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Assessment of an Effective Pastoral Care Model for Helping Widows Overcome Grief in Ack Kirinyaga Diocese, Kenya

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ABSTRACT

Widows go through emotional difficulties in the process of grief yet they constitute a large percent of the adult female population. Nevertheless, they continue to remain silent considering the inadequate well laid out mechanisms for emotional support by the church. This study assessed an effective Pastoral Care Model for helping widows overcome grief in the Anglican Church of Kenya, Kirinyaga diocese, Kenya. The objective of this study was to assess a Pastoral Care Model that can be theologically incorporated in widows' ministry. This study was guided by Kubler- Ross model of grief care. This study was restricted to 358 widows and 70 clergy in Kirinyaga diocese. The findings of this study were that; widows experienced stages of grief in a non-linear progression; emotional support was arguably neglected to some extent; clergy enrolling in a teaching module would assist them in widow's ministry and; three variables were significant in predicting the most effective Pastoral Care Model. In this article it is therefore proposed that a Pastoral Care Model which is theological and contextual to African setting should be taught to all care givers so as to effectively deal with the issue of death and grief among the widows.

Keywords: Anglican; Grief; Widow; Pastoral care; Stigma.

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1. Introduction

According to Wamue (1996), a widow is a woman who has been bereaved and is physically, emotionally and spiritually stressed since she is in a condition of a woman who has lost her husband through death. Widows therefore, go through emotional difficulties ranging from loneliness, avoidance by former allies, being perceived as a sexualized being after their husbands' death, misplaced anger, negotiating with a supreme being for another chance with the already deceased husband, difficulty in accepting that the husband will actually not come back to intense feelings of sorrow that tend to arise, fade and may recur. The 2015 report estimates the total number of widows at the globally to be 258,481,056 which represents a 9 percent increase since 2010, (Loomba Foundation, 2015), although according to the UN women statement for International Widow's Day on Friday, June 23, 2017, the

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number is estimated to be 285 million. Still, widows continue to remain silent while encountering challenges working through grief especially with the scarcity of well laid mechanisms of grief care for widows particularly within the church settings. In response therefore, this article focused on assessing an effective Pastoral Care Model for helping widows in the complexity of the difficult experiences as they find ways of managing grief.

Although widows constitute as much as 25 percent of the adult female population in many African societies, they have been a topic of little interest especially regarding knowledge on the widow themselves, such as their interests, the strategies they employ to realize such interests, the forces that determine such strategies and the quality of their lives (Potash, 1986). In this regard, provision of emotional support in each of the stages of grief exclusively; considering that every widow deals with each stage differently, has been arguably scarcely studied hence the notion behind the focus of this article on assessment of a Pastoral Care Model that can be theologically used within the church setting. On the same note, the scarcity of literature on the topic of widowhood in theology is cause for grave concern consequently signifying a neglect of the widows' wellbeing by Christians (Manala, 2015). Moreover, widowhood tends to impact more traumatically upon women than men, altering forever the way they are seen by society and affecting their self-image (Owen, 1996).

Therefore, this article is important in the sense that widowhood is a theological issue for it deals with the issues of human dignity in addressing the problems facing widows (Kapuma, 2011). In the case of this article, the problem focused is in misinterpretation of the widows needs as a result of insufficient well laid out mechanisms of providing emotional support considering every stage of the process of grief.

Moreover, this article will add to the existing knowledge of grief care for widows in African context. It will also focus on the theological perspective of grief care in the context of the Anglican Church of Kenya. Indeed, the Kubler Ross model of grief is crucial in this case because it will enable us to explore the five stages of grief that pastoral care givers need to know when dealing the issues of widow. Kubler Ross model will also provide information relating to progress among widows who are in the process of grief and who may find it difficult to overcome grief because of the several stages of grief they undergo (Kubler, 1969). In the following sections, we now turn to care of widows in the Bible, care of widows in the early church and African traditional ways of caring for the widows. We will also focus on the theoretical framework, complexity of grief process, challenges facing pastoral care to widows and research methodology before giving the research findings, conclusion and recommendations.

2. Care for Widows in the Bible

Christianity is not only a belief system but also a way of life whose parameters were set out in the teaching of Jesus; and that had pastoral aspects where the most obvious was the duty to help the vulnerable, (Evans, 2000). In the Ancient world of the Near East (ANE), numerous examples may be cited in royal contexts to demonstrate that concern for the widow was a constant claim of the king as the living representative of the God of Justice. Patterson (1973), asserts that in ancient Sumer the care for the widows, the orphan and the poor was recognized in the two well-known code, that of Urukagina of Lagash in the twenty- fifth century B.C and also in Ur Nammu the founder of the third dynasty of Ur in the twenty-first century B.C. In fact the famous law codes of Mesopotamia that of Hammurapi in eighteenth century B.C was built from Sumerian laws that protected the widows, the orphan and the poor (Patterson, 1973).

Looking at the Old Testament, it is interesting to note that the same motif as above is enhanced in the Pentateuch, Poetical books and in the Prophets. In the Pentateuch the care for the widow, orphan and the poor is intertwined with the sections focusing on the covenant code of Sinai and it is also renewed before they entered into Canaan. In Exodus (22:21-24, 23:6) and in the Deuteronomy (10:18ff; 14:28-29; 16:11, 14), the widow are said to be protected by God who is also depicted as a Supreme Judge. Again, Deuteronomy (26:8-19) seems to be giving the climax on how the God of redemption is providing the law of charity on the vulnerable and this includes the widow. But it is Deuteronomy (27:19) that reinforced the above, "Cursed be he that perverteth the judgement of the stranger, fatherless and widow."

In the Poetical books, especially in the book of Job, the evil person is termed as the one who is oppressive to the widow, the orphan and the poor (Job 14:1-4, 14, 21). The Psalmist is also seen as praising

God who is “A Father of the fatherless and a judge of the widows...” (Psalms 68:1-5). The book of Proverb also talks of care for the vulnerable. Here King Solomon affirms that the Lord watches over the land of the widow who might otherwise be helpless before the proud, grasping men (Proverbs 15:25). In the same way the prophets in the Old Testament did not ignore the plights of the widow. They asserted that Israel had betrayed wickedness and lack of God-oriented perspective in their treatment of the widow, the orphan and the poor (Isaiah 1:23; 10:1-2; Jeremiah 7: 4-16). Jeremiah, Zachariah and Isaiah lament that if the Israelites are not going to address the above predicament facing the widow, the orphan and the poor they themselves will face the verdict of the Lord and they will also be widowed (Zechariah 7:8-14). Throughout the Old Testament the cause of the widow is enjoined upon Israel as befitting a redeemed people who are entrusted with the character and standards of their redeemer.

In the New Testament the widow is singled out for a special comment for instance giving all that she had and as a special class of women in the early church who were to be cared for and honored as models of great piety and Godliness (Acts 6:1, 9:39-41, 1 Timothy 5:3-16). “Religion that God our father accepts as pure and faultless is this: to look after orphans and widows in their distress and to keep oneself from being polluted by the world.” (James 1:27). Jesus was a prime example of a person showing mercy and care for widows as was demonstrated in the city of Nain. He frequently pays attention to widows. However in the contemporary church, normally the big donors, whose donations are so important to the ongoing funding of the church’s budget gets the attention in the church. Jesus noticed what everyone else overlooked. Even though the woman gave only equivalent of two pennies to the temple, she put in more than all the rest of the people who donated heavily to the treasury because she gave out of her devotion to God. While Christ was on the cross in his dying moments, he commended the care of his widowed mother to His beloved disciple, John.

3. Care for the Widow in the Early Church

The Early Christians took seriously their obligation to support widows. In the Acts of Apostles one of the controversies that faced the infant church is that Hebrew widows received a greater share of the daily distribution than the Hellenist widows. By the middle of the third century, the church at Rome cared for fifteen hundred widows. The early church did not limit its involvement with the widows to material support, nor allow them merely passive membership in the community. The widows prayed ceaselessly on behalf of the community- God hears the cry of the oppressed hence their pleas are powerful. They exercised spiritual authority and influence in their ministry to the community, although theirs was not a ministry of the altar. Widows made house visitations where they comforted, fasted and prayed with the sick and gave practical instructions to younger women. They prophesied and also sat in front of the assembly along with bishops, priests and deacons. Repentant sinners prostrated themselves before widows and this was symbolically befitting because the life of a widow was an ideal woman’s and Christian life (Brown, 1988).

4. Decline of widow care in our contemporary society

In the contemporary church there is a decline in the widow motif especially after the beginning of the fourth century when many of the church functions were assumed by deaconesses and later, monastic women. Most of the churches today do not have an organized effort to minister to widows especially with the contemporary. Patterson (1973) is of view that there is need to alternate such challenges and construct an effective pastoral model for caring to the widows. This insufficient organized effort can also be traced in ACK Kirinyaga diocese. We now turn to the traditional African model for caring of the widow.

5. Care of the Widow in Traditional African Societies

In traditional African society, the idea of the extended family prevailed. Every person existed for the other. This has been acknowledged by Mbiti (1970:32) who observes that Africans traditionally lived only in corporate existence, “I am because we are, and because we are, I am”. This strengthened the concept of communality, sharing happiness, sorrow, and guilt together. This spirit was demonstrated in all rites of passage including death. There were cultural norms, regulations, and attitudes which prevailed during death. Every member of a community knew exactly what role to perform. Culture described what

men, women, children and relatives were to do at the time of death of a member of the concerned family, and thereafter. For example, when a woman was bereaved, it was the duty of the extended family to ensure that she was provided with the physical and emotional support that ensured the continuity of the family.

Again, in the Traditional African societies practices like widow inheritance meant that a widow could easily be remarried within a matter of months. Children were not solely the responsibility of their parents but were regarded as belonging to everybody in the community. The children of my brothers, uncles, aunts and cousins, whether born in or out of wedlock, were also my children. It was considered wicked and immoral to maltreat a child just because he or she lacked a mother or father. Widows and orphans may sometimes have suffered injustice and maltreatment in traditional communities, but this was the exception. They were not subjected to the same inhumane and immoral treatment that often occurs today. The modern African widow cannot even turn to the community for support for although [she] is perceived as someone to be pitied, sympathized with, and helped, she suffers emotional and spiritual violence. The widow is perceived as taboo to living husbands and other males. She is subject to hopelessness, punishment, neglect, contempt, suspicion about her treachery, or lack of good care. She is perceived as threatening to other couples' relationships and suspected of adulterous living. The result is that a widow is usually a neglected and deserted lonely woman.

In most African communities, traditions ensured that the widow was immediately remarried by either a brother or close relative of the deceased. There were several reasons given for this action. A widow was understood to have emotional, material and physical needs. The leviratic condition was supposed to provide for these needs. The levirate marriage was encouraged in the hope that having children with a member of her husband's kin would curb rivalry and fighting among the children, (Nwachuku, 1992).

6. Theoretical Framework

Kubler (1969), proposes a progression of emotional states experienced by loved-ones after a death. The stages are not in a linear and predictable progression including widows in ACK Kirinyaga diocese. In the first reaction which is denial, it is a stage where individuals believe that there is a mistake and cling to a false, preferable reality. It is only a temporary defense for the individual. This feeling is generally replaced with heightened awareness of situations and individuals that will be left behind after death. It is recommended that loved ones be forward and honest about losses to not prolong the denial stage. When the individual recognizes that denial cannot continue, they become frustrated, because they don't understand why them, why it would happen, how it could happen.

They may argue that the situation is unfair and try to place blame. They get emotional upset and can become angry with themselves or those close to them. The third stage involves the hope that the individual can avoid the cause for of grief or rather the individual can somehow postpone or delay death. Negotiation for an extended life is made with a higher power in exchange for a reformed lifestyle for instance I would promise to be a better person if only he would come back or I would give anything to have him back. During the fourth stage the individual despairs at the recognition of their mortality they begin to understand the certainty of death. In this stage individuals become silent, refuse visitors and spend much of the time mournful and sullen. This process allows the person to disconnect oneself from things of love and affection. It is not recommended to cheer up an individual who is in this stage since it is an important time for grieving that must be processed.

Depression is a precursor to acceptance because the individual has come to recognize their loss. In the last stage, individuals embrace mortality or inevitable future. It typically comes with a calm, retrospective view for the individual and a stable condition of emotions. Kubler claimed that these steps do not necessarily come in the order stated nor are all steps experienced by all individuals though she stated that a person will always experience several stages in a "roller coaster" effect- switching between two or more stages, returning to one or more several times before working through it. Another way of looking at what widows go through is to take the process as a task model that has four parts which overlap as identified by psychologist J. William Warden quoted by Betty Adkinson (1997) in her book *God's gap in Grief*. These stages include accepting the reality of the loss, allowing yourself to feel the loss, learning to live with the loss and reinvesting in love.

Consequently, failure to be aware of such stages and the different features (which was manifest in ACK Kirinyaga diocese) results to widows' stigmatization and unfair treatment and when such events befall widows, they incline towards silence as they encounter difficulties working through grief.

7. Complexity of the Grief Process among Widows

Since grief is the emotional, physical and spiritual response to loss. It is therefore a process and not a state (Hunter, 1990; Williams and Sturzl 1992). Hence, grief is not a set of symptoms which starts after a loss and then gradually fades away. According to Silverman (2004), in the contemporary society the immediate family is typically the primary source of mutuality, care and connection hence this relationship makes grief more complex compared to the strong and emotional ties among families and community members a hundred years ago. Grief is therefore very hard now in our society as there are more dilemmas to cope with, fewer resources to help a griever, fewer models to follow, and less experience to fall back on in helping a widow deal with death. These changes have therefore caused problems and misunderstandings about grief.

Unrealistic expectations about widows are now common because they are the standards of evaluation and widows tend to feel guilt and failure if they do not meet them. Some are perceived as crazy when they are perfectly normal and may hence fail to get support from others who have no accurate understanding what widows are going through, the complex experience of grief and the needs of a widow hence end up adding them more pain to grieving widows.

Murray, Toth & Clinkinbeard (2005), notes that grieving is active, presenting bereaved individuals with challenges, choices and opportunities. Since most other people are unaware about grief and how much it involves, they may not provide widows with the social and emotional support but are only a hindrance. Grieving for a widow entails mourning not only the husband but also the hopes, dreams wishes, fantasies, unfulfilled expectations, feelings, and needs you had for and with that person. That is, not only what is lost in the present but also what is now lost to the future as well. Still, the widow cannot mourn all that at once since it can be overwhelming.

Gerkin (1997), notes that pastoral care will be able to promote peace among the noise that the widow finds herself engulfed with. Such stillness includes understanding God as the provider or rather what Kubeka (2001), describes as God will prepare a table of care publicly for the hurting widow. This is reiterated by Gillespie (1988), who attests that if we (widows) have experienced God and have been motivated by the presence of God in our (their) faith experience then our (their) life will nurture growth.

8. Challenges Facing Pastoral Care to Widows

Ordinarily, one would say that widowhood is the state of being a widow but when we take into account the very many imposed regulations that go along with widowhood, it becomes more or less an institution which is interpreted and understood in the context of the culture and traditions of the people which regulate its operations (Ezejiolor, 2011). Widows in the Church are encompassed in such regulations especially because Africans remain alien to Christian faith that they have professed for over a century and revert back to traditional African culture (Okonda, 2017). The patriarchal view of widowhood leaves Christian widows powerless to exercise choice albeit the suffering they undergo. In a patriarchal society, women's search for an enhanced status is subjected to the dynamics of power, authority, different influences, and social expectations. As the church in Africa operates in the patriarchal domain, the low-rating perception of women tends to filter into the church (Wainaina, 2015).

Phiri (1997), observes that the African Church has too often been dominated and guided by sexist African and Christian attitudes. This is reiterated by Mugambi (2005), assertion that while Africans accepted the basic Christian teachings almost without debate, they did not necessarily abandon their traditional values and ideas. Though some widows may restrain to sex due to frustrations from their previous union, most widows are socialized to equate sexual expression with temptation and sin. Others are afraid of the mockery from their children hence are left without a choice about their own bodies except to embrace 'celibacy' (Okonda, 2017). Ironically, a widower may remarry if he so wishes, at will (Ezejiolor, 2011). Again, a widow may be ejected from her husband's land especially if she has no male child and the land will be inherited by his brother(s). In most cases the widow usually do not have rights over her husband's property and may inherit property by proxy through her son hence the next of kin

may dispossess her by taking the land. A few widows may seek redress in a court of law but may find court procedures quite expensive and time consuming and many widows are neither aware of their rights nor have social capital to seek legal redress in a court of law (Pemunta & Alubafi, 2016).

Kapuma (2011), notes that stigma is attached to widows. Former Friends are afraid to approach them making it difficult for widows to adjust to the new lifestyle they are forced into. The widow is physically isolated and left lonely and that it is the most torturous experience. When her husband dies the woman is perceived to be unable to make any concrete decisions. Oduyoye (1995), shares a similar view that social and cultural norms demand on women submissive and subordinate behavior. Additionally, while a married person is a person with respect, when her husband dies she becomes a sexualized being and a threat to the married women which affects even the widows in ACK Kirinyaga diocese. Kapuma (2011) posits that the widow is not free to talk to any man even the clergy who can assist her in her grief. Her interactions with her social networks is curtailed. She is perceived as seducing and enticing men and may be required to have someone else present whenever she is talking to a man. He goes on to say that rearing children without their father is the biggest challenge. Consequently, the abuse of widows is rarely being addressed by churches and yet these churches have theological colleges which are strategically placed to transform the church's thinking, (cf. Chitando & Gabaitse, 2008). In the next section, we turn to research methodology and research findings before we make a conclusion and recommendations.

9. Research Methodology

This study was carried out in ACK Kirinyaga diocese, Kirinyaga County, Kenya. Questionnaires containing closed and open ended questions were administered to widows and the clergy. This study was restricted to 358 widows and 70 clergy in Kirinyaga diocese. 358 widows identified through snowball sampling and 70 clergy were picked through random sampling. The sample size was calculated using Slovic's formula $n = N / (1 + N(e^2))$ formulated by Michael Slovic in 1960 where: n is the sample size, N is the total population and e is the confidence level (margin of error). Ninety five percent was the confidence level representative of the population of widows while ninety percent was the confidence level representative of the population of clergy. In order to ascertain reliability of the questionnaires used in this study, the researcher administered questionnaires to widows and clergy who were not counted as part of the sample size before the actual study hence test-retest technique was used in this study. Before proceeding to collect primary data, the researcher comprehensively skimmed through appropriate literature relating to an effective Pastoral Care Model for widows. The researcher had previously sought permission from the bishop to administer questionnaires to the clergy. Questionnaires were administered to the widows through their respective clergy and all participants in the questionnaires were given adequate time to respond and return the questionnaires to the researcher at will. The responses of the participants were given total confidentiality and all the questionnaires were anonymous. The Statistical Package for Social Sciences was used to run the data to produce frequency distribution, percentages and tables to summarize the data. The following are the research findings.

10. Research Findings: Widows and Stages of Grief

As can be seen from table below, most widows are in the bargaining stage (85.8%). Denial stage affected (56.4%) and was closely followed by anger stage (52.2%). Few widows (24%) have accepted the loss of their spouses. The bargaining stage has its negative and positive side. There are those that bargaining stage affected them positively by providing them with short term peace as they reflect of how life would be better if only their husband would come back to life. That imagined peace though temporary, was beneficial to their healing since it can be used as strength to hold on to make things be the way they would be if the husband was alive so that the husband though dead can rest in peace by the fact that his family is moving on as he would have wished. This is the notion of "if my husband was here he would be happy that all his children have managed to study well or his children are still healthy and disciplined." On the other hand, there are those that agreed to be affected by the negative side of the bargaining stage hence resulting to blaming themselves. Negative past experiences caused blame and made it difficult for the widow to focus on the present positive things over the faults that cause burdens in their hearts. Many of them had not opened up to anyone and continued to remain silent while

trying to heal the wound from the loss of their husband. Those in the denial stage had no meaning of life without a husband which was a good reason why they had the challenge of losing hope in life.

Consequently, a large number of those in denial stage were affected by anger. Anger was seen to be closely related with the inability to face the reality of the fact of the loss of one's husband leading to misplaced anger to the widow's themselves, their relatives, friends, colleagues at work and children. Several widow acknowledged to have lost interest in those former friends who happened not to have attended burial. Most widows in Kirinyaga diocese were not affected by the intense stage of depression. This was commendable as the depression stage is commonly the critical one as these experiences get to the deeper level of a widow's feeling and may lead to withdrawal and to some extent if not dealt with, suicidal thoughts. However, very few widows have attained the ultimate stage of acceptance of the loss of their husband. With such approach of approaching each widow then it would result to widows opening up as a pastoral care giver is able to identify each widow considering the stage affecting her.

Distribution of Widows by their Stages of Grief

Stages of grief (%)	Denial	Anger	Bargaining	Depression	Acceptance
No	156	171	51	204	272
Yes	202	187	307	154	86
in percentage (%)	56.4%	52.2%	85.8%	43%	24%
Total	358	358	358	358	358

Distribution of Stages of Grief by Years since Death of Spouse

Stages of grief		Years since death	0-5	6-10	11-15	16-20	21-25	26-30	Total
Denial	No		24	56	25	29	13	9	156
	Yes		84	43	44	14	13	4	202
Anger	No		38	43	51	21	18	0	171
	Yes		70	56	18	22	8	13	187
Bargaining	No		39	0	8	0	0	4	51
	Yes		69	99	61	43	26	9	307
Depression	No		63	52	37	21	26	5	204
	Yes		45	47	32	22	0	8	154
Acceptance	No		95	72	53	27	12	13	272
	Yes		13	27	16	16	14	0	86

This table shows the stages of grief as distributed by years since the death of the spouse. Most of these widows encounter problems related to grief even as the years pass by. For instance, denial stage has the highest number (84) of widows in the first five years followed by anger (70), bargaining (69), and depression (45). Finally acceptance has the least number (13) of widows. This shows that most widows take time to accept the loss of their spouse. Even those who have been widows for more than twenty five years are still struggling to work through grief to reach acceptance of the loss of their husband. This table clearly shows the importance of widows grouping themselves together to share experiences in that there are very few of them who have managed to work out grief yet in their early years of grief. Conversely, others have been in widowhood for a long time yet to them, it is still difficult to accept the reality. Although this may help to some extent, it is also determined by several factors that affecting grief responses among widows.

11. Clergy Effort in Ministering to the Needs of Widows

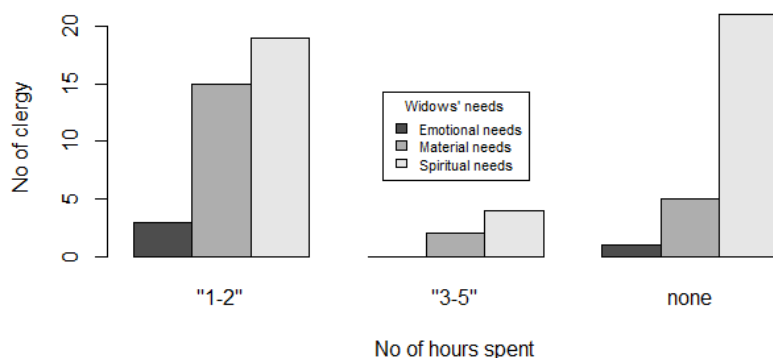
Most of the clergy spend between 1-3 hours in a week in ministering to the needs of widows. In such pastoral care visits to widows, material and spiritual needs of the widows are highly taken care of by the clergy. On the other hand, emotional needs barely receive any time from the clergy. It was noted that many clergy are not comfortable visiting widows' homes for pastoral care. However they highly rated their personal efforts in ministering to widows. The issue of fear of suspicion of affairs by the rest of the congregational members was brought out. Hence overindulgence with widows especially for the male clergy was largely avoided.

Such suspicion was as a result of stigmatization of widows where a woman loses respect once her husband died and is perceived to approach a man with a hidden agenda of looking for a male mate. This therefore frustrated the effort of male clergy to avoid their name being tarnished out of misconceptions. Time constraints was an issue as the clergy schedules were too tight to allow much time to spend in the homes of the widows. Again, materials to use in understanding and gaining knowledge on grief made time spent in pastoral care to widows to be less because there is not much to tell a widow specifically dealing on what she is going through. Several clergy pointed out the key area they deal with when ministering to a widow is showing them that "God loves you."

Distribution of Clergy Effort in Ministering to the Needs of Widows

Needs attended	Hours spent visiting widows' homes			Total
	1-2	3-5	None	
Emotional needs	3	0	1	4
Material needs	15	2	5	22
Spiritual needs	19	4	21	44
Total	37	6	27	70

Distribution of clergy effort of ministering by hours spent



12. A Pastoral Care Regression Model for the Widows

The following table represents coefficients for the pastoral care regression model for the widows in the ACK Kirinyaga diocese.

Coefficients	Estimate	Std. error	t value	Pr(> t)
(Intercept)	-0.73874	0.96970	-0.762	0.44920
Area of priority	0.06748	0.03428	-1.968	0.05375
Effort on	-0.08042	0.08021	-1.003	0.32016
Personal rating	0.08636	0.09789	-0.882	0.38127
Module	1.77583	0.56830	3.125	0.00276**

Stigma	0.46052	0.18934	2.432	0.01806*
Clergy personal effort	0.10836	0.04109	2.637	0.01066*
Resources limitations	0.06465	0.15234	0.424	0.67283
Future greater responsibility	0.59329	0.59366	0.999	0.32169
Withdrawal from church	0.10083	0.15949	0.633	0.52944
Stigma	0.06377	0.18848	0.338	0.73630

It is evident from the table above that three variables were significant ($p\text{-value} < 0.05$) in predicting the most effective Pastoral Care Model which can be used by ACK Kirinyaga diocese to help widows recover from their loss. These variables are; clergy enrolling in a teaching module that would assist them in their churches to minister to widows ($p\text{-value} = 0.00276$), the challenge of stigma and negative perceptions when dealing with widows ($p\text{-value} = 0.01806$) and finally individual clergy personal efforts in ministering to widows ($p\text{-value} = 0.01066$). The regression model is then given by;

$$Y(\text{time spent with widows}) = -0.73874 + 1.77583(\text{Module}) + 0.46052(\text{stigma}) + 0.10836(\text{clergy personal effort})$$

Enrolling in a teaching module (with each of the five stages of grief explained exclusively) for the clergy will help improve pastoral care for the widows by 78% times more. Reducing the challenge of stigma and negative perceptions while dealing with the widows will help improve their care for the widows by 46% and also individual clergy personal efforts in ministering to widows will improve the pastoral care for the widows by 11%. This teaching module ought to compose the stages of grief that widows undergo. These stages should explain the experiences of each phase so that those offering pastoral care can be able to understand the behavior of widows and the stage they may be going through. In this case therefore, it would avoid misjudgment that the widow is overreacting hence promote patience and calmness when dealing with widows who are otherwise delicate to deal with as far as patience and understanding them is concerned.

With the module therefore, it would boost the effort of pastoral care givers in ACK Kirinyaga diocese since they have content of the context and when put together with the theological training they have from the theological institutions plus their experiences in reading the Bible, dealing with widows would prove to be easier. Again the teaching module if availed to the congregation, there would be more information available to the Christians at large hence low self-esteem that is brought by stigmatization of widows would be avoided since this stigma brings misconceptions of widows having affairs with men. In such a way therefore the efforts of pastoral care givers especially the male for this case would not be frustrated by the effects of stigma. More understanding of the stages of grief and the experiences therein by the congregational members would deal with the issue of widows being sidelined hence eradicating stigmatization of widows that result to low self-esteem and fear of overindulgent association with a widow.

13. Conclusion

From this article, the following conclusions are made; that a Pastoral Care Model of grief, eradication of culturally induced stigma and added care givers' efforts in ministering to widows will improve the effectiveness of pastoral care for the widows; that reconstruction of theological training of clergy to embrace knowledge on death and grief care among widows as well as among Christians ought to be made and; that silence among widows in the church does not certainly imply that they have achieved ultimate acceptance of the loss of their husband. To this end, this article proposes that it is vital to adopt a Pastoral Care Model that encompasses each of the five stages of grief exclusively as postulated by Kubler Ross in her model of five stages of grief so as to promote effectiveness of pastoral care among widows in ACK Kirinyaga diocese. However, this article settles that since the main focus in this case is towards effectiveness of pastoral care that is offered to widows and helping widows manage

different grief experiences as they arise in their process of grief, then a Pastoral Care Model can still be developed to endorse a pool of ideas inclusive of reference to other models such as the task model of grief proposed William Warden which provides tasks of grief which include four stages, that is, accepting the reality of the loss, allowing yourself to feel the loss, learning to live with the loss and reinvesting in love.

This article therefore recommends that; a Pastoral Care Model be employed in offering pastoral care to widows; theological training of clergy be reconstructed to encompass deeper knowledge on death and grief which can also include refresher courses for the serving clergy on how to deal with death and grief among widows and; widows should be embraced as special single ladies group with specific distinct challenges distinct from challenges of ladies who are single by choice or the divorced since for the widows, it is a forced, unanticipated and irreversible situation. With implementation of a Pastoral Care Model in offering pastoral care to widows there would be restoration of theological dignity of widows as God's creation so that widows may find this world a better living place for them since as they manage to identify with what experiences they may be going through they then learn how best to work through grief, leading to recognition of the theological purpose of their own life as well as due to Christians' understanding of how to deal with widows as per various grief experiences in different stages of grief that widows undergo in the difficult process of grief. It is therefore proposed that a Pastoral Care Model which is theological and contextual to African setting should be taught to all care givers so as to effectively deal with the issue of death and grief among the widows. This contextual Pastoral Care Model will be able to provide a way of dealing with the challenges posed by culturally induced stigmatization of widows which is informed from an African setting that has found its way into the church. In other words, there is need to establish a well laid out mechanisms of pastoral care to widows in the church setting, that is vital not only in endowment of material and spiritual support, but that which can provide emotional support during the difficult grief experiences which widows undergo within the various stages of the complex process of grief.

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