army Headquarters.

### **Recommendations**

1. Since India has large number of Veer Naris widow remarriage must be encouraged and Social taboos, cultural practices and personal laws should not be barriers in their right to inheritance and decision making. Family counselling and suitable proposal for remarriage need to be listed by NGO'S, state and central government. The Policy should ensure that the Widows

have direct control of all benefits provided by the Government.

2. Although there is a quota for children of army personnel or ex-servicemen but there should be a separate quota of martyrs' dependents for enrolment in any educational institute and also for seeking job in private as well as government sector. Children of Veer Naris must be helped economically to get tuitions and coaching to prepare for the competitive exams like NEET, JEE, Civil Services.
3. Skill development programs like stitching, computer training should be provided to make veer naris self-reliant. Advocacy is needed to amend the Livelihood Mission rules about the upper age limit for those who can receive livelihood training and the education qualification requirement should be lowered. Certain trade and occupational training programmes should be designed for uneducated veer naris as well.
4. Considering the economic hardships of veer naris certain tax exemptions like toll tax, income tax, etc. should be given. State governments should also make some policies to ensure their safety and protection of their property.
5. Veer naris need to be protected against any physical and sexual harassment as living alone in the patriarchal society aggravate problems. State and local government must ensure their safety and well-being. All city corporations and village panchayats need to have the data of these women and should be sensitive enough to provide any help required immediately.
6. There should be some psychometric tests to diagnose distress and depression along with the general health check ups in the army hospitals.
7. Counselling of veer naris to adopt effective coping skills should be a regular feature so that they don't suffer from isolation and depression. The children of veer naris should be given vocational guidance for selecting the course of their interest.
8. War memorials need to be dedicated to the real heroes for their unmatched courage and supreme sacrifice. This will enhance the families status in a particular societal set up and will be an inspiration for the youth to join Indian Army.
9. State governments must organize exhibitions and fairs in the memory of brave sons of the land and need to appreciate and recognize the courage of these veer naris whose war never ends.



10. The government to organize awareness workshops and sessions for Capacity building training, training on social security and livelihood schemes, Orientation on the basic concept of sanitation and nutrition, importance of balance diet in daily life, group formation, livelihood options for the women beneficiary.
11. Civil Society needs to play a role in empowering of War Widows and need them to bring to the main stream. Civil society institutions, organizations registered bodies, groups, welfare associations, Banks and Corporations need to create more job opportunities for the veer naris and also for their children.
12. There should be a helpline number for these veer naris to register complaint in case of any physical or mental exploitation they suffer in the society. An app to help their children pertaining to career counselling and job placement should be designed.
13. Media also needs to play a responsible role in changing the mindset and attitude of people regarding the rightful social status these veer naris deserve. More sensitization and empathy is required in the people to understand the pain of Veer Nari.
14. Niharika Shekhawat, (32), a widow of a Major who was killed in a terrorist attack in Kashmir in 2010 has opened an NGO “*Regards through Humanity*” for war widows. Here, she is taking up the cases of war widows from rural areas. From remarriage to setting-up livelihood means, counselling to overcome the trauma and to education of their children, she is taking up all their concerns. More educated and empowered women like Niharka should come forward to bring the passive recipients into the mainstream.
15. On the basis of Loomba foundation report 2015 *Invisible, Forgotten Sufferers*: International and national agencies need to recognize international widows day to understand the problems and hardships of widows and likewise can bridge the gap in bringing these women into mainstream.

## References

- Barrett,A.E. (2000). Marital Trajectories and Mental Health . *Journal of Health & Social Behaviour*, 41(4), 451- 464.
- Kalis, Ahmed, N. & Showkat, S. (2013). Geo-political Significance of Kashmir: An Overview of Indo-Pak Relations. *IOSR Journal of Humanities and Social Science*. 9(2).
- Available:<http://iosrjournals.org/iosrjhss/papers/Vol;9issue2/O092115123.pdf?id=6132>  
<http://www.insightsonindia.com/2015/01/13/security-challenges-and-their-management-iborderareas/IOSR-JHSS>.
- Levinson, A.N., Winskell, K., Adela, B., Rubardt, M. & Stephenson, R. (2014). People insult her as a sexy woman: sexuality, stigma and vulnerability among widowed and divorced women in Oromiya. *Ethiopia, Health & Sexuality*, 16(8), 916-930.
- Available: <http://dx.doi.org/10.1080/13691058.2014.921838>.
- Tambaih, Y. Sexuality and Women's Rights in Armed Conflict in Sri Lanka. *Reproductive Health Matters*.
- Umberson, D., Wortman, C.B. & Kessler, R.C. (1992). Widowhood and Depression: Explaining Long term Gender Differences in Vulnerability. *Journal of Health and Social Behaviour*. 33, 10-24, Doi: 10.2307/2136854.