e-ISSN: 2279-0837, p-ISSN: 2279-0845.

www.iosrjournals.org

Psychosocial Challenges Experienced By Women After Spousal Death, Within Selected Churches In Nakuru County, Kenya

Ann K M Muthangya¹, Dr. ZipporahKaaria², Doreen Katiba³

Kenya Agricultural & Livestock Research Organization
Private Bag, Njoro, Kenya
Department of Theology, Religious Studies and Counselling
Kenya Methodist University
Department of Theology, Religious Studies and Counselling
Kenya Methodist University
Corresponding Author: Ann K M Muthangya

ABSTRACT: The death of a spouse is an awesome event that challenges the psychological, social, emotional and spiritual understanding of life and sets up the beginning of widowhood status, resulting into bereavement and grieving. The loss of a spouse is one of the most negative life events and causes much stress to the widow. The purpose of the study was to investigate the psychosocial challenges faced by widows within the mainstream churches in Nakuru County, Kenya. The study focused on the psychological challenges that women face after the death of their spouses and the social challenges the widows' encounter after spousal death within the main stream churches in Nakuru County. To achieve the objectives of the study, the study adopted a descriptive research design to gather an in-depth understanding of the challenges faced by the widows after spousal death. The target population was all the women who had lost their spouses, irrespective of current age, and attended services in the mainstream churches in Nakuru County. Snowball sampling procedure was employed to identify 110 respondents from the seven churches. The research approach was qualitative and the data collection methods were interviews, observations and focused group discussions. The data were organized, processed and analyzed thematically and presented in verbatim. The major study findings indicated that spousal death results into both psychological and social challenges. The major psychological challenges included depression and the fear of taking up family responsibilities; while the major social challenges were poverty and financial stress, conflicts and rejection by both the in-laws and the community. The study recommended and proposed the need for the churches to initiate a widowhood ministry while the counties should consider setting up awareness centers on death effects, widows' rights, coping and intervention mechanisms.

KEYWORDS: Psychosocial challenges, Psychological challenges, Social challenges,

Date of Submission: 03-11-2018

Date of acceptance: 17-11-2018

I. INTRODUCTION

The number of women becoming widows has been increasing on daily basis due to the death of their spouses through various causes; such as accidents and various illnesses. As a result of such deaths, the women face challenges within the society and these affect them psychologically, socio-economically and spiritually (Miruka, Mojola, Nathan and Onginjo 2015). The African widows, irrespective of ethnic groups, are among the most vulnerable and destitute women in the region, as highlighted by the UN Division for the Advancement of Women (2000). This review, (UN Division for the Advancement of Women 2000), indicates further that the low status, poverty and violence experienced by the widows stem from various aspects, including discrimination in inheritance custom, the patriarchal nature of society, and the domination of oppressive traditional practices and customary codes, which take precedence over constitutional guarantees of equality, modern laws and international women's human rights standards. Almost worldwide, widows comprise a significant proportion of all women, ranging from 7% to 16% of all adult women (UN Division for the Advancement of Women, 2000).

The world of widowhood in many African cultures is characterized by dehumanizing cultural and ritual practices passed off as mourning rites, as discussed by Ajiboye (2016). The rituals, including wife cleansing and inheritance of the widow and all her husband's properties, subject the widows to various psychosocial challenges. According to Oniye (2000), some of the challenges a widow faces are related to the income variations, living conditions, perceived health, status and presence of a confidant. Oniye (2000) further noted that the widows feel ignored and suffer within the society; they may lack self-esteem and feel loneliness and may live in state of fear as they lack groups to identify with. The study further contends that an adjustment

DOI: 10.9790/0837-2311025864 www.iosrjournals.org 58 | Page

strategy is crucial because a widow without proper adjustment or assistance is not only experiencing problems, but could be a problem to herself, her family and local community. The perceived inability to cope with the demands of living following the death of a spouse causes stress and this result into various psychosocial challenges.

Recent research on the adjustment strategies of Nigerian widows indicated that changes in their living conditions are worse off emotionally after the observance of the mandatory mourning period and the widowhood practices that accompany it (Oniye 2000). Widowhood is also associated with the expression of anger, (Kitson 1987), and the intense grief and anger are more common among women in widowhood because of denial following the loss of a close spouse through death (Thomas and Shechan 1988). The review by UN Division for the Advancement of Women, (2000), concludes that the widows across the globe share two common experiences: a loss of social status and reduced economic circumstances.

A study done by Ogweno (2010) in Kibera slums in Nairobi County revealed that experiences among the widowed persons varied depending on the age, length of marriage before spouse died, gender, their economic status and the social support from family and the community. Another study done in Kisumu County (Miruka, et al 2015) revealed that the practice of widow care has not been fully implemented in churches. The research carried out by Nduati (2010) at Baharini location of Nakuru County, only analyzed the experiences of widowers and the pastoral care they receive. The literature reviewed did not indicate any similar studies that have been carried out in Nakuru County on widows and particularly focusing on the psychosocial challenges they face within the mainstream churches in Nakuru County. As indicated, the Nakuru County has over 29,561widows, (Kenya National Bureau of Statistics 2016: Kenya County statistical abstracts 2015). The widows participate in church activities, despite their different cultural backgrounds. The investigation on the psychological and social challenges the widows face within the main stream churches in Nakuru County makes it an ideal study location. Nakuru County is cosmopolitan, and various tribes have settled within the county. The main groups are the Kikuyu and the Kalenjin, but all other Kenyan tribes are represented. Majority of the people living in Nakuru County are Christians, with a small number of Muslims and Hindus.

Objectives of Study

- i. To identify the psychological challenges that women face after the death of their spouses within selected main stream churches in Nakuru County, Kenya?
- **ii.** To investigate the social challenges the widows encounter after spousal death within the main stream churches in Nakuru County?

Research Questions

- iii. What are the psychological challenges faced by widows within the main stream churches in Nakuru County, Kenya.
- iv. What social challenges do the widows in the mainstream churches in Nakuru County encounter?

II. LITERATURE REVIEW

Theories

The study was based and focused on three theories; the Kubler Ross Model, the dual process model of coping with bereavement by Stroebe and Schut (1999) and Rational Emotive Behavior Therapy by Albert Ellis.

The Kubler Ross Model

The Kubler-Ross model, also known as the five stages of grief, postulates a series of emotions experienced by people who have lost a loved one, wherein the five stages are denial, anger, bargaining, depression and acceptance. This model was introduced by and is named after Elisabeth Kubler-Ross in a book called 'Death and Dying' which was published in the year 1969. Anastasia (2015) described the Kubler-Ross Change Curve as a model that consists of various levels or stages of emotions which are experienced by a person who has undergo an intimate death.

The Dual Process Model

The Dual Process Model (DPM) was founded in 1999, by Stroebe and Schut to address deficits between bereavement and stress theories during grieving. The DPM theory was developed to address criticisms to the stage theories of bereavement which emphasized grief work, and it was developed with widowhood in mind. The model identifies two types of coping experiences, loss-oriented and restoration-oriented. The loss-oriented coping focuses on those experiences and behaviors which are associated with a focus on the deceased. Studies by Stroebe and Schut (1999) identified four types of experiences: grief work, intrusion of grief, denial and avoidance of restoration changes, and breaking bonds, ties, and relocation.

The Restoration-oriented coping process includes attending to life changes, doing new things, denial and avoidance of grief, new roles, identities, relationships, and distractions from grief. Further studies by Gillies and Neimeyer (2006) noted that the DPM was useful in the coping process in assisting the widows in searching for meaning both in the lost life and reconstructed one and in their identity.

Rational Emotive Behavior Therapy

The Rational Emotive Behavior Therapy (REBT) was founded by Albert Ellis in 1955.REBT, as discussed by Turner (2016), focuses on uncovering irrational beliefs which may lead to unhealthy negative emotions and replacing them with more productive rational alternatives. Dryden (2005) described REBT as a short-term form of psychotherapy that helps the bereaved to identify self-defeating thoughts and feelings, challenge the rationality of those feelings, and replace them with healthier, more productive beliefs. He further postulated that REBT focuses mostly on the present time to help and understand how unhealthy thoughts and beliefs create emotional distress which, in turn, leads to unhealthy actions and behaviors that interfere with the current life goals.

The negative thoughts and actions can be changed and replaced with more positive and productive behavior, allowing the widow to develop more successful personal and professional relationships. The study will attempt to relate this theory to the data generated during the interviews in an attempt to explain the interventions that can be used to help the widow deal with their challenges.

Theoretical Conceptualization

Psychological Challenges Widows Face

The loss of a spouse was described by Bennett, Hughes and Smith (2005) as one of the most negative life events. The loss presents itself with many varied economic, social and psychological problems, (Fasoranti and Aruma 2007) and more so when the husband was the principal breadwinner. Many widows live by themselves, and as such they suffer the fear of being alone and loss of self-esteem, in addition to the many practical problems related to living alone. They feel the loss of personal contact and human association; therefore, they tend to be withdrawn (Fasoranti and Aruma 2007).

Vitelli (2015) stated that spousal bereavement could result in life stresses that often leave people vulnerable to other problems, including depression, chronic stress, anxiety and reduced life expectancy. Stress and coping theorists (Kubler-Ross 1969; Stroebe and Schut 1999) maintain that major life changes, like the death of a loved one, become distressing if a person appraises the event as taxing or exceeding his or her resources. Lazarus and Folkman (1984) hypothesized that a person's appraisal, or subjective assessment of what has been lost, influences his or her emotional reaction to the stressor and the coping strategies employed.

According to Parkes& Weiss (1983) grief will encompass the emotions, thoughts, and behaviors that are experienced in reaction to the death of a loved one. The analysis of bereavement studies reveals three outcome patterns that include elevated depression, cognitive disorganization, and health problems (Bonanno, Wortman and Nesse 2004). Common symptoms of normal grief include anxiety, hopelessness, loss of purpose for living, slower thinking, and indecision (Stroebe and Stroebe, 1999). Negative effects such as sadness and depression are frequently experienced at the time of a loved one's death (Bonanno et al., 2004; Stroebe and Stroebe 1999).

Owen (2011) and Uzo (2006) concur, in that, the loss of a spouse due to AIDS is considered as one of the life's most stressful experiences and a moment of sadness due to the loss of love, care, company and livelihood. The study conducted in Mugunda location in Nyeri County (Mwangi 2014) found that the death of the spouse due to HIV virus was a painful and a difficult reality for the bereaved, since many widows were faced with numerous psychosocial challenges as they struggled to survive with HIV and AIDS diagnosis; as many lived in poverty due to lack of resources, skills and education and with no access to the justice.

Social Challenges the Widows' Encounter

The loss of a spouse affects almost every domain of life, and as a consequence has a significant impact on wellbeing: psychological, social, physical, practical, and economic (Bennett and Soulsby 2012). With all of these aspects of a widow affected, maintaining a sense of normality is important to help avoid depression like symptoms. Eboiyehi and Akinyeni (2016) indicated that there are myriads of challenges associated with loss of spouse that widows are confronted with cutting across cultural practices, isolation, and poor access to basic healthcare, constant illness, poverty, psychosocial trauma, poor nutrition, and abandonment to loneliness.

According to Human Right Watch, (2010) many widows in Kenya suffer a lot of economic hardships, after the death of the husband, especially when he was the sole bread winner. This results in a situation where the grieving partner begins to live a lonely life in an unfamiliar and solitary state of widowhood. Mbabazi (2016) noted that the loss of a husband causes unimaginable suffering and in some cases, the trauma is worsened by vultures guised as family members only interested in the deceased's assets. In Zimbabwe, Dube (2017)

found that widows suffer social exclusion and marginalization upon the death of their partners. Vitelli (2015) noted that loneliness, engaging into risky behaviors, and reduced life expectancy; are some of the social challenges resulting from spousal bereavement. He also noted that in addition to psychological impacts such as depression, grief can have physical consequences such as sleeplessness and loss of appetite.

A study done by Ogweno (2010) in Kibera slums in Nairobi County revealed that experiences among the widowed persons varied depending on the age, length of marriage before spouse died, gender, their economic status and the social support from family and the community and this is turn influenced the way each or all coped with their widowhood status. Ogweno (2010) indicated that both widows and widowers agreed that the financial burden rated highest, followed by psychological and mental effects. The widows also cited low self-esteem due to the stigma placed on widowhood. All the respondents agreed that indeed the environment affected their widowhood status.

Neimeyer (2000) who studied grief and loss extensively, stated that off time deaths disrupts the expected course of life and brings stresses not normally associated with the stage of life these women are in. Therefore widowhood at a younger-than-expected age is an unanticipated and unprepared for individually as well as socially. Neimeyer (2000) concluded that the young widowhood due to premature spousal loss may precipitate a challenging and perhaps prolonged process of grief, mourning, adjustment, and adaptation for the survivor. Similar studies are needed in Nakuru County to document all the social challenges that widows within the mainstream churches experience.

III. METHODOLOGY

The study adopted a descriptive research design to gather an in-depth understanding of the challenges faced by the widows after spousal death. The descriptive research was found to be more suitable for this study since the widow population was studied in their normal and natural environments and it assisted in gaining the attitudes, feelings and views of the respondents. The target population was all the women who had lost their spouses, irrespective of current age and attended services in the mainstream churches in Nakuru County. Snowball sampling procedure was employed to identify 110 respondents from the seven churches. The snowballing sampling procedure was adopted for the study due to the fact that there was no prior information available on the widow population in each of the churches. The data and information was collected through the use of an in-depth, semi structured interview schedules, with guiding questions in order to illuminate the lived experiences of the widows and the challenges they have experienced after the spousal death. The questions were carefully phrased for them to understand the intent of the interview. The full art of questioning was applied to elicit clear responses from the informants. All the verbal and nonverbal responses and actuations were carefully noted and documented. All the participants for each mainstream church, inclusive of the church were brought together into the Focused Group Discussions (FGDs). The participants were treated with respect, dignity and were encouraged to share only information that they felt comfortable with. The respondents' privacy was assured and protected; and confidentiality maintained through the use of pseudonyms during the discussions and presentation of the findings. The raw data was collected using in-depth interviews on key respondents and focus group discussions, was organized, processed and analyzed qualitatively. Using an interpretive approach, and as discussed by Lancia, (2012), the analysis of data from individual interviews and focused group discussions started with data reduction, data organization and thematic groupings; and then data interpretation. The researcher organized the data according to the themes that emerged from the interviews and FGDs. The analyzed data was presented through verbatim and interpreted in line with the research objectives.

IV. FINDINGS

Psychological Challenges that Women face after the Death of their Spouses

The study sought to establish the psychological challenges experienced by the respondents after the death of the spouse. The responses from the individual interviews and the FGDs, indicated that the respondents experienced various psychological challenges that included depression, the fear of taking up family responsibilities, and the threat and fear of own life. During the interviews, most respondents indicated that they experienced feelings of demoralization after they realized and felt the true extent of the death and the loss of their partner:

The respondents indicated that they had various depressive symptoms that included demoralization, the feelings of sadness, fearfulness, emptiness or hopelessness, anger outbursts, irritability or frustration, even over small matters, sleep disturbances, including insomnia or hypersomnia i.e. sleeping too much, tiredness and lack of energy, reduced appetite, anxiety, agitation or restlessness, feelings of worthlessness or guilt, fixating on past failures and blaming the past and self-blame, frequent or recurrent thoughts of death, suicidal thoughts, suicide attempts or suicide and feelings of physical aches. The respondents indicated that they had to undergo very stressful feelings that resulted into multiple reactions including crying, feeling of hopelessness, and feeling that

they had lost all and some developed bad and suicidal feelings. After the death of the spouse, several widows reported that they got confused; felt shocked, had annoyance, anger and went into denial.

The study noted that the majority of the widows were left with families to provide for without any source of income, or reduced income levels due to the loss of the bread winner. The respondents were overwhelmed by taking up full family responsibilities and assuming the roles of being the sole bread winner. All the respondents unanimously agreed that after the loss of a partner, they suffered financial constraints. The study found that the financial constraint also expressed itself as increased poverty, increased debts and poor nutrition. The widows need to meet all the expenses on maintenance, rent, food, electricity, transportation, and education for the children on the reduced income on their own.

The study findings identified another psychological challenge as threats and fear of own life. The widows were threatened with dire consequences if they did not comply with the demands of the in-laws. They also experienced abandonment by friends and family when they needed them most. The widows did not get the much attention from friends or the family and had no one to vent emotions to and lacked emotional support. The respondents indicated that they had feelings of regret, feelings of worthlessness, self-blame, and frequent and recurrent thoughts of death and feelings of physical aches and pain. The way the widows were treated by the in-laws, especially in the administration of her late spouse's property, problems associated with the long tedious legal process on the inheritance of her late husband's assets and interference from the in-laws resulted into frustration, sadness and anger and the feelings of regrets. Frustrations would also results when the in-laws want to take advantage and pretend to want to inherit the widow, and as such she would be seen as a threat by the other ladies in the family. The lack of adequate resources to sustain the widow would also lead to situations of regrets. The respondents felt a sense of being threatened and not welcome to the in-laws family, since they were treated as strangers and were denied the rights they had acquired through the marriage. Due to the intensity of the conflicts, the widows had fear for their lives and had to seek safety by other means.

Social Challenges the Widows encounter after Spousal Death

The social challenges that emerged from the study included poverty and financial stress, conflicts and threats from in-laws, rejection and isolation, hatred, mockery, discrimination, loneliness, and the widows going back to an empty house. Poverty and financial stress was ranked as the most felt social challenge affecting most of the respondents. All the respondents unanimously agreed that after the loss of a partner, they suffered financial constraints. The financial constraint was also expressed as increased poverty, debts and poor nutrition. The poverty challenge was more aggravated where widows lost the benefits of being married and the assumption of new roles as the in-laws frustrated their efforts to inherit their late spouses properties and dues. The possibility of increased poverty was real as the widows had to undergo property and inheritance deprivation.

The study further indicated that conflicts came up immediately after the spousal death and were basically associated with the inheritance of the respondent's late husband's estates. The widows indicated that after the death of the spouse, the relationships with the in-laws deteriorated. The poor relationships were expressed as attempts to evict the widows from their marital homes by the brothers or parents of the spouse, or as the family claimed their son's property. The conflicts included the widow being threatened by in-laws, the widow not accepted, her property taken away, intrusion by relatives, hatred by in laws, feeling unwanted, being falsely accused and being sent away by in-laws family.

The study found that the widows also faced rejection which was expressed as discrimination, desertion and isolation. They lacked support and lost key friendships, were not respected and faced hatred and mockery especially from the married women, who thought that the widows would snatch their husbands. The in-laws showed no respect and discriminated against them. The other social challenge identified in the study, included the fact that the widow would go home in a solitary state, where there is no spouse to give the much needed company and relationship support, as before; and therefore the house seemed empty and felt too big. The respondents indicated the family and friends do not give them attention.

The study also found out that loneliness is a major social challenge experienced by widows. The study found that the widows experienced loneliness and was expressed in various modes such as the lack of companionship, eating alone, sleeping alone and missing mutual love; with no one to fix things for them, finding no one to assist in the making of decisions, no one to turn to, no one to do anything with and no one to love.

V. CONCLUSION AND RECOMMENDATIONS

The study sought to investigate on the psychological and social challenges faced by widows within the main stream churches in Nakuru County, and the coping mechanisms and interventions that are applied to ensure the challenges are mitigated. The study identified and documented various psychological challenges that widows experienced after spousal death. These included depression, widows being over-whelmed taking up 100

% of the family responsibilities, and abandonment by friends and family. The social challenges identified in the study were poverty and financial stress, conflicts with in-laws, poor interpersonal relationships were expressed in the form attempts to evict the widows from their marital homes by the brothers or parents of the spouse, or when the family claimed their son's property and loneliness.

The study concluded that the county governments should consider putting in place structures that will help identify widows in each locality and structure intervention programs including awareness creation to both the widows and the general public on issues of death, bereavement, widow rights, expected psychosocial challenges and interventions necessary. The churches to consider and create and strength the ministry of widowhood within their jurisdictions and in particular to take the lead in widow support and creating awareness on widow rights

REFERENCES

- [1]. Anastasia, K. (2015). Understanding the Kubler-Ross Change Curve Cleverism. Retrieved from: https://www.cleverism.com/
- [2]. Bennett, K. M., Hughes, G. M, and Smith, P. T. (2005). Psychosocial response to later life widowhood: Coping and effects of gender. *Omega*, 51 (1), 33-52.
- [3]. Biernacki, P. and Waldorf, D. (1981). Snowball sampling: Problems and techniques of chain referral sampling. *Sociological Methods & Research*, 10(2), 141-163.
- [4]. Dube, M. (2017). The ordeal of "property stripping" from widows in a peri-urban community: The case of a selected ward in Binga District, Zimbabwe Socialwork (Stellenbosch. Online) Retrieved from http://www.scielo.org.za/scielo.php?script=sci arttext
- [5]. Eboiyehi, F.A., and Akinyemi, A.I. (2016). We Are Strangers in Our Homes: Older Widows and property Inheritance among the Esan of South-South Nigeria. *International journal on ageing in developing countries*, 1 (2): 90-112.
- [6]. Fasoranti, O.O., and Aruna J.O. (2007). Cross-Cultural Comparison of Practices Relating to Widowhood and Widow-Inheritance among the Igbo and Yoruba in Nigeria. *Journal of World Anthropology*: 3 (1), 53–73.
- [7]. Hegge, M., & Fischer, C. (2000). Grief responses of senior and elderly widows: Practice implications. *Journal of Gerontological Nursing*, 26 (2), 35-43.
- [8]. Kane, S. (2017).Effortless Ways to Embrace Change Psych Central Retrieved from: https://psychcentral.com/blog/5-effortless-ways-to-embrace-change/
- [9]. Kubler-Ross (1969).On death and dying. New York: Macmillan.
- [10]. Lancia, F. (2012). T-lab pathways to thematic analysis T-LAB Tools for Text Analysis Retrieved from: http://mytlab.com/tpathways.pdf
- [11]. Mbabazi, D. (2016). Property wrangles: When in-laws turn against the widow. The New Times Rwanda.Retrieved from:-http://www.newtimes.co.rw/ section/read/
- [12]. Miruka, P., Aloo, M., Nathan, J., and Onginjo, M. (2015). The Role of the Church and the Christian Family towards Widow Care as Highlighted by Paul. *Sociology and Anthropology*, 3, 52 57.
- [13]. Mwangi, R., Njoki, H. (2014). Psychosocial challenges and adjustment of widows of HIV and AIDS partners: A case study of Mugunda Location, Nyeri County, Kenya. Master's Thesis. The Catholic University of Eastern Africa.
- [14]. Neimeyer, R. A. (2000). Searching for the meaning of meaning: Grief therapy and the process of reconstruction. *Death Studies*, 24(4), 541–558.
- [15]. Ogweno, C. A. (2010). Widows and Widowers experiences and their coping mechanisms in a deprived community. A case study of Kibera slums. Master's thesis. University of Nairobi.
- [16]. Ozbay, F., Johnson, D. C., Dimoulas, E., Morgan, C.A., Charney, D., and Southwick, S. (2007). Social Support and Resilience to Stress. *Neurobiology to Clinical Psychiatry*, 4(5): 35–40.
- [17]. Owen, M. (2010). Widowhood invisible for how much longer? *EqualityUN Commission on the status of women pathways of women's empowerment.*
- [18]. Parkes, C. M. (1972). Bereavement: Studies in grief in adult life. London: Tavistock.
- [19]. Sahler, O., and Carr, J. E. (2009). Coping Strategies an overview; in Developmental-Behavioral Pediatrics (Fourth Edition).
- [20]. Spangenberg, J.J., &Henderson, M. (2001).Stress and coping in Black South African adolescents. StudiaPsychologic, 43 (2), 77-90.
- [21]. Stroebe, M., and Schut, H. (1999). The dual process model of coping with bereavement: Rationale and description. *Death Studies*, 23, 197-224.
- [22]. Turner, M. J. (2016).Rational Emotive Behavior Therapy (REBT), Irrational andRational Beliefs, and the Mental Health of Athletes. *Front Psychol*, 7(2), 1423-1434.
- [23]. Uzo, A. (2006). Women's issues—widowhood. Retrieved from http://www.bettyboopu.blogsport.com/

- [24]. Vitelli, R. (2015).Grief, Loneliness, and Losing a Spouse Learning to live with grief and loneliness after the death of a spouse. Retrieved from: https://www.psychologytoday.com/blog/media-
- [25]. Worden, J. W. (2009). *Grief Counselling and Grief Therapy*: A Handbook for the Mental Health Practitioner. Routledge.
- [26]. World Health Organization,(2011).Psychosocial support.Retrieved from http://www.who.int/hiv/topics/Psychosocial/support/en.

Ann K M Muthangya. "Psychosocial Challenges Experienced By Women After Spousal Death, Within Selected Churches In Nakuru County, Kenya." IOSR Journal Of Humanities And Social Science (IOSR-JHSS). vol. 23 no. 11, 2018, pp. 58-64.