

**Stressful Life Experiences and Mental Well-being in Widows: Moderating Role of Social Support**Saira Batool<sup>a</sup>, Sumaira Ayub<sup>a</sup><sup>a</sup> Department of Applied Psychology, University of Management and Technology Lahore Pakistan.**Abstract**

*The purpose of the current study was to explore the effect of stressful life experiences on mental well-being in widows by considering social support as a moderator. The study employed correlational research design. Data were collected from 350 widows with an age range of 21 to 65 years ( $M = 43.44$ ,  $SD = 9.34$ ) who had been widowed for at least one year by using the snowball sampling technique. The self-constructed demographic sheet, Stressful Life Experience Scale, Multidimensional Perceived Social Scale, and Mental Health Continuum - Short Form were used for the assessment. The results showed that stressful life experiences and social support have a positive relationship with mental well-being in widows. The finding also revealed that stressful life experiences and social support were significant predictors of mental well-being in widows. Furthermore, support from significant others and family moderated the relationship between stressful life experiences and mental well-being in widows. The present study makes a significant contribution to the field of counselling psychology by focusing particularly on the challenges faced by widows and highlighting the role of social support as a contributing factor to the well-being of widows.*

**Keywords:** Stressful Life Experiences, Social Support, Mental Well-being, and Widows.

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## 1. Introduction

Losing a spouse is a traumatic and stressful event for any married person. Regardless of age, losing a spouse brings complexities and challenges (Updegraff & Taylor, 2021). Young widows mourn not just the physical absence of their husbands, but also the loss of expected futures and shared dreams (Rando, 2018; Bowman, 1997). However, the experience of widowhood among women can differ significantly due to cultural norms, societal attitudes, and religious beliefs. In some communities, they may receive considerable support, while in others, they may face discrimination (Akpulu, 2023). However, religious and cultural expectations may interfere with their ability to express sorrow openly in a challenging manner (Yasien-Esmael et al., 2020). Globally, widowhood has increased, with approximately 350 million widowed individuals in 2020, of whom about 80% were women (Chamie, 2022). It must be said that the transition from wife to widow is a very difficult phase and a great challenge. Many widows with these challenges may suffer from stress, anxiety, and depression, particularly in an underdeveloped country (Ali & Shanif, 2016). In Pakistan, widows face significant emotional and economic challenges often exacerbated by a high level of illiteracy, which makes it difficult to earn and support their children (Ainsworth, 2007). Many widows face financial problems, deprivation of rights, limited job opportunities, poverty, social isolation, and modernization. In a patriarchal culture, they face issues with inheritance due to the dowry gift given at marriage, and sometimes they are forced to marry their brother-in-law (Alam et al., 2024). Many widows are mistreated after the loss of their husband, especially when they have no children or only daughters or live with unmarried children (Jan, 2022). Harmful cultural practices can further compromise widows' health in certain societies (Eboh & Boye, 2005). However, in Islam, widows have the right to remarry without any stigma and ensure financial security through an unpaid Dowry (mahar) to widows from the assets of the deceased husband, supporting dignity and security after spousal loss (Hassan, 2023).

According to Holmes and Rahe (1967), losing a spouse is the most stressful life experience (Schwarzer & Schulz, 2003). Factors such as marital status, quality of relationship (whether loving or supporting relationship, or stressful or abusive), and age differences between spouses influence the adjustment and health outcomes after the widowhood (Holm et al., 2019). Stressful life events significantly impact an individual's physiological and psychological functioning (Crosswell & Lockwood, 2020; Wong et al., 2012), and the transition to widowhood is associated with decreased happiness, confidence, and self-acceptance, alongside increased depression and poorer mental well-being (Aseltine & Kessler, 1993; Cohen et al., 2019; Thoits, 2010). Widow's emotional and physical health deteriorates in the first year after the loss of a spouse, or sometimes the duration increases (Srivastava et al., 2021). Extra responsibilities put an additional burden on widows, which is beyond their physical ability; as a result, the physical and mental well-being of these women is further impaired (Ahmed, 2011). They often fail to express their medical needs, especially when their families are struggling financially. They think that seeing medical attention would create difficulties and financial stress for their loved one (Alamet et al., 2024).

Social support is significant for older widows coping with spousal loss, which often creates emotional, mental, and social voids due to increased stress, multiple roles, and societal stigma. Support from family and the community can lessen both mental and emotional distress associated with widowhood (Miller et al., 1998). Strong social support acts as a protective buffer that facilitates stress management and adjustment (Winefield et al., 1992) and reflects a sense of being loved,

cared for, respected, and valued by people in one's life (Kathanya, 2022; Hirsch, 1981). Widows may receive support from the late husband's family, relatives, or peers, with the spouse's family support being more helpful in early grief and peer support becoming more important over time (Krause & Jay, 1991). Different types of social support play a significant role in alleviating distress among widows (Miller & Smerglia, 1998). Emotional support enhances motivation, life satisfaction, physical and mental health, and overall well-being (Haber et al., 2007). Appraisal or esteem support, which includes affirmation and feedback, empowers the person to cope with challenges (Ko et al., 2013). Informational support reduces isolation and stress by providing guidance and decision-making assistance (Harris, 1987), while Instrumental support provides practical assistance such as financial help, health care, transportation, and daily tasks (Morelli, 2015). As distress decreases, widows may require less emotional support and high instrumental and informational support, including new connections (Walker et al., 1977).

Studies show that social support from one's social network positively influences the widow's well-being (Awaliah et al., 2023). Mental well-being, a core component of overall well-being, encompasses social, emotional, and psychological functioning that supports individuals to manage daily life stressors, build relationships, and make decisions (Srivastava et al., 2021; Yoon et al., 2019). Psychological well-being includes stress management, life satisfaction, personal fulfillment, and overall contentment with life (Tennant et al., 2007; Galderisi et al., 2015; Ruvalcaba et al., 2017). Among older widows, mental well-being is shaped by emotional experiences such as joy, loneliness, despair, satisfaction with life, and future goals (Yoon et al., 2019). Given the impact of widowhood on psychological well-being, healthcare systems play a critical role in supporting adaptive coping and managing widowhood-related stress (Ali & Shanif, 2016).

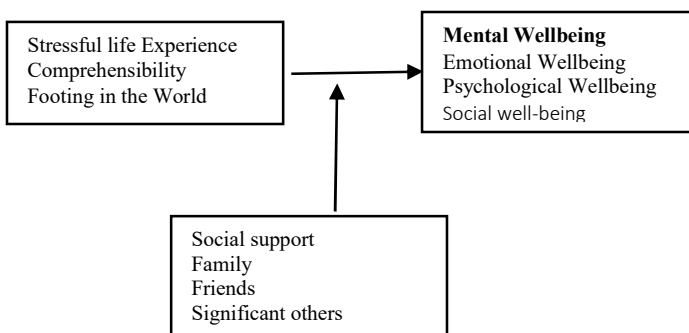
Several studies have shown that perceived social support promotes well-being among widowed individuals (Thuen et al., 2009; Cao et al., 2020; Ryan et al., 2009). Strong support from friends, family, and community fosters resilience, helping widows recover from stressful events and protecting trauma-related distress (Yıldırım & Tanrıverdi, 2021; Ozbay et al., 2007). Informational, financial, emotional, or physical support can lessen the pain of loss by alleviating the harmful effects of depression and improving their well-being (Miller & Smerglia, 1998; De Paula Couto et al., 2011). Widows' mental well-being is influenced by a variety of factors, such as feelings of protection, life satisfaction, joy, loneliness, depression, and future goals (Yoon et al., 2019). Gratitude acts as a protective factor against stress and depression and increases optimism and overall well-being (Emmons & McCullough, 2003; Kardas, 2017).

The stress-buffering model developed by Cohen and Wills (1985) suggests that social support is most beneficial during stressful situations, as that's when people need it most. Social support serves as a buffer against potential negative effects caused by stress by influencing individuals' perceptions of stressful situations and strengthening their belief in the ability to manage them. Life transition events bring significant life changes that can create new stressful experiences in a widow's life. Hence, social support plays a significant role in helping widows to cope with the loss of a spouse (Felner et al., 1983). So, considering the above discussion, the present study aims to explore the relationship between stressful life experiences, social support, and mental well-being in widows. Furthermore, it seeks the moderating role of social support in the relationship between stressful life experiences and mental well-being in widows, suggesting that a higher level of social

support may reduce stress and improve mental well-being by adjusting the widow's life's challenging problems.

Based on the preceding discussion, it is hypothesized that stressful life experiences will be negatively associated with mental well-being, whereas social support will be positively associated with mental well-being among widows. Furthermore, it is hypothesized that social support will moderate the relationship between stressful life experiences and mental well-being, such that higher levels of social support will buffer the adverse effects of stressful life experiences on widows' mental well-being.

Figure 1 Conceptual Frame Work of the Study



## 2. Method

### 2.1 Research Design

The study employs a correlational research design to investigate the relationship between stressful life experience, social support, and mental well-being in widows.

### 2.2 Sample Characteristics

A total of 350 widows with an age range of 21 to 65 years ( $M = 43.44$ ,  $SD = 9.34$ ) were taken from different areas of Pakistan using a snowball sampling strategy. Only those widows were included who had experienced the loss for at least one year to ensure they had adequate time to adjust to their loss. Women who have remarried, divorced, or separated were excluded. The detail of the sociodemographic characteristics of the participants is given below:

The average duration of widowhood among participants was 6.17 years, with a mean age at widowhood of 37.3 years. More than half of the participants (186; 53.1%) reported having more than five children, while 164 (46.9%) had five or fewer children. Regarding sources of income, about 48(13.7%) widows reported receiving income from parents, 60(17.1%) from children, 27(7.71%) from relatives, and 213(60.9%) from other sources. The average monthly Income was 21541.71 ( $SD = 43381.19$ ) rupees. In terms of family type, 171(48.9%) participants belonged to a nuclear family, while 179 (51.1%) lived in a joint family. With respect to living status, 69(10.7%) widows lived with in-laws, 104 (29.7%) with parents, and 8 (2.3%) with other relatives. Additionally, 70(20%) widows lived in a rented house, whereas 99(28.3) owned their own house. Concerning the relationship with their deceased spouse, 248(70.9%) participants reported having had a pleasant relationship, 28(8%) reported an unpleasant relationship, and 73(20.9%) described the relationship as normal.

### 2.3 Instrument(s)

**2.3.1: Demographic Data Sheet:** A demographic information sheet was provided to the participants to gather demographic information. The information related to age, education, number of children, occupation, income, source of income, residential area, family system, residence, age at widowhood, duration of widowhood, marital relation before widowhood, any psychological problem, and any physical ailment.

**2.3.2: The Integration of Stressful Life Experience Scale (Holland et al., 2010):** The scale is used to assess the degree to which an individual has made meaning of a stressful life experience. The scale consists of 16 items and measures two factors such as Comprehensibility (the degree to which one has found a way or made sense of stressful life experience) and Footing in the world (to assess whether a participant felt oriented or disoriented in stressful life experience in the world). The suitability of the item is assessed on a five-point Likert scale ranges from "strongly agree" (1) to "strongly disagree" (5). Higher scores refer more adaptive meaning made of a loss and decreased distress in the general stress sample and decreased prolonged grief symptoms in the bereaved sample. The scale consists of good alpha reliability, ranging from .92 to .94 (Holland et al., 2010).

**2.3.3: Multidimensional Scale of Perceived Social Support (Zimet et al., 1988):** The scale is used to measure the perceived level of support. The scale consists of 12 items and measures three factors such as Family, Friends, and Significant others. The Likert scale ranges from 1(very strongly disagree) to 7 (very strongly agree). A high score means high social support, and a low score means low social support. The scale has good alpha reliability from 0.85 to 0.95.

**2.3.4: Mental Health Continuum Short Scale (MHC-SF) (Keyes, 2007):** The MHC-SF is a brief 14-item scale to assess the three components of well-being: emotional, social, and psychological well-being. The Likert scale ranges from 0 (never) to 5 (every day). A higher score indicates a higher level of mental well-being. The scale has a good reliability, such as 0.87 (Perugini et al., 2017).

### 2.4 Procedure

The data were collected from different areas of Pakistan, with a majority of responses gathered from Lahore using four questionnaires based on the variables under consideration. Informed consent was obtained from all participants, and they were briefed about the nature and objectives of the study. Each questionnaire took approximately 20 minutes to complete. For the present study, 500 participants were approached, out of which 400 voluntarily participated, but 50 forms were incomplete and therefore excluded from data entry and analysis. As a result, the final sample for the study consisted of 350 participants. So, the response rate was 80%.

## 3. Results

Table 1

Psychometrics Properties of Scales and Subscales (N=350)

Scales	k	M	SD	Ranges	Cronbach's $\alpha$
<b>Integration of Stressful Life Experiences Scale</b>	16	47.66	8.28	24-80	.80
Comprehensibility	11	32.97	6.20	14-55	.75
Footing in the world	5	14.70	2.95	8-25	.51
<b>Multidimensional Perceived Social Support Scale</b>	12	44.41	10.98	23-82	.78
Significant other	4	15.15	5.75	4-28	.77
Family	4	15.83	4.86	5-28	.75
Friends	4	13.45	4.95	4-28	.80
<b>Mental Health Continuum-Short Form Scale</b>	14	39.88	9.14	17-64	.82
Emotional well-being	3	7.45	3.40	0-15	.83
Social well-being	5	12.79	4.17	3-25	.71
Psychological well-being	6	19.64	4.38	9-30	.72

Note. M = Mean, SD = Standard deviation, k = no. of items.

**Table 2**  
**Correlation of the Study Variables in Widows (N=350)**

Variables	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
1. Age	-.11*	-.12*	.86**	.06	.06	.05	.07	-.03	.06	-	.08	.05	.07	.04	-.01	.03	-.12*	.07
2. Education (Years)		.13*	-.10*	.23**	.31**	.29**	.26**	-.00	-.13*	.15**	.01	-.13**	.10*	.08	.04	.13*	-.09	.06
3. Job Status			-.10	.26**	-.02	-.01	-.05	.11*	.04	.17**	-.12*	-.11*	-.07	-.06	-.00	-.05	.01	.02
4. Age at widowhood				.02	.06	.04	.07	.00	.09	-.12*	.12*	.09	.10*	.05	-.01	.01	-.10*	.07
5. Monthly income					.13*	.12*	.11*	.04	.03	.06	.09	.12*	-.01	-.05	.07	.08	-.00	.09
6. Stressful Life Experience						.95**	.79**	-.13**	-.10*	-.05	.06	-.16**	.21**	.11*	.33**	.36**	16**	.26**
7. Comprehensibility							.58**	-.14**	-.12*	-.03	.05	-.16**	.18**	.12*	.32**	.34**	.17**	.24**
8. Footing into the World								-.01	-.05	-.07	.07	-.11*	.22**	.07	.26**	.31**	.08	.22**
9. Social Support												.70**	.74**	.67*	.27**	.23**	.14**	.25**
10. Significant others													.27	.12	.21	.12	.16	.18**
11. Family														.36	.21	.24	.07	.19**
12. Friends															.15	.14	.06	.15**
13. Mental well-being																.71	.75	.82**
14. Emotional Wellbeing																	.28	.43**
15. Social well-being																		.39**
16. Psychological Wellbeing																		

\* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

After screening the data, the analysis was carried out using SPSS 26. Reliability analyses were run on all the scales to find out the reliability of the data (See Table 1). Pearson product-moment correlation was carried out to investigate the relationship among study variables (See Table 2). Further, moderation through multiple hierarchical regression analyses was run to see if stressful life experiences and social support predict the mental well-being of widows (See Tables 3 & 4).

Table 1 shows the psychometric properties of the scales used in the present study. Alpha reliability coefficients values showed that all scales and subscales have an acceptable level of alpha reliability.

#### Relationship between Study Variables

Table 2 presents a correlation matrix, indicating that stressful life experiences ( $r = .33$ ,  $p < .01$ ) and social support ( $r = .27$ ,  $p < .01$ ) have a positive relationship with mental well-being among widows. Furthermore, social support was positively related to subscales of mental well-being, including emotional well-being ( $r = .23$ ,  $p < .01$ ), social

well-being ( $r = .14$ ,  $p < .01$ ), and psychological well-being ( $r = .25$ ,  $p < .01$ ), respectively. Results also showed that subscales of social support, such as significant others ( $r = .18$ ,  $p < .01$ ), family ( $r = .19$ ,  $p < .01$ ), and friends ( $r = .15$ ,  $p < .01$ ), also showed positive relations with psychological well-being.

#### The Moderating Effect of Social Support

In order to assess the moderating role of social support in the relationship between stressful life experiences and mental well-being in widows, the moderation analyses through multiple hierarchical regression were conducted (See Tables 3 & 4).

In Table 3, the overall variance ( $R^2$ ) explained by the model of mental well-being was 20% with  $F(8, 341) = 10.23$ ,  $p < .001$ . The results showed a non-significant interaction effect of stressful life experiences and social support ( $\beta = .25$ ,  $p > .05$ ) in predicting mental well-being in widows. The result also showed that stressful life experiences ( $\beta = 3.13$ ,  $p < .001$ ) and social support ( $\beta = 2.54$ ,  $p < .001$ ) independently but positively predicted mental well-being in widows.

**Table 3**  
**Moderation through Multiple Hierarchical Regression Analysis showing the interaction effect of Stressful Life Experiences and Social Support in predicting Mental Well-being in Widows N=350)**

Variables	B	95% CI for B		SE B	$\beta$	$R^2$	$\Delta R^2$
		LL	UL				
<b>Step1</b>						.01	.00
Constant	40.07***	34.87	45.26	2.64			
Age	-.02	-.22	.18	.10	-.01		
Education-in-years	.04	-.13	.20	.08	.02		
Occupation	-.48	-2.50	1.55	1.03	-.03		
Monthly income	1.59E-5	.00	.00	.00	.07		
Age at widowhood	.00	-.21	.22	.11	.00		
<b>Step2</b>						.12	.11***
Constant	42.76***	37.80	47.71	2.51			
Age	-.03	-.22	.16	.09	-.03		
Education-in-years	-.14	-.30	.03	.08	-.09		
Occupation	.04	-1.87	1.96	.97	.00		
Monthly income	1.00E-5	.00	.00	.00	.05		
Age at widowhood	-.01	-.22	.19	.10	-.01		
Stressful life experiences	3.29***	2.31	4.25	.49	.36***		
<b>Step3</b>						.19	.07***
Constant	43.63	38.86	48.39	2.42			
Age	-.01	-.19	.17	.09	-.01		
Education-in-years	-.15	-.31	.00	.08	-.09		
Occupation	.49	-1.36	2.35	.94	.03		
Monthly income	1.50E-5	.00	.00	.00	.07		
Age at widowhood	-.07	-.26	.13	.10	-.06		
Stressful life experiences	3.14***	2.21	4.07	.47	.34***		
Social support	2.49***	1.60	3.38	.45	.27***		
<b>Step4</b>						.20	.01
Constant	43.85***	39.00	48.68	2.45			
Age	-.01	-.19	.17	.09	-.01		
Education-in-years	-.15	-.31	.01	.08	-.09		
Occupation	.46	-1.39	2.31	.94	.02		
Monthly income	1.48E-5	.00	.00	.00	.07		
Age at widowhood	-.07	-.27	.13	.10	-.06		
Stressful life experiences	3.13***	2.20	4.06	.47	.34***		
Social support	2.54***	1.63	3.45	.46	.28***		
Stressful life experience x social support	.25	-.67	1.17	.47	.03		

Note. CI = confidence interval; LL = lower limit; UL = upper limit.

\* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

Further, the same analysis was performed considering the subscales of stressful life experiences (IV) and social support (Moderator) in predicting overall mental well-being (See Table 4). In Table 4, the overall variance ( $R^2$ ) explained by this model was 28% with  $F(16, 333) = 8.26, p < .001$ . The result showed that the interaction effect of comprehensibility and support from significant others ( $\beta = -1.56, p < .05$ ) as well as with family ( $\beta = 2.23, p < .001$ ) in predicting mental well-being in widows. Furthermore, the results also showed that support from significant others ( $\beta = .43, p < .001$ ) and friends ( $\beta = .26, p < .01$ ) significantly and positively predicted mental well-being in widows. The results also showed that age at widowhood significantly predicted mental well-being ( $\beta = -.08, p < .01$ ).

#### 4. Discussion

The current study investigated the relationship between stressful life experience, social support, and mental well-being in widows. The result of the present study showed a significant positive relationship between stressful life experiences, social support, and mental well-being in widows, which is consistent with a previous study conducted by Howard et al. (2022), who investigated whether stressful life experiences have potential effects on long-term well-being over one year. The results found that people's well-being remained constant for

those who experienced major life events (trauma, job loss, and birth), and there was no significant difference in well-being compared to the matched control group who did not experience stressful life events. These findings of a previous study highlighted the high level of psychological resilience in the general population. In a previous study, Ngo and Le (2007) studied the stressful life events and their interaction with social support and cultural factors in predicting violence in 324 Asian and Southeast Asian immigrants. The results highlighted that the ability to cope with stressors can be understood through the role and process of cultural factors and social support.

In the present study, 46% widows were employed, which can act as a means of protection, as in a previous study conducted by Samuel-Dennison (2006) on the association between employment status, stressful life experiences, and depressive symptoms in 96 single mothers (employed and social assistance recipients). It was concluded that mothers receiving social assistance experienced more severe depression symptoms than employed mothers.

**Table 4****Moderation through Multiple Hierarchical Regression Analysis showing the interaction effect of Subscales of Stressful Life Experiences and Social Support in predicting Mental Well-being in Widows (N=350)**

Variables	B	95% CI for B		SE B	$\beta$	$R^2$	$\Delta R^2$
		LL	UL				
<b>Step1</b>							
Constant	40.06***	34.87	45.26	2.64		.01	.00
Age	-.02	-.22	.19	.10	-.02		
Education-in-years	.04	-.13	.20	.09	.02		
Occupation	-.48	-2.50	1.55	1.03	-.03		
Monthly income	1.59E-5	.00	.00	.00	.07		
Age at widowhood	.00	-.21	.22	.11	.00		
<b>Step2</b>							
Constant	23.84***	16.97	30.70	3.49		.12	.11***
Age	-.03	-.22	.16	.09	-.03		
Education-in-years	-.14	-.30	.03	.08	-.09		
Occupation	.04	-1.87	1.96	.97	.00		
Monthly income	1.00E-5	.00	.00	.00	.05		
Age at widowhood	-.01	-.22	.19	.10	-.01		
Comprehensibility	.39***	.21	.58	.09	.27***		
Footing in the world	.40*	.01	.79	.19	.13*		
<b>Step3</b>							
Constant	13.89***	6.57	21.21	3.72		.20	.08***
Age	-.00	-.18	.18	.09	-.00		
Education-in-years	-.13	-.29	.03	.08	-.08		
Occupation	.56	-1.28	2.40	.94	.03		
Monthly income	1.54E-5	.00	.00	.00	.08		
Age at widowhood	-.08	-.27	.12	.10	-.07		
Comprehensibility	.42***	.24	.60	.09	.28***		
Footing in the world	.39*	.01	.76	.19	.12*		
Significant others	.40***	.24	.57	.08	.25***		
Family	.11	-.09	.32	.10	.06		
Friends	.13	-.05	.33	.09	.07		
<b>Step4</b>							
Constant	21.77***	14.21	29.32	3.84		.28	.08***
Age	.01	-.16	.19	.09	.01		
Education-in-years	-.10	-.26	.05	.08	-.07		
Occupation	.55	-1.22	2.32	.90	.03		
Monthly income	1.69E-5	.00	.00	.00	.08		
Age at widowhood	-.08**	-.27	.11	.09	-.07**		
Comprehensibility	.25	.07	.44	.09	.17		
Footing in the world	.19	-.17	.57	.19	.06		
Significant others	.43***	.27	.59	.08	.27***		
Family	-.07	-.28	.15	.10	-.03		
Friends	.26**	.06	.45	.09	.14**		
Comprehensibility x significant others	-1.56*	-2.75	-.35	.61	-.18*		
Comprehensibility x family	2.23***	.99	3.47	.63	.33***		
Comprehensibility x friends	-.09	-1.09	.91	.63	-.01		
Footing in the world x significant others	.47	-.70	1.65	.51	.06		
Footing in the world x family	-.36	-1.61	.90	.59	-.05		
Footing in the world x friends	-.50	-1.65	.64	.64	-.06		

Note. CI = confidence interval; LL = lower limit; UL = upper limit.

\* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

The result of the present study revealed that social support (significant others, family, and friends) is positively related to mental well-being. Many studies have been conducted before, and the findings were consistent with the present study. The result is consistent with a previous study conducted by Bankoff (1983) to examine the impact of social support on psychological well-being in 245 widows. The result indicated the importance of social support to improve psychological well-being. Thuen et al. (1997) analysed the effect of widowhood on psychological well-being and social support. The result showed that widows who received lower social support reported a low level of psychological well-being. In another previous study, Shamim et al. (2011) investigated the relationship between social support and psychological well-being among nuclear and extended families. The

result showed that participants with single parents who received low social support showed a low level of psychological well-being.

The subscales of social support, such as significant others, family, and friends, also showed a positive relation with psychological well-being. The findings of the present study align with the previous study of Walker et al. (1977) suggested through theoretical interpretation that widows need emotional support and care for patience after the loss of a husband. During the crisis loss phase of grief, parents are often the significant sources of support and may lessen widows' loneliness and help them to maintain a stable social identity, which is important for recently bereaved widows. As widows move from the crisis stage to the transition stage, their needs change, and they connect with the environment to reorganize and rebuild their lives.

The result revealed that stressful life experiences positively predicted the mental well-being of widows. The results of the present study are consistent with a previous descriptive analytical study conducted by Moatamedy et al. (2018) to assess the ability to manage stress and social support as a predictor of psychological well-being. The result showed that the ability to manage stress significantly predicted psychological well-being. The present study revealed that social support positively predicted mental well-being in widows. These findings were supported by the findings of a previous study carried out by Khan and Arif (2019), who analysed the role of social support as a predictor of mental health. The finding revealed that social support was positively associated with psychological well-being and negatively correlated with psychological distress. Yildirim et al. (2023) examined the contribution of social support in predicting emotional well-being. The result showed that support from significant others, family, and friends positively predicted emotional well-being.

The result showed that social support moderated the relationship between stressful life experiences and mental well-being in widows. The findings from the previous literature supported the findings of the present study. Damilep et al. (2023) studied the widowhood and perceived social support as predictors of psychological well-being on a sample of 425 participants, including 278 females and 147 males. The findings revealed that the interaction effect of duration of widowhood and social support significantly predicted psychological well-being among the widowed. Yu and Liu (2021) also examined the relationship between stressful life events, social support, and depression. The data were collected from 9,785 participants. The result showed that family support moderated the negative effects of stressful life events on depression. Social ties and loved ones as a main supporter are valued when older people experience a stressful life event. Family emotional support helps elderly individual to maintain their psychological well-being and reduces the shocks they receive from stressful life situations.

The present study showed a significant interaction effect of stressful life experience with other sources of social support (i.e., family and friend support) on emotional well-being. One of the previous studies conducted by Li et al. (2014) investigated the roles of social support (family and friends support) on emotional well-being in 700 participants. The result showed that family support played a significant role in buffering negative life events on emotional well-being.

## Conclusion

The present study concluded that there is a positive relationship between stressful life experiences, social support, and mental well-being in widows. The result found that stressful life experiences and social support positively predicted mental well-being in widows. Comprehensibility and support from others were strong predictors of emotional and social well-being in widows. The study also highlighted that support from family and friends showed a moderating role between stressful life experiences, emotional well-being, and social well-being. Furthermore, support from others also showed a moderating role between stressful life experiences and psychological well-being. It was also showed that interaction of comprehensibility and footing in the world with support from others, family, and friends predicted social well-being.

## Limitations and Suggestions

The current study, like many others before it, has certain limitations and suggestions that should be acknowledged. Firstly, in the study, only a limited number of widows from selected areas of Lahore and Bahawalpur were included following the research timeline. The study typically wanted to show that stressful life experiences decline mental well-being, but the results are opposite. However, the instrument used in the study was designed to measure the purpose in life and make sense that stressful events increase mental well-being. So, the study

suggests developing the instrument to measure the stressful events only. This study took only women widows; men sample should also be included, with certain limitations.

## Implications

The current research gives information on the relationship between stressful life experiences, social support, and mental well-being in widows. This study can assist institutions in helping widows to share their stressful life experiences and receive emotional support through focused programs and grief support groups. The study may enhance overall social support by raising public awareness about the challenges experienced by widows to adjust to problems, by reducing stress, and improving their mental well-being. This study recommends that the government ensure legal protection for widows facing harassment, whether within the family or outside, regardless of their employment status. A confidential reporting system should be introduced to take strict action against those responsible for causing stress and exploitation in the lives of widows.

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