

Widowhood and Social Welfare Policy in Australia

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by

Linda Rosenman



Social Welfare Research Centre

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FOREWORD

Approximately 9% of the female population of marriageable age and 2% of the corresponding male population is widowed. In total about 750,000 adults plus those who have remarried, experience or have experienced widowhood. That experience is often one of loneliness, emotional distress and financial difficulty. The social security and social service systems cannot replace a partner, but can provide income maintenance and social service support. This study examines needs of widowed persons and identifies gaps in support and provision.

Dr. Linda Rosenman, Assistant Professor, School of Social Work, University of St. Louis, spent a period as Visiting Fellow in the Social Welfare Research Centre in 1981. She worked with the team studying the welfare of elderly people, but as this report shows, widowhood is an issue affecting a wider spectrum of the community. She has been involved in large scale studies of widowhood in Australia and the U.S.A. This paper reports only the social welfare policy aspects of widowhood in Australia. Other aspects have already been published and will continue to be published elsewhere.

The death of a spouse is the major cause of termination of marriage in Australia and as such requires a response through policy and programme initiatives. Dr. Rosenman examines the survey evidence on financial problems; difficulties with housekeeping; child care and home maintenance; employment; health care; transportation; and loneliness, and concludes with suggestions on ways that our social welfare system might respond to the problems identified more meaningfully and flexibly.

The problems are particularly acute for widowed women who are "pensioned off" and by not being encouraged back into the labour force are set up for a situation of poverty and dependency. The situation is even more difficult for non-English speaking women, as interviews with 30 Greek widows showed. This paper both provides evidence and makes policy relevant suggestions.

Adam Graycar
Director
Social Welfare Research Centre

CONTENTS

	<u>Page</u>
PREFACE	
1 INTRODUCTION	1
2.1 DEMOGRAPHICS OF WIDOWHOOD	1
3.1 PRIOR RESEARCH ON WIDOWHOOD	4
4.1 THE RESEARCH PROGRAMME	7
4.2 Research Design and Procedure	8
5 SOCIAL WELFARE POLICIES RELEVANT TO WIDOWHOOD	10
5.1 Income Maintenance Policies	10
5.2 Tax Benefits	17
5.3 Non Federal Government and Voluntary Association Services	19
6.1 NEEDS AND DIFFICULTIES BROUGHT UP BY THE WIDOWED	21
6.2 i) Financial and Economic Needs	26
ii) Resources for Dealing with Financial Needs	27
6.3 i) Employment	35
ii) Labour Force Participation and Pension Receipt	40
iii) Widowed Men and Employment	46
iv) Employment Related Problems	47
v) Employment Problems Prior to and Immediately Following the Death of a Spouse	49
6.4 Education and Training	54
6.5 Home Maintenance	57
6.6 Transportation	59

	<u>Page</u>
6.7 Health	60
6.8 Loneliness and Emotional Problems	62
7.1 WIDOWHOOD WITHIN THE MULTICULTURAL CONTEXT OF AUSTRALIAN SOCIETY	64
8.1 SUMMARY AND CONCLUSIONS	67
8.2 Recommendations for Social Welfare Policy	70
FOOTNOTES	73

TABLES

<u>Table</u>	<u>Page</u>
1 Marital Status of the Australian Population	3
2 Areas of Difficulty or Concern at the Time of the Interview	23
3 Areas of Difficulty or Concern Immediately After Spouse's Death	24
4 Areas of Difficulty or Concern for Those With Forewarning	25
5 Reported Total Annual Income by Age and Sex	29
6 Employment Status by Age and Sex	37
7 Multiple Regression Analysis Predicting Labour Force Participation: Women Aged 20-60	38
8 Current Employment Status by Receipt of Class A Widows' Pension	42
9 Employment Status Prior to Husband's Death by Current Receipt of Class A Widows' Pension	42
10 Current Employment Status by Current Receipt of Class B Widows' Pension	44
11 Employment Status Prior to Husband's Death by Current Receipt of Class B Widows' Pension	44
12 Reasons for not Taking Further Education or Training	55

PREFACE

This report is based upon data collected in 1980 as part of a programme of research on widowhood. Additional reports and papers on different aspects of the research findings have been published and others are in preparation. Funds for the collection and analysis of data have been provided by the Vice Chancellor's Development Fund, Latrobe University; the Institute of Family Studies, Melbourne; the Ashworth Bequest; the Vice Chancellor's Research Fund, Melbourne University; and the Afflect Trust.

Arthur Shulman co-directed the Australian research and many people particularly Leonie Huddy and Michelle Gavin were closely involved in data collection, preparation and analysis. I would like to particularly thank them for their assistance. In addition I would like to gratefully acknowledge the help of Vivienne Milligan with data analysis, and the many other people involved in a research project of this scope including the interviewers, the funeral directors who helped with sampling, and of course the widows and widowers who were willing to give up their time to be interviewed.

This report was prepared while I was a Visiting Fellow at the Social Welfare Research Centre during 1981 and has benefitted from helpful comments by members of the staff there.

Linda Rosenman
2nd December 1981

1 Introduction

A great amount of social and economic policy in Australia, as in other societies, is founded on the premise that the family is the basic unit of the society. It is this unit through which the aged adults' and children's emotional, economic, social and needs for physical care are to be met. When the family unit is disrupted for any reason, some or all of the needs of its members may go unmet and it is at that point that social policy issues arise. One of the most common causes of such disruption is the death of a spouse. To some extent this is recognized by society insofar as social welfare policies have been designed, and programs instituted to deal with some consequences of such disruption, predominantly the economic consequences. These, however, attempt to deal with only one small aspect of the entire spectrum of personal, social, and economic needs that are likely to arise both before and after the death of a spouse. This report will focus on the implications for Australian social welfare policy of widowhood, particularly in the areas of income maintenance, employment, and training policy. It is based upon results of a recent research programme on the needs, resources and ways of coping of widowed women and men in Australia, and on the analysis of census and pension data (1).

2.1 Demographics of Widowhood

Based on census figures, in Australia in 1976 there were close to three quarters of a million widowed people. The vast majority were women (well over half a million); the number of widowed men was close to 130,000. Approximately 9% of the total female population of marriageable age (15 and over) is widowed compared with 2%

of the male. These are cross sectional figures only. A considerably higher proportion of the adult population actually experiences widowhood, but does not stay widowed. People can move out of widowhood either through their own death, or through remarriage. While there are few Australian figures available on either mortality or remarriage amongst the widowed, overseas research suggests that widowed men have a mortality rate which is relatively high--certainly higher than that for widowed women, and that they are also more likely to remarry, and remarry faster than widows (2). The statistics that are available would tend to indicate that this pattern is similar for Australia too (3). Hence cross-sectional figures are likely to underestimate the numbers of men in particular who experience widowhood.

While widowhood can and does occur across the family life course, it is predominantly a phenomenon of later adulthood, and given the aging nature of the population of Australia, a phenomenon that will be increasing in occurrence. Table 1 shows the marital status breakdown of the adult population by age and sex. With the growing interest in policies dealing with an aging population, it is important to note that in talking about policies for the aged, we are referring to policies for a predominantly widowed and largely female population.

Up until the early to mid-40's age group, the incidence of marital breakup through widowhood in the general population is lower than that of such other forms of marital breakup as separation or divorce. Hence families with young children are less likely to become single parent through widowhood than through separation or divorce. However widowhood is a frequently occurring phenomenon.

Table 1
Percentage of Population Widowed, Divorced, and
Separated by Age and Sex

Age (years)	Marital Status					
	Percent Widowed		Percent Divorced		Percent Permanently Separated	
	Males	Females	Males	Females	Males	Females
15-19	.01	.02	.01	.02	.04	.21
20-29	.07	.26	1.10	1.94	2.05	3.41
30-39	.24	1.03	2.59	3.59	2.96	3.80
40-49	.91	3.77	2.92	3.77	2.98	3.66
50-59	2.60	11.62	3.13	3.50	2.87	3.10
60-69	6.88	25.31	2.52	2.69	2.53	2.31
70 and older	22.41	60.36	1.56	1.28	2.10	1.06
Across all persons (15 and older)	2.61	11.11	1.97	2.50	2.27	2.75

From Australian Bureau of Statistics, 1976 Census: Population and Dwelling: Cross-classified Tables (2426.0).

While considerable attention is now being paid to marital breakup through separation and divorce, it should be remembered that death of a parent still accounts for an extremely large number of single parent families. The 1975 General Social Survey of Australian Families indicates that 26.5% of all sole parent families become that way through widowhood. Furthermore over one-third (34.3%) of male-headed one-parent families and over one-quarter (25.5%) of female-headed families are formed through widowhood. From the 40-year-old age group on, the incidence of widowhood for women exceeds the incidence of separation and divorce. Beyond that age widowhood becomes increasingly common until, in the 60+ age group one-third, and by the 70+ group, over 60% of the female population are widowed. Since for all causes of death (apart from the specifically female ones such as cancer of the cervix), men are likely to die at a younger age than women, and since, as mentioned above, widowed men both die or remarry faster than widowed women, widowhood tends to be seen as being a woman's issue.

It is also an issue which must be looked at within the multicultural context of Australian society. Approximately 22% of the widowed female and 24% of the widowed male populations are foreign-born. Of these, close to 40% of the widowed women and one-third of the men are from countries other than the United Kingdom or Ireland. This implies firstly that many of the widowed who are migrants may not have a functioning family support network available to them, and secondly that there will be social and ethnic differences in reactions to widowhood.

3.1 Prior Research on Widowhood

Prior research on widowhood in Australia has been carried out

from two major perspectives firstly medical/psychiatric and secondly social and psychological.

Medical and medical/psychiatric research in Australia (4) has focused on depression, drug use and mental and physical health symptoms associated with grieving amongst the widowed. This, and medically-oriented research done overseas, makes clear that the personal impact of bereavement involves deterioration in physical and mental health, can include symptoms for several years after the death, along with increased mortality and morbidity. The implications for policy in this research are that the process of grieving and adjustment that follows a death also involves impairment in functioning that affects ability to carry out normal activities, and will usually imply increased demands being placed upon the social and economic support system and on the system for provision of the health care.

Although not specifically concerned with the widowed, the 1975 General Social Survey of Australian Families (5) included some widowed amongst their sample of lone parents. In the results, however, widowed families are not distinguished from those formed through other means. This survey highlights the difficulties of limited finances and reduced opportunities that exist for the children of many lone parents. Henderson, in the Poverty Study (6), found that families headed by widows were amongst the poorest in the survey.

The major prior social policy oriented research in Australia that has focused specifically on widowhood was carried out in the late 1950's under the auspices of the Council of Social Service of New South Wales (7). This study, which sampled widowed women in the Sydney metropolitan area and a N.S.W. country town, documented

the sense of loneliness and the restrictions on social life that widowed women faced. This was perceived as being caused by a combination of financial hardship and the difficulties of adjusting to life as a single woman after having spent her life as half of a couple in a coupled society. The difficulties that many widowed women experienced in living on the inadequate civilian widow's pension was highlighted, along with the inequitable differences in benefits and entitlements between war and civilian widows, differences which have narrowed but still exist.

A recent study carried out in Sydney and the N.S.W. country for Australian Mutual Provident Society on beneficiaries of its life insurance policies (the majority of whom were widows with some widowers) highlights the social isolation and the financial difficulties that widowed women who received insurance payments faced (8). In particular, concern was expressed about the difficulties and length of time involved with probating estates. This, which usually caused delay in the payment of insurance benefits, often meant that widowed women were existing in a state of financial hardship, sometimes for periods of as long as 18 months before probate was granted and they could obtain access to the estate.

Social and policy oriented research overseas on widowhood for the most part has been largely concerned with widowed women. Most research highlights the social and economic dislocation that women experience following the death of a spouse. Lopata (9), in a study of widows in Chicago, pointed to the lack of emotional and daily support services, the need for job training and job search information, the unavailability of child care and other services for children, to help them deal with their grief. In addition,

she pointed out the financial limitations that many widows faced, and the lack of comprehensive coverage by American income maintenance systems. Although her research was mainly concerned with older women, she did point out that there were differences between younger widows who still have children in the home, whose difficulties tended to be child related, and those of older women whose difficulties were often related to social isolation. She recommended the creation of "neighborhood networks" which would identify the "hidden widows" in a community, provide support and identify services and other resources necessary to help the widow "re-engage" in society.

Other research in Britain (10) and the U.S. (11) identifies similar problems of social isolation and financial distress as women readjust to life as a widowed rather than a married woman. Much of the research focuses on elderly women, very little looks at widows across the life span, and very little research has been carried out on widowed men.

4.1 The Research Programme

The research programme on which this report is based collected comprehensive data on widowed women and men in Melbourne in 1977 and 1980. Information was collected on social, economic, health and employment related difficulties of the widowed, as well as psychological, emotional and mental health needs. Data were also elicited on personal, family and community resources used to deal with such problems and their usefulness. Parallel data have also been collected on widowed women in the United States enabling cross-national comparisons to be made (12).

4.2 Research Design and Procedure

The research was carried out in two phases. 1) The initial study was carried out from June-August 1977. The aim was to collect background information on widowed women in Australia. Based on the results of an open-ended pilot interview phase, a structured interview schedule was developed. This was administered to 298 widowed women by psychology students at the University of Melbourne. The sample was obtained from a pool of 500 widowed women, most of whom volunteered to be interviewed after reading an article in a Melbourne daily newspaper or hearing an interview with the project directors on a day-time radioprogram. The sample pool was stratified by age and length of widowhood, and once stratified the sample was randomly selected. Analysis on this sample to date has focused on needs and resource networks of widowed women. 2) In 1980 the major study of widowed women was carried out in Melbourne which paralleled the survey part of the study being carried out in the U.S.

The interview schedule developed in the U.S.A. was adapted for Australian conditions taking into account the results from the 1977 Australian study.

Since no data had been collected on widowed men, a set of pilot open-ended interviews was carried out with widowed men in order to establish the domain of needs, problems and resources. The structured questionnaire used for the women was adapted to take account of different concerns raised within the pilot study. Among others, this included additional questions on employment, income and assets, and social relationships. Comprehensive data were

collected from both widowed women and men on a wide range of social, personal and economic needs and resources and ways of coping with problems; data were also collected on physical and mental health, circumstances surrounding the death, reactions of children to loss of a parent, and social and family support networks, financial status, work, social background and employment needs, education and training. While most information pertained to the situation at the time of the interview, retrospective information was also obtained for the time immediately following the death. In cases where there was some warning of the death information was collected about the time when the spouse was ill. Selected baseline information on the marriage was also collected for all respondents.

The sampling procedure drew a stratified random sample of widowed women and men (13). The sample pool was obtained from records kept by five Melbourne funeral directors whose clientele ranged across the socio-economic spectrum. The sample was stratified by five age categories--1) under 39, 2) 40-49, 3) 50-59, 4) 60-69, 5) 70 and over. Length of widowhood was similarly stratified into three time periods since the death of the spouse--1) 6-18 months, 2) 19-36 months and 3) 37-60 months. Once selected, women and men were sent a letter describing the project and enclosing a reply paid card on which they could indicate their willingness to participate in the interview. The interviews were carried out predominantly in the widow's home by trained interviewers. Most of the women were interviewed between June and August 1980, and the men between July and October 1980. All together, 243 women and 131 men were interviewed. A small number of remarried widows and widowers (2 women and 15 men) were also interviewed.

In addition, a smaller study of 30 Greek widows was carried out with a version of the interview schedule translated into Greek and adapted to Greek-Australian conditions. These women were selected with the assistance of Greek funeral directors in Melbourne and the Greek Welfare Society. The interviews were carried out in Greek by a Greek member of the project staff (14).

While there is a considerable amount of data available, this report will focus on major areas relevant for social welfare policy. In particular, these are areas of financial need, employment, and education or training, and the difficulties of home and family maintenance and associated economic and labour force problems, as well as transportation, health and problems of loneliness and social isolation.

5 Social Welfare Policies Relevant to Widowhood

In this paper, the term social welfare policies will be interpreted fairly broadly to include federal governmental tax and transfer policies, particularly income maintenance programs and the related labour force and training policies, as well as social services. Income maintenance is a federal responsibility, while services such as home help or handyman services are provided predominantly at the state and local government levels and by voluntary or non-governmental agencies and self-help groups, including the Civilian and War Widows Associations, Birthright, Legacy, etc.

5.1 Income Maintenance Policies

This is the area in which social welfare assistance to the widowed is most immediately evident. Financial assistance to the widowed came relatively late in the history of federal income maintenance

provision. Widows' pensions were established in 1942, although a pension scheme for widows had existed in both New South Wales and Victoria prior to that. One group of widows--namely those whose husbands had died as a result of war or war-related injuries were eligible for War Widows Pensions under the 1917 and 1920 Repatriation Acts. The Commonwealth Widows Pension Act and the Repatriation Act had different underlying motivations and sets of values and, as a result, the treatment of widows potentially in the same circumstances differs depending upon the reason for the spouse's death. The rationale underlying the two schemes differed from the outset, and the differences continue although they have narrowed somewhat in recent years, in part as a result of changes in the (Civilian) Widows' Pension scheme.

i) Widows' Pensions and Supporting Parents' Benefits

The Widows' Pension began, and has continued to be seen predominantly, "to benefit those widowed women who could not reasonably be expected, because of age or the necessity of caring for young children, to engage in employment" (15). Consequently, three "classes" of widows' pensions were established that still exist.

1) Class A pensions for a woman who had dependent children (under 16) at home, 2) Class B pensions for those women aged over 50 who did not have dependent children, or those over 45 when their children became independent, i.e., when they lost eligibility for Class A pensions, and, 3) Class C pensions for widows in "necessitous circumstances" in the six months immediately following their husbands' death.

The Australian Widows' Pension scheme was unusual insofar as from the beginning it included within the category "widow," a woman not

legally married who had been living with a man as wife at least three years prior to his death, a wife deserted by her husband for at least six months, women whose marriage had ended in divorce, and a woman whose husband was institutionalized. Eligibility for the pension was means tested.

The basic structure of the Widows' Pension scheme remains intact, although it has been enlarged over the intervening years. Currently (1981) widowed pensioners receive a basic weekly rate of \$69.70, plus an allowance of \$10.00 for each child, and a supplementary allowance of \$8.00 for one or more children under age six or disabled, and \$6.00 for children over 6. In addition, a rent supplement is payable. Currently, pensions are indexed twice yearly.

The means test is tapered in such a way as to allow some other income to be earned and some pension benefits to be retained. The effective benefit reduction rate is 50%, with recipients losing \$1.00 of pension for every \$2.00 of other income up to a maximum of \$50.00 a week for a woman without dependent children, and proportionately more for those with. While this should offer some incentive to pensioners to obtain additional income through working, or additional dividend or interest earnings from investments, it tends to be presented by the Department of Social Security informational brochures in terms of the amount of pension "lost" rather than the increase in income that would come from being able to combine the pension with other income sources. It was clear from our interviews that there were at least some women who were not taking jobs for fear of "losing" the pension. Press reports also suggest that some pensioners, at least, are not maxi-

mizing interest or investment income again for fear of "losing the pension." While it appeared from our data that the majority of widows were managing their employment, investments and interest income (where it existed) and pension in such a way as to maximize income, there are undoubtedly some women (and men) who do not do so because of lack of knowledge and fear of pension loss.

Analysis by the Department of Social Security (16) on the sole parent recipients of benefits under the Social Services Acts indicates a major change in the composition of Class A widows' pension beneficiaries. From the inception of the Widows' Pension scheme until the early 1970's the largest proportion of single mothers on the pension were in fact de jure widows. Since then the numbers of divorced and separated women have been growing so that they now exceed the numbers of de jure widows who receive Class A widows' pensions. De jure widows were less frequently receiving other means tested income than were divorced or deserted mothers.

Widowed men since 1978 have been eligible for Supporting Parents' Benefit, which, in its major provisions parallels the Class A Widows' Pension. Since 1978, single fathers, including widowed fathers, have been eligible to draw benefits under the Supporting Parents' Benefit Programme. Like the Widows' Pension, this is means tested. Its payments are set at the same level as the Class A Widows' Pension. Unlike widowed women, widowed men are only eligible for benefits if they have dependent children. Men, then, are treated similarly to Class A Widows' Pensioners. The equivalent of a Class B or C Widows' Pension which pays benefits regardless of the presence of children, on the basis of age, marital status and financial need, does not exist for men. This is largely

historical, but also implicitly recognizes that marriage, whether legal or defacto, rather than responsibility for children, tends to put women into a dependent role. If they lose the role of married women in middle age any labour market skills that they had may be obsolete and they face particular difficulties in becoming self-supporting.

In addition to income maintenance, widowed pensioners and supporting parents are entitled to fringe benefits, receipt of which is tied to possession of a Pensioner Health Benefits Card. This is subject to a very restrictive means test of \$40.00 weekly income for a woman without dependents, and is incremented by \$11.00 a week for each additional child. A PHB card not only confers eligibility for free medical and hospital services, but also for additional fringe benefits including free pharmaceuticals, eye tests, hearing aids, dental care and a range of other free or low-cost services that are offered by state and local governments to recipients of a PHB card. These may include public transport passes, rate rebates, dog licenses, etc. Hence, earning more than the very low minimum can involve loss of a PHB card and may involve a substantial loss of in kind fringe benefits.

This so-called "notch effect"--whereby earning an extra \$1.00 of income puts one above an income cut-off, and can involve the loss of hundreds or potentially thousands of dollars worth of benefits, has often been commented upon in analyses of income security systems (17). There is no doubt from our survey that this constitutes a significant work disincentive, with many of the

widowed women in particular remaining at low wage rates, or in low paying jobs, in part at least to avoid losing fringe benefits.

ii) War Widows and Defence Widows

In 1961, J. Aitken-Swan (18), in a survey of widows in Australia, pointed to the discrepancy between the treatment of War and Civilian widows in Australia. This discrepancy has narrowed somewhat over the ensuing years, but still exists. The major differences result from the lack of the categorization system in the War Widows Scheme that exists in the Civilian Widows Pension Scheme. Under the War Widows Scheme, a widowed woman whose husband was in receipt of a disability pension is entitled to a War Widow's pension upon his death if this death was related to military service. Women whose husbands served in the armed forces, and whose death is accepted by the Department of Veterans Affairs as being due to service in the armed forces, are also eligible. If the husband was enlisted and on active service at time of his death, they are known as defence widows.

War Widows receive the same basic weekly pension as civilian widows, but a higher children's allowance. Neither the pension nor the dependents' allowance is means tested. An additional "domestic allowance" of \$12.00 per week is payable, but is means tested. Medical benefits are also available, and are not means tested. While there are over 48,000 war and defence widows in Australia, the vast majority are older since they are predominantly widows of men who served in World War II. Relatively few of them (predominantly defence widows) still have dependent children. The hierarchy of

widows that was commented on by Aitken-Swan twenty years ago still exists, with War Widows getting more generous pensions, fringe benefits, and not having to face a means test on income.

In regard to this differential between War and Civilian Widows, in 1956 the then Minister for Social Services observed that "the rights, terms and conditions of social service benefits are determined in one atmosphere, and those of pensions payable to the widows and children of those who have been killed in battle . . . in an entirely different atmosphere. Any attempt to draw a comparison between the two is odious, and is always resented" (19). Aitken-Swan, however, points out that "throughout the years War Widows have fought for a measure of dignity, independence and self-assurance . . . however sympathetic the public, War Widows, with the help of the Returned Sailors', Soldiers' and Airmen's Imperial League of Australia, and other service organizations, have largely achieved their status for themselves" (20).

Given the absence of a means test, the War Widows' pension, in many ways, is more of the nature of compensation payments for war service than a pension in the sense that other pensions are provided in Australia.

iii) Invalid and Sickness Benefits

As has already been mentioned, although income security programmes to assist the widowed only go into effect after a spouse dies, many of the most severe financial and related problems commence during the period of illness and/or hospitalization that in our sample preceded the spouses' death in over half of the widows', and close to 70% of the widowers' cases. Financial assistance at this point in the process is extremely restricted. The federal

government provides limited financial support through Sickness Benefits and Invalid Pensions. The basic rate of pension is the same as that for Widows Pensions and Supporting Parents' Benefit. Eligibility criteria for the Invalid Pension, in most cases, would exclude disabled housewives who still had husbands who were employed from receiving either Sickness Benefits or the Invalid Pension, despite the fact that they may be unable to carry out some or all of their home responsibilities.

5.2 Tax Benefits

In addition to transfer payments as discussed above, the widowed are also eligible for rebates through the tax system. Although this provision only applies to those with taxable income, it does include widowed pensioners and it does recognize the additional costs and additional expenses which may be involved in working and caring for a home and children. Single parents are eligible for a Sole Parent Rebate of \$559.50, or a rebate of up to \$800 for a housekeeper if they have a dependent child. The Sole Parents' Rebate is poorly designed insofar as it involves an all or nothing proposition. Once a child has more than \$1,720.00 in separate income, the rebate stops immediately. This can involve extremely high marginal tax rates on part-time earnings of school-age youth and students whose parents are single. If the government aims to encourage labour force participation of youth, it is not clear why potentially such earnings should be taxed at such a high rate. Since a tapered tax rate is allowable on the dependents deduction, it is not clear why the same cannot be permitted for the sole parent rebate.

The \$800 rebate allowable for a housekeeper does not extend to the cost of institutional child care--although presumably it serves a similar function for those who work. In most cases, the cost of housekeeping and child care is incurred whenever there are parents at work who cannot personally care for young children. Recognition of the lower gross income of single parent earner rather than two-parent earner families should be allowed for in a properly-designed progressive tax system, and not by concessional rebates to only the parents.

It should also be pointed out that the rebate for a housekeeper is only extended to a sole parent. A person whose spouse is incapacitated and unable to perform housework and childcare duties is normally unable to claim for a housekeeper rebate unless the wife is in receipt of a Invalid Pension. The inequity of this is evident from the results of our study. A large proportion of the widowed had spouses whose death came at the end of a long-term illness. In many cases this involved periods of hospitalization of varying duration, and/or incapacity that made it difficult for the terminally ill patient to perform home or child-care duties. Especially in the case of many of the young widowers, this was perceived as having been a time of great emotional and financial stress. Since they had to continue working to support the family, this in almost all cases put the family well above the income limit that would allow the wife to draw an Invalid Pension. At the same time, although many of them had to employ a housekeeper to help care for home, wife and children, the fact that the wife was not on an Invalid Pension rendered this expense non-tax-deductible.

The social services relevant to families in which one member is

sick or incapacitated should be reviewed from both the tax and the transfer aspects.

5.3 Non-Federal Government and Voluntary Association Services

Services offered by state and local governments have been mentioned briefly in the discussion of fringe benefits. There is considerable variability in these from state to state and between local governments. Victoria probably has the most comprehensive network of local government services on which the widowed can draw. Those most relevant to the widowed include homemaker and home help services, handyman or home maintenance services, home-delivered meals, and municipal welfare officers and/or social workers.

The availability of, and eligibility criteria for, such services vary greatly from local government to local government. The study on which this report is based was carried out in Melbourne, and hence at least some of the widows and widowers had access to some of the services depending on the municipalities in which they lived. Information on the availability of such services and knowledge about them varied tremendously.

Services offered by voluntary associations and the non-government welfare sector, with the exception of the Civilian and War Widows Association, Legacy and Birthright, usually are not limited only to the widowed.

i) War Widows Guild

The War Widows Guild has been in existence for over 35 years. Eligibility for membership is limited to war widows, i.e. women who are recipients of war or defence widows' pensions. In most

states, the Guild has a welfare officer available to help members with problems and provide a referral service. The guild clubs offer social activities for war widows to help to combat loneliness and social isolation. These are established on a regional basis, with some clubs being more active than others. In addition, guild housing for older members is available in many states.

ii) Legacy

This is predominantly available for war widows. Through Legacy, an ex-serviceman is assigned to each war widow with children to provide friendly support and to help them in dealing with the problems of raising children alone.

iii) The Association of Civilian Widows

The Association of Civilian Widows offers similar assistance on a more limited budget to women who are widowed but not eligible for a war widow's pension.

iv) Birthright

Birthright offers similar services to Legacy for civilian widowed pensioners.

Apart from these there are few organizations aimed specifically at the widowed, although they may be eligible through their membership in other categories such as single parents, the aged, etc. Self-help groups for the widowed of different ages are available in some areas, but their availability and accessibility and their target groups all tend to vary. In addition, several hospitals offered counselling and discussion groups for the recently widowed. The availability of such services is extremely variable. One of the problems seems to be that of communicating

their availability to the widowed.

Similarly, in many cities there are social welfare agencies and individual counsellors who offer services to the bereaved. Because of their wide variability, such services will not be discussed in detail, although they will be mentioned in relation to particular difficulties or problems.

6.1 Needs and Difficulties Brought Up By the Widowed

The research uncovered many difficulties and problems that the widowed saw themselves as experiencing. Most of the data discussed in this section were gathered by giving respondents a list of needs or problems that had been generated from the previous studies. They were asked whether or not they had been experiencing any difficulties in those areas, and, if so, to discuss in more detail the nature of the difficulties, what, if anything, they perceived as a way of dealing with it, personal, family and societal resources that they had drawn on to meet these needs, and an evaluation of how useful these resources had been. In many cases, these needs or difficulties are indicative of gaps or inadequacies in current social provisions, and suggest areas in which changes in existing programmes or new initiatives in programme development appear necessary.

Similarly, the resources used, and their assessed usefulness in helping to deal with problems, is indicative of the availability, accessibility and knowledge about social resources within the community.

The respondents were asked to discuss those difficulties that they had recently or were currently experiencing, and also to provide

retrospective information on needs and difficulties in the few months immediately following the spouse's death. Those who had some warning of the possibility of the spouse dying also discussed difficulties during this period, i.e., the time preceding the spouse's death. The areas of need or difficulty brought up in each time period are listed in Tables 2, 3 and 4.

Tables 2-4 show the frequency distribution within major categories of difficulties mentioned at the time of the interview, broken down by sex.

While these are listed as discrete categories, there was in reality a degree of interrelationship of needs, few occurring in isolation and many being related to financial difficulty or work-related obligations. Multiple regression analysis indicates that age and sex were significant predictors of the number and nature of difficulties mentioned. Age in particular was important, with the younger widowed of both sexes expressing significantly more difficulties than the older. There was almost a direct negative correlation between age and the frequency with which problems were mentioned. Women also perceived themselves as having significantly more serious difficulties than men, and perceived themselves as experiencing a wider range of problems, particularly those related to financial need. While in most cases significant differences did not exist in terms of how long a person had been widowed, retrospective information obtained from both women and men suggest that most people saw the few months immediately after the spouse's death as having been the most stressful time, and having generated a wide range of needs and problems. As can be seen from Table 3, a higher percentage of the sample, in retrospect, reported

Table 2

Areas of Difficulty or Concern at the Time of the Interview
(Ordered by Percent Reporting Need)

Unremarried Widowed Women N=239*			Unremarried Widowed Men N=117*		
Rank	Concern	Percent	Rank	Concern	Percent
1	Loneliness	51.1%	1	Loneliness	58.1%
2	Home maintenance/ household matters	32.2%	2.5	Opposite sex friends	28.2%
3	Health	31.4%		Health	28.2%
4	Psychological/emo- tional problems	23.9%	4	Children	25.7%
5.5	Financial matters	23.0%	5	Psychological/emo- tional problems	20.5%
	Planning for future	23.0%	6	Sexual matters	19.8%
7	Children	20.9%	7	Planning for future	17.1%
8	Self betterment	20.1%	8.5	Home maintenance/ household matters	16.2%
9	Transportation	18.0%		More free time	16.2%
10.5	Employment	15.5%	10	Independence	15.4%
	Family (other than children)	15.5%	11	Employment	13.7%
12.5	Independence	15.1%	12	Financial problems	12.8%
	Personal safety	15.1%	13	Keeping busy/things to do	11.1%
14	Keeping busy/things to do	14.2%	14	Self betterment	10.3%
15	More free time	13.0%	15	Personal safety	6.0%
16	Opposite sex friends	11.7%		Legal matters	5.1%
17.5	Legal matters	8.4%	17	Issues related to spouse's death	5.1%
	Sexual matters	8.4%		Family (other than children)	5.1%
19	Privacy	7.5%	19.5	Getting on with people	4.3%
20.5	Getting on with people	7.1%		Same sex friends	4.3%
	Issues related to spouse's death	7.1%	21	Transportation/ getting around	3.4%
22	Same sex friends	6.0%	22	Privacy	1.7%
23	Funeral matters	0.78%	23	Funeral matters	1.26%

*For this time period only, remarried widowed men and women are not included.

Table 3

Areas of Difficulty or Concern Immediately After
Spouse's Death
(Ordered by Percent Reporting Need)

Widowed Women N=243			Widowed Men N=131		
Rank	Concern	Percent	Rank	Concern	Percent
1	Loneliness	55.4%	1	Loneliness	68.7%
2	Grief/psychological problems	38.0%	2.5	Children	36.0%
3	Financial matters	31.0%	2.5	Grief/psychological problems	36.0%
4	Keeping busy/things to do	29.3%	4	Family (other than children)	35.0%
5	Children	27.7%	5	Health	22.1%
6	Health	25.2%	6	Household matters/home maintenance	21.4%
7	Legal matters	21.5%	7	Keeping busy/things to do	19.1%
8	Independence	20.2%	8.5	More free time	15.3%
9	Planning for future	19.4%	8.5	Planning for future	15.3%
10	Issues relating to spouse's death	19.0%	10	Legal matters	13.7%
11	Transportation/getting around	17.4%	11	Financial matters	13.0%
12	Personal safety	16.9%	12	Independence	12.0%
13.5	Household matters/home maintenance	13.2%	13.5	Employment	11.5%
13.5	Family (other than children)	13.2%	13.5	Issues relating to spouse's death	11.5%
15	Privacy	12.4%	15	Getting on with people	10.7%
16	Employment	11.5%	16.5	Opposite sex friends	9.2%
17	Getting on with people	10.7%	16.5	Matters relating to funeral	9.2%
18	Matters relating to funeral	10.3%	18	Privacy	8.4%
19.5	Self betterment	9.9%	19	Personal safety	5.3%
19.5	More free time	9.9%	20	Transportation/getting around	4.6%
21.5	Opposite sex friends	3.7%	21	Self betterment	3.1%
21.5	Same sex friends	3.7%	22	Same sex friends	2.3%
23	Sexual matters	3.3%	23	Sexual matters	1.5%

Table 4
Areas of Difficulty or Concern for Those
with Forewarning
(Ordered by Percent Reporting Need)

Women N=143			Men N=81		
Rank	Concern	Percent	Rank	Concern	Percent
1	Health	39.5%	1	Health	34.6%
2	Children	26.6%	2	Children	27.2%
3	Financial matters	21.0%	3	Psychological/emo-	
4	Psychological/emo-			tional problems	19.8%
5	Loneliness	19.4%	4.5	More free time	18.5%
6	More free time	18.5%		Loneliness	18.5%
7	Transportation/			Financial matters	13.6%
	getting around	16.9%	6.5	Household matters/	
8	Independence	15.3%		home maintenance	13.6%
9	Death (feelings		8	Employment	12.3%
	about)	14.5%	9	Planning for future	11.1%
10	Employment	13.7%		Feelings about death	9.9%
11	Household matters/		11	Sexual matters	9.9%
	home maintenance	12.1%		Family (other than	
12	Privacy	11.3%		children)	9.9%
13	Marital problems	10.5%	13	Independence	7.4%
14	Family (other than		14	Marital problems	6.1%
	children)	8.1%			
15.5	Keeping occupied	6.5%	15.5	Keeping occupied	4.9%
	Funeral matters	6.5%		Self betterment	4.9%
17.5	Legal matters	5.6%	17.5	Funeral matters	3.7%
	Sexual matters	5.6%		Safety	3.7%
	Personal safety	4.8%	19	Training/education	2.5%
19.5	Getting on with		20.5	Legal matters	1.2%
	people	4.8%		Privacy	1.2%
21	Self betterment	2.4%	22.5	Same sex friends	0%
22	Same sex friends	1.3%		Opposite sex friends	0%
23	Opposite sex friends	0%			

problems for the time immediately following the spouse's death than in any other time period. Those whose spouses had gone through a period of terminal illness or declining health prior to the death, also saw this "forewarning" period as having been extremely difficult and placing major stresses on the family's financial, as well as social and emotional resources, and particularly upon the children.

Ethnic differences are somewhat harder to assess because of the small size of the sample of Greek widows; however, in general, their difficulties, especially those related to financial management and emotional readjustment and health, were particularly severe.

In relatively few cases did people see their difficulties as having existed before they were widowed--with the exception of those who had spouses with a terminal illness. Many of the difficulties associated with widowhood then arose from adjusting to living as a single person in a larger society organized by, for, and around marriage and family existence. In addition, they were related to sex, age and stage of the life span. Most of the major difficulties that were experienced were related to the financial and familial readjustments that were associated with adjusting to single life. Many of these are related to the current structure of social welfare policy and will be discussed in more detail.

6.2 i) Financial and Economic Needs

This was directly mentioned as a significant area of difficulty for over one-quarter of the widowed women, and for less--about 13%

of the men, although many more mentioned financial limitations as a barrier to achieving other goals or meeting other needs such as home maintenance, health care and adequate child care.

There were two aspects of financial difficulties that were often, but not always, brought up in conjunction with one another.

Firstly was the difficulty of coping with limited resources and of making ends meet. A second general area of financial need (for women in particular) was the difficulties they were experiencing in having to manage finances and take the initiative in obtaining money, e.g., insurance or pension money to which they believed they were entitled and sorting out financial situations left by the husband; some also said that they felt they were taken advantage of financially because of their lack of experience or knowledge.

Financial difficulties were particularly likely to be age- and sex-related. Multivariate analysis suggests that it was predominantly younger women and men who mentioned financial difficulties, and those with dependent children. Amongst the men there was a significant negative relationship between income level and financial problems. In other words, those men whose income was lower were those most likely to perceive financial problems. This was not the case for women. In their case, the perceived change in financial status was a more important predictor of financial need.

Change in financial status was much more marked for women than men. Close to half of the women (48.6%) (compared with only 27.5% of the men) felt that their economic status had deteriorated since their spouse's death. This usually was seen as resulting from the loss of the spouse's earnings or pension. Few, if any,

of the women had been the major breadwinner in the family, so the death of the husband usually meant the loss of the family's major income source. Pensioners (both male and female) were affected, too, since the death of the spouse meant that an already limited income was cut by as much as fifty percent following the death of the spouse. One of the more progressive actions of Social Security is allowing a twelve-week phase-out period on the deceased spouse's benefit. The adjustment to loss of a spouse for women in particular, also, then involved adjustment to a considerably lower standard of living than they had previously been used to.

Table 5 shows reported income category at the time of the study broken down by age and sex.

In general, women were likely to report lower incomes than the men and this is reflected in their complaints of financial need. The older of both sexes were also likely to be living on the lowest incomes (i.e., under \$6000 in 1980). Given this, it is perhaps surprising that the aged were less likely than the younger women and men to see themselves as facing financial problems. There appears to be several reasons for this, some of which are speculative.

Firstly, despite their (relatively) higher incomes, the younger widowed, both women and men, who had children living at home also faced greater demands on their resources. They often faced increased financial demands as the children got older, while women in particular had an income significantly lower than that which they had been managing on when their spouse was alive. The benefits allowed for children in the Widows' Pension and Supporting

Table 5

Reported Total Annual Income by Age and Sex

Income Category	<u>Age Category</u>					Total
	Under 40	40-49	50-59	60-69	70+	
Less than \$6000 Annually	W = 0% M = 5%	W = 23% M = 14%	W = 41% M = 0%	W = 63% M = 35%	W = 68% M = 61%	Women N=97 = 41% Men N=32 = 25%
\$6000-\$9999 Annually	W = 40% M = 0%	W = 27% M = 0%	W = 24% M = 8%	W = 12% M = 23%	W = 14% M = 11%	Women N=54 = 23% Men N=12 = 10%
\$10,000-\$14,999 Annually	W = 43% M = 25%	W = 27% M = 19%	W = 19% M = 15%	W = 21% M = 26%	W = 11% M = 25%	Women N=56 = 24% Men N=28 = 22%
\$15,000-\$24,999 Annually	W = 8% M = 50%	W = 16% M = 48%	W = 14% M = 46%	W = 4% M = 13%	W = 5% M = 4%	Women N=22 = 9% Men N=37 = 29%
Over \$25,000 Annually	W = 8% M = 20%	W = 7% M = 19%	W = 2% M = 31%	W = 0% M = 3%	W = 0% M = 0%	Women N=7 = 3% Men N=17 = 13%
	Women N=39 Men N=20	Women N=44 Men N=21	Women N=58 Men N=26	Women N=52 Men N=31	Women N=43 Men N=28	Women N=236 Men N=126

Note: Percentages may not total to 100 due to rounding.

Parents' Benefit in no way reflect the costs of supporting children. Secondly, this drop in income that was faced at the spouse's death was often not planned for, whereas older couples had usually made the transition from having a wage or salary to managing on a pension at the time of retirement. They had also made adjustments, in lifestyle and expenses, in anticipation of, or in response to, the reduced income they expected at retirement. Therefore, with the death of the spouse, the drop in income may not have been as great, nor were they as unprepared for it.

In addition, in general, many of the older widowed, for better or worse, appeared to accept the situation that they found themselves in to a greater extent than did the younger age groups. This may have been related to the fact that many of the young widowed saw their situations as unusual and unexpected, and as not being in keeping with either their prior expectations about their lives or with other people in their age groups. Most older couples on the other hand may accept that the marriage will end with the death of one of the partners and by the age of 60 are likely to have widowed friends and so not feel as much of a misfit and not complain so much about their situations. While widowhood in later life could be viewed as the norm, widowhood around age 40 or 50 is not.

The older people's tendency to complain less frequently about problems or difficulties may also have resulted from a feeling that little could be done to change the situation (i.e., a sense of powerlessness) or a realization of the low probability of remarriage. On the other hand, the reality that many of them did not face, the demands on their time caused by children and a job, meant that the financial and other stresses may not have been as great,

providing that their physical health was not deteriorating.

For the widowed women in all age groups, being in poor health was also a predictor of financial problems. Poor health contributed to financial problems in several ways. Firstly, it limited ability to obtain employment which many women used as a way of supplementing pension payments. Secondly, it involved extra costs in terms not only of health care expenses, but also in living expenses and transportation.

While the majority of women and a large number of men perceived their financial situation as having deteriorated markedly since the spouse's death, twenty-nine percent of the men and 18 percent of the women actually perceived their financial situation as having improved since the spouse's death. For many this was because expenses associated with the spouse's illness no longer existed. In addition to this, a few of the women said that superannuation or insurance payments had started and these sometimes exceeded the former spouse's income. On the other hand, for some women, while the total amount of income may not have been different, or may even have been less, they had control of family expenditures, so they had independence to decide what money was to be spent and how, sometimes for the first time in their lives. In these cases, a woman often had more money available to spend on herself and her family than she had had when her husband had controlled expenditures.

ii) Resources for Dealing with Financial Needs

Resources for dealing with financial problems were extremely limited. The majority of women who reported having resources avail-

able said that they relied on themselves--usually through getting a job (48.3%). Twenty-two and nine/tenths percent of the women, however, said that they had done nothing, or did not know what to do. Less frequently mentioned was reliance on family or friends (5.8%), getting on to Social Security or pension payments (5.8%) or dipping into one's own resources, either savings or hoping to speed up settlement of the estate. For a few women, probate on the estate had still not been granted at the time of the interview up to 12 or 18 months after the death. Widowed men predominantly mentioned employment as the major route they saw open to themselves in dealing with financial restrictions. Among widowed men in particular, financial difficulties were often intertwined with employment and child and housecare problems. These will be considered in more detail in Section 6.3.

Retrospectively many of the widows reported that the nature of financial difficulties was more varied in the few months immediately following the spouse's death. Financial limitations were combined with problems in probating the estate and sorting out the family's business and financial affairs. While a majority of the spouses had made wills, 34.35% of the women and 17.43% of the men died intestate. Thirty-three of the widowed women said that their lives would be easier had their husbands made better arrangements for the financial security of their wives and families while they were living. Some of the most frequently mentioned were that the husband should have taken out life insurance, or saved, or invested more money for the family during his lifetime.

Resources used for dealing with financial problems that arose immediately after the spouse's death were usually lawyers, executors

of estates, accountants, or trust officers. The most frequently mentioned barriers to dealing with financial problems were government regulations dealing with pension entitlement, earned income, and work and probate laws, and the widows' and widowers' own lack of training or experience, as well as lack of information.

The length of time taken to probate estates and the expense incurred has been commented on in another study of settlements of life insurance policies and problems of widows carried out by the AMP society (21). Not only did probating the estate involve considerable time for many of the widowed, but several of the women were left without any financial resources and experienced severe financial stress. Most were not aware that they may have been eligible for a Class C widows' pension because they often had no income at the time. There were some who managed entirely on personal savings or loans or limited assistance from family or friends. Several had not even applied for the pension because they incorrectly assumed that the value of the estate was high enough to exclude them under the means test. Few knew that only current income was counted under the means test.

This suggests that accessible information and referral services need to be available to the widowed immediately following the spouse's death. Such services could be offered in the places where the widowed are most likely to request help, funeral parlors, doctors, and banks are three possibilities. These should have available at least accurate up-to-date written information on community resources for helping with problems, as well as assistance with referral where appropriate. Although these services are available through social work departments of hospitals and local

councils, our research indicates that the widowed are often unaware of them. The lead has already been taken by a few funeral directors in the Melbourne area, as will be discussed later.

Financial problems were also frequently mentioned as having been a major concern in the time preceding the spouse's death. During this period, 40% of both men and women said that their expenses had increased as a result of the spouse's illness. These expenses included the costs of medical treatment, drugs, special equipment, occasionally additional nursing care, and, in the case of some illnesses such as malignancies, frequent visits to the hospital for treatment. At the same time, in the younger age groups especially, family income often dropped since the dying spouse was, in many cases, unable to maintain a regular job. Close to one-half of the widowed women reported a reduction in their spouse's ability to work. The spouse had been forced by illness to stop work (34.68%), take early retirement (4.81%) or reduce working hours (4.84%), which resulted in reduced income for the family. Twelve percent of the widowed men reported that their wives had had to give up their employment as a result of terminal illness. These women were usually not eligible for the Invalid Pension because their spouse's income exceeded the allowable limits, and, therefore, they were not entitled to Pensioner Health Benefits.

Over one-quarter of the men reported that their wives had been unable to do the normal household work during this time, and twenty-one percent of the men either had reduced working hours or taken leave during the period before the wife's death in order to be available at home.

The drop in income, along with the increased expenses that many faced in the forewarning period, meant that, for many, financial pressures were added to the extreme emotional and adjustment problems that most experienced at this time. Eighty-eight percent of the widowed women and sixty percent of the men saw themselves as having been under extreme stress during this period when the spouse was dying of a terminal illness. While much of the stress resulting from facing the death of a spouse is not directly amenable to modification through social welfare policies, some of the economic, employment and home maintenance pressures are. Suggestions for such policy changes are discussed in detail in Section 6.3.

6.3 i) Employment

Widowed men and to a lesser extent women derived most of their income from paid employment. Amongst widowed men, tradition, social custom and earning power all combine to ensure that they retain paid employment regardless of the personal stress involved. Among women, however, labour force participation is closely linked to social welfare policy--particularly to income maintenance policies.

The design of the pension systems in Australia is such as to limit income from other sources--particularly through employment. The availability of pensions provides an alternative to labour force participation for those who fall into the categories covered by the pension scheme. Since for women in particular, employment is an alternative to full reliance on pension, an understanding of who does or doesn't work, the reasons and the difficulties that they face, is important.

Reflecting their greater degree of choice over whether or not to

work, labour force participation rates for women were considerably lower than for men (Table 6). One-third of the widows and two-thirds of the widowers were employed. Slightly over half (55%) of the employed women were working full time, the remainder part time. Labour force participation rates varied with age, with younger women having fairly high rates of labour force participation.

Widowed women had considerably extremely varied reasons for working or not working. The most frequent reasons given by women for working were firstly financial need, secondly companionship and keeping busy, and thirdly because she was "bored at home." It appears, then, that for widowed women, to some extent, work fulfills psychological and social as well as purely financial needs.

Despite the increase in the incidence of paid employment for women in Australia, it is still socially accepted, and possibly expected, that women, particularly those with young children, should not work. As discussed earlier, social welfare policy, in this case the Widows' Pension, has been designed within this framework.

It is not necessarily the case that widowed women's decisions on whether or not to work are completely dependent on whether they have children. Table 7 reports the results of multiple regression analysis predicting work behavior for women.

The best predictor of whether or not a widowed woman would be working was her education level and her prior work history. Education level is related to two things--one is potential income that a woman could command in the labour market, and hence the oppor-

Table 6

Employment Status by Age and Sex

Employment Status	<u>Age</u>					
	Under 40	40-49	50-59	60-69	70+	Total
Employed Full-time	W = 31.7% M = 95.0%	W = 40.0% M = 85.0%	W = 23.7% M = 78.6%	W = 2.0% M = 18.2%	W = 0% M = 3.7%	W = 19.1% M = 50.8%
Employed Part-time	W = 31.7% M = 0%	W = 11.1% M = 5.0%	W = 27.1% M = 10.7%	W = 3.9% M = 6.1%	W = 2.2% M = 3.7%	W = 15.4% M = 5.5%
Not Employed	W = 36.6% M = 5.0%	W = 48.9% M = 10.0%	W = 49.2% M = 10.7%	W = 94.1% M = 75.8%	W = 97.8% M = 92.6%	W = 65.6% M = 43.8%
	Women N=41 Men N=20	Women N=45 Men N=21	Women N=59 Men N=26	Women N=51 Men N=32	Women N=45 Men N=29	Women N=241 Men N=128

Table 7

Multiple Regression Analysis Predicting Labour Force
Participation at the Time of the Interview
Women Aged 20-60

Dependent Variable Employed (0=No, 1=Yes)		
<u>Predictors</u>		<u>Standardized Estimate (Beta)</u>
1 Age (20-60 years)		-.01
2* Educational attainment (highest grade completed (0-18 years))		+.24
3 Age of the youngest child (0-18 years)		-.16
4 Number of children at home aged under 18		-.14
5 Length of time since spouse's death		+.09
6 Health status (self rating of health 1=poor to 10=excellent)		+.07
7* Employed prior to husband's death (1=yes, 0=no)		+.50
Adjusted R ² = .365		F statistic = 11.981*
N = 134		
*Significant at $p \leq .05$		

tunity costs of not working. The lower a woman's potential earnings, the more likely it is that the net gain from employment would not justify giving up the pension. The second is that education level is also related to career or work commitment--women complete schooling and undertake further education in part because they plan or want to work in the future. Prior work history is also important; those women who had been working prior to the husband's death were likely to be working as widows. Nineteen women, or 28.9% of those working, had entered the labour force subsequent to the husband's death.

Once these factors, i.e., education and previous work history, were controlled for, having young children at home reduced the probability that a woman would be working, but was not significant.

Amongst women in particular, there is evidence of a cohort rather than strictly an age effect on employment. Younger women--whether or not they had dependent children--were more likely than middle-aged women to be working, or feel a need to work. It is likely that younger women in general are more "career" or "work-committed" as a result of changing social mores, and are probably likely to retain this attitude as they age.

Women of working age, i.e., under 60, who did not work gave a combination of reasons for this decision. Many said that they wanted to be at home with children and/or would have too many child care problems. Approximately 15% said that they had other family responsibilities that precluded working; approximately 20% said that they would probably work if they could find a part-time job, and some 20% said that they were unable to find work. Poor

health was given by about one-third of those not working as a factor precluding work, and 12 women said explicitly that they were not working for fear of losing their pensions.

ii) Labour Force Participation and Pension Receipt

The tradeoff between work, costs of child care and receipt of transfer payments has been explored in detail in research carried out in the U.S.A. Research on female recipients of the Aid to Families with Dependent Children Program (Welfare) (22) has shown that when given the right to earn income and retain some eligibility for transfer payments, most women do in fact adjust their labour force participation rates so as to maintain rights to fringe benefits, and to maximize total income.

The relationship between working and receiving the pension is not as clear-cut in our data. The majority of the widowed receiving a pension were women, although the vast majority of men of retirement age were receiving the Age Pension, and a few men who were younger were receiving other benefits, usually either Invalid or Service pensions. The majority of women were recipients of the Widows' Pension. The design of the pension is such as to encourage a certain amount of work. Since the pension is both categorical and means tested, however, there are some women who do not receive the pension--either because they are not in the correct age category for the Class B pension, do not have dependent children so do not qualify for the Class A pension, and/or because their income exceeds the means test.

The Widows' Pension, then, has two sets of eligibility criteria--one set is categorical, the other means tested. The categorical criteria include firstly being widowed (or divorced or legally

separated), and secondly either having dependent children or meeting certain age criteria. Once people have qualified by categorical eligibility the pension is then means tested.

Of the seventy-six women potentially eligible for the Class A Widows Pension (i.e., those with at least one child under 16) forty percent were not drawing it. Fifty percent of those potentially eligible (i.e., aged between 50 and 60) were not drawing Class B pensions. There were differences in employment, employment history and educational background between those who did and those who did not receive the pension, particularly between those older women who did not have dependent children who were categorically eligible for Class B widows' pensions.

Class A Widows' Pensioners

As can be seen from Table 8, one-third of those receiving Class A pensions were employed; however, the majority of these were working part time. On the other hand, two-thirds of those women who were eligible for the pension but were not drawing it were working full or part time.

Table 9 indicates that those drawing the pension were also less likely to have a history of labour force attachment prior to the husband's death than those who were categorically eligible but non-recipients.

Those who were not pension recipients clearly could command higher salaries or wages than those who were pension recipients. There was a slight (but non-significant) tendency for those on the pension to be less well-educated, a smaller percentage of them having gone on to post-secondary education or training. Furthermore,

Table 8

Current Employment Status by
Current Receipt of Class A Widows' Pension

	Employed Full-time	Employed Part-time	Not Employed	Total
Eligible but not pension recipient	N=15 55.5%	N=5 18.5%	N=7 25.9%	N=27 38.6%
Pension recipient	N=3 6.97%	N=11 25.6%	N=29 67.4%	N=43 61.4%
Total	N=18 25.7%	N=16 22.9%	N=36 51.4%	N=70

Table 9

Employment Status Prior to Husband's Death
by Current Receipt of Class A Widows' Pension

	Employed	Not Employed	Total
Eligible but not pension recipient	N=17 62.9%	N=10 37.13%	N=27 38.6%
Pension recipient	N=15 34.9%	N=28 65.1%	N=43 61.4%
			N=70

those women who were working and not receiving a pension were more likely to be in professional, managerial or clerical occupations rather than in semi- or unskilled occupations which offer less stable and secure employment.

The majority of women eligible for the pension (whether recipients or not) had two or fewer children, although those receiving pensions were slightly more likely to have more than two children.

Women who were receiving the pension and not working were also significantly more likely to say that they were experiencing financial difficulties than those who were not pension recipients (42 percent compared with 15 percent). They also had far fewer other income sources than those women who were eligible but not receiving it. In addition to employment-derived income, women not receiving the pension were also more likely to be receiving income from a husband's superannuation or dividends or interest, although pension recipients were more likely to have income from roomers or boarders, and over one-fifth had income from insurance policies or annuities.

Class B Widows' Pensioners

The differences between those women who were categorically eligible for the Class B pension and not drawing it, and those who were recipients are particularly marked. Unlike non-recipients, or recipients of the Class A pension, women receiving the Class B Widows' Pension were significantly less likely to be working either part or full time as can be seen from Table 10.

There were also significant differences in earning potential as indicated by education and occupational background, and prior labour

Table 10

Current Employment Status by Current Receipt of
Class B Widows' Pension

	Employed Full-time	Employed Part-time	Not Employed	
Eligible but not pension recipient	N=11 55%	N=7 35%	N=2 10%	20 46.5%
Non recipient	N=0 0%	N=2 8.7%	N=21 91.3%	23 53.5%
	N=11 25.6%	N=9 20.9%	N=23 53.5%	43

Table 11

Employment Status Prior to Husband's
Death by Current Receipt of Class B
Widows' Pension

	Employed	Not Employed	
Eligible but not pension recipient	N=17 85%	N=3 15%	20 46.5%
Pension recipient	N=4 17.4%	N=19 82.6%	23 53.5%
	N=21 48.8%	N=22 51.2%	N=43

force participation (Table 11). Only 24 percent of Class B pension recipients had been in the labour force prior to the husband's death compared with 84 percent of categorically eligible non-recipients (Table 11). Non-recipients also were more likely to have completed high school or to have some additional learning or education, and to be in professional or other skilled occupations.

Although the differences were not significant, there was also a tendency for those on the pension to rate their physical and mental health as slightly worse than those not on it. They were also less likely to have other sources of income--with the exception of rent payments from grown children or boarders, and were significantly less likely to own their own home or car than were categorically eligible non-recipients.

Those receiving Class A pensions who were women with children, were more likely to be working despite child care responsibilities, than were Class B pensioners. There were two reasons for this. One is that the Widows' Pension is not adequate to support a family, so women who are employable are likely to work to supplement or (if their potential earnings are high enough) to replace the pension. Class B pensioners may feel less of a need to work because financial pressures are not as great. This seems unlikely because the majority of them said that their incomes were inadequate to meet their expenses.

It is fairly clear that women who draw Class B widow pensions, in particular, are predominantly those whose earning potential is low and whose employment prospects are limited, especially in today's tight labour market. Most of these women, now aged in their 50's, are from the cohort who were brought up to view their

primary role in life as being good wives and mothers. Most had not worked since they had begun their families--as much as thirty years before. Essentially, with the death of their husbands they are "displaced homemakers" and, particularly, in the absence of education and training programs directed at this group, they would have to be considered difficult to employ.

The women who are recipients of Class A pensions were younger, tended to be slightly better educated and to have some prior work experience as compared with those who were recipients of Class B pensions. However, two-thirds of them still were not working, did not have recent work experience, and had relatively low education and occupation levels. Even in the absence of the pension many of them would probably also experience difficulty in finding employment.

iii) Widowed Men and Employment

Forty-two percent of the men were not employed. Those not working had usually retired from the labour force because of age or ill-health. Three of the men were drawing Supporting Parents' Benefits in order to stay at home with their children.

Many of the men still working perceived changes in their employment since their wife's deaths. A small proportion said that since her death they had increased the amount of time and energy that they expended on their jobs. These were predominantly men without dependent children, and often those whose wife had experienced a long period of illness preceding her death, during which time she needed additional care or attention. Following the death, these men found that they had time--often too much time--to

devote to work. Close to one-third of the men said that their attitude toward work had changed since their wife's deaths. A large proportion said it was now less important to them--in part because their entire lives had become meaningless. For a small percentage, predominantly those who did not have children at home, it had become more important as a way of keeping busy, keeping their minds off their own grief and dealing with loneliness.

iv) Employment Related Problems

As can be seen from Table 2, approximately 16% of the sample brought up employment-related problems at the time of the interview. Although the percentage was the same for men and women, the nature of the problems differed. The incidence of employment-related problems were (not unexpectedly) correlated with age, with the younger widowed expressing them more frequently than the older. Sex differences existed in the nature of employment-related problems. Women in particular talked about the difficulties that they were experiencing in finding employment or actually getting a job. For many, this was closely related to lack of skills or work experience and the needs for additional education and job-related training.

Men were less likely to be experiencing problems of finding a job since most who were of working age were employed at the time of the wife's death. Younger men who had dependent children were the ones experiencing particular problems with their employment. Many of them found that their additional child care and family responsibilities restricted their ability to commit themselves to their jobs and/or to take advantage of opportunities for job change or promotion. The absence of care for children, particu-

larly after-school and holiday care, and the limited availability of home help or housekeeping services, meant that these men probably were over-extended and that their employment suffered accordingly.

Women were much less likely to express concern about the impact of child care responsibilities upon employment. Their concern was more likely to be in terms of juggling employment demands to meet home and child care responsibilities. Most of the women working had jobs in which hours and leave policies were relatively inflexible. Unlike the women, a larger proportion of men were in professional jobs, or had enough seniority to be able to have some control over their work environment and have some flexibility in scheduling. Women who were working were particularly likely to see themselves as being under extreme stress and complain about needing more time. Since the majority had dependent children and were trying to juggle these responsibilities with home care and job, it is not surprising that most were so stressed. Nineteen of the eighty-five women who were employed had entered the labour force since their husbands' deaths, and they seemed to be having particular adjustment difficulties in adjusting to the stress of so many new demands being made upon their time.

Women, then, faced the decision of either withdrawing from the labour force and applying for a pension or of taking employment. If they withdrew from the labour force they subjected themselves and their families to a lowered standard of living and the financial limitations of living on the pension while at the same time watching any job-related skills that they may have deteriorate, so becoming less employable in the future. Taking employment,

on the other hand, meant a higher standard of living but putting themselves and their families under extreme stress.

Services that might help to make employment more feasible for widowed women, such as home help or a housekeeper who could provide after-school care, are rarely available in the public sector, and, given the low incomes of such women, are prohibitively expensive if purchased privately. Widowed men often resorted to hiring a housekeeper, which was extremely expensive, but usually more within their means than within the widows'. Fifteen percent of the men had a housekeeper who took over the daily responsibilities of child care, cooking, and housecleaning; however, only 3.7% of the women had hired a housekeeper. Those who did have a housekeeper had the benefit of a small percentage of the wage paid to the housekeeper being rebatable through the income tax system.

v) Employment Problems Prior to and Immediately

Following the Death of a Spouse

Problems with employment had often started well before the spouse's death. Many of the men in particular brought up the difficulties that they had experienced with employment during the time in which their wives were sick or dying. In most cases this was related to trying to maintain the home, take over some of the responsibilities for child care where there were still children at home, and ensure the wife did not overtax herself, as well as maintain employment. Over one-quarter of the men reported that their wives had been unable to do the normal household work during the time, and close to twenty percent of the men either had to reduce working hours or take leave during the period before the wife's death. During this period, close to forty percent of both women and men

said that their expenses had increased.

For both men and women, the increased load at home caused by a spouse contracting a terminal illness could be in part relieved if home help and child care services were easily available. The conditions on publicly-provided home help services usually restricts their availability in terms of clientele--usually only to "families where the mother is sick" and/or to a limited number of weeks of service, which rarely reflect the realities of months or years of incapacity or fluctuations in health and ability faced by people with terminal illness. The average duration of forewarning for people in our sample was 9½ months.

The period immediately following the death of the spouse was also one in which employment problems were marked. Men who had taken leave or reduced working hours were usually expected to return to work. Those who were able to take compassionate leave from work were usually expected to return within a month or six weeks. Rarely had the dislocations resulting from the spouse's death resolved themselves in that time. The length of time which people reported as elapsing before they felt that they were "coping" varied from a few weeks to several years. There seemed to be little evidence that people who theoretically had some forewarning of the death (as a result of the spouse having a terminal illness) saw themselves as coping better or sooner than those with little or no forewarning.

One of the major difficulties faced during this period by widows and widowers with children was the difficulties of coping with the children's grief. Men in addition had the problem of setting up and organizing the running of the household, usually both men and

women had business affairs to put in order, the will to settle, and probate to work out. With such pressures, many saw the necessity of returning to work as particularly onerous. Compassionate leave, unlike maternity or sick leave, is usually individually negotiated as need arises, and employers' flexibility varies in this. Widows or widowers who had decided to take unpaid leave or left a job to sort out personal affairs were often not aware that they may have been eligible for a widow's or supporting parent's benefit during this time. Ignorance of potentially available benefits and services in the community was continually evident throughout this study.

It is evident then that one of the major difficulties faced with employment by widows and widowers was the difficulty of maintaining a job while trying to rear a family alone. The lack of low-cost publicly-provided home help services is a particular problem for this group.

The availability and policies of home help services vary according to auspice and locale. The 1974 Survey of Homemaker and Home Help Services carried out by the Australian Council of Social Service found that only in very rare cases were the widowed given home help assistance, and this was usually only on a short-term or emergency basis. Quotations indicate the need perceived by the Services in different states and localities for assistance : "There is only one problem which we cannot help with and that is the deserted father or widower left with children, because this is an emergency service . . . and the father would need continuous support. We feel this is a great strain on the father when this is suddenly thrust upon him and he still has to go to work and support the family."

". . . deserted fathers need some long-term assistance as at present

they are forced to employ someone (paying a considerable part of their salary); relatives are unable to cope with the young families."

". . . there is an urgent need for trained homemakers who could be called on to care for very young children in the home for several months after a mother's death" (24).

This study was carried out in 1974. By 1980 when the Widowhood Study was carried out, it was evident that home help services had not been able to be extended to assist working widows and widowers. Those widows and widowers who had children, in particular, were experiencing considerable difficulties in handling the pressures of work, child care and running the household. This difficulty does not just exist for widowers, nor is it only in the few weeks following the death. Those with young children, particularly children not yet in their teens, were feeling the pressures several years after the spouse's death. Nor did these difficulties start with the death. Men in particular mentioned that they had experienced particular difficulties during the time prior to the spouse's death in which she was unable to carry out her normal household duties. Home help services surveyed by ACOSS also recognized the need for assistance when a parent (the mother) was ill. Usually this was short-term help; however, rarely was it available for an extended period.

The assumption that only men need help with household responsibilities is not borne out by the research. This may have been the situation if and when women were not in the labour force; however, over half of the widows with children at home were also employed, and more than half of those employed were working full time. As has

been mentioned earlier, many of these women saw themselves as being under particularly high levels of stress. Women are less likely to perceive or verbalize a need for assistance with home help and child care, in large part because they have accepted that this is naturally their responsibility, and the policies of publicly-provided home help services by and large reflect this view of the world.

Current federal government policy, in terms of home help services, seems to be to partially finance housekeeping costs for single parents through the tax system with the use of the Housekeeper Rebate rather than through publicly-provided services. This limits home help services only to those single parents with higher incomes who can afford to meet the costs of home help and then claim it back through the tax system. The difficulty that both women and men have with financing services through this route is shown by the relatively few men and even fewer women who, despite expressed need, could afford to hire a housekeeper.

As was mentioned previously, need for home help was also frequently perceived as having been a problem during the time that the spouse was terminally ill. Reflecting either lack of awareness or lack of concern with the problem by the federal government, housekeeper and child care expenses incurred in caring for an ill or disabled spouse are not tax deductible unless the spouse is a recipient of an Invalid Pension. Relatively few of the spouses, particularly the wives, were likely to be eligible for the pension because the husband's income was too high. Yet the incapacity of the wife often made some help at home necessary. It is evident that publicly-provided services, even if adequately funded, would probably not be

able to meet demand. Therefore, making those services purchased privately tax deductible would be a small step to reducing some of the financial pressure experienced by families in which a member has a terminal or debilitating illness.

6.4 Education and Training

Associated with enhancing employability or improving employment status was the desire expressed by both widows and widowers of taking training or further education. A higher proportion of men than women had made definite plans to start training in the immediate future, but only ten of the women (4.1% of the sample) and the same number of men (7.6% of the male sample) were actually pursuing training at the time of the interview and most of these were experiencing at least some difficulties. These included time pressures (particularly if children were present) and lack of confidence in their own abilities. Interestingly, despite the small numbers actually taking any sort of further education or training, over one-third of the women and 27 percent of the men indicated that they would be interested in doing so but few had followed through on this interest to the point of actually making definite plans. The reasons given for not taking training or education despite an interest in doing so by percentage giving it as a reason are listed in Table 12. These were firstly, related to lack of time often compounded by their family responsibilities; secondly, a fairly pervasive lack of self-confidence was expressed in terms of questioning their own ability to re-enter education usually after many years away, and/or a belief that they were now "too old;" thirdly, practical problems associated with lack of information about available or appropriate programs, transportation and money problems

Table 12

Reasons for not Taking Further Education or Training
Despite an Expressed Interest in Doing So
(Rank Ordered by Percentage Reporting)

<u>Reason</u>	<u>Rank</u>	<u>Women</u>	<u>Rank</u>	<u>Men</u>
		<u>Percent</u>		<u>Percent</u>
Lack of time	(1)	42%	(1)	66.6%
Lack of confidence	(2)	30%	(3)	19.4%
Too old/too late	(3)	24.4%	(2)	22.2%
Money limitations	(4)	20.0%	(6.5)	5%
Child care responsibilities	(5)	18.9%	(5)	13.8%
Unavailability of programmes	(6)	13.3%	(4)	16.7%
Transportation difficulties	(7)	12.2%	(8.5)	2.7%
Lack of information	(8)	10%	(6.5)	5%
Health problems	(9)	8%	(8.5)	2.7%
N =		90		36

Note: Percentages do not total to 100 since categories are not mutually exclusive.

came up frequently.

Multivariate analysis suggests that the best predictor of whether or not a person was actually taking training was the existing level of education. The vast majority of the sample (86%) had a high school education or less, most having left at third or fourth year level in high school. Widowed women in particular may need considerable help and encouragement to undertake any further training and enter employment.

The existence of the Class B Widows' Pension is implicit acknowledgment that many women are essentially unemployable if their marriages end in middle age after years of not participating in the labour force. Awareness of this led to the establishment in 1968 of a vocational training scheme for widowed pensioners which offered either full or part time training up to a maximum of 12 months. During the four years following introduction of the scheme, 6211 widowed pensioners were accepted for training, and 2047 women who had received training through the scheme obtained employment (25). In 1974 this scheme was subsumed under the National Employment and Training Scheme (NEAT), which currently appears to put most of its emphasis on training programmes for youth. Since that time, there has been nothing specifically directed at widowed or other similarly single women. Referral to NEAT is through the Commonwealth Employment Service, which few widowed women are likely to have any contact with; therefore, it is unlikely that many will be referred for government-sponsored training or education. Scant mention is made in informational pamphlets prepared by the Department of Social Security for widowed pensioners of the availability of NEAT, nor is there much related education, training or employment information

made immediately available.

There are some training and further education programmes directed particularly at middle-aged women usually offered through Colleges of Advanced Education. Such programmes and information, such as the fact that recipients of a Widow's Pension are eligible to retain rights to pension benefits while drawing a proportion of Tertiary Education Assistance Scheme (TEAS) payments if they choose to undertake full-time study, should be more widely publicized. One obvious way of reaching widowed women would be through Department of Social Security pamphlets and publications. It would appear that it is not the intention of the Department of Social Security to encourage such women to enter or prepare themselves for entering or re-entering the labour market. Widowed women (and presumably all single mothers) are "pensioned off" rather than being encouraged to prepare themselves to enter the labour force if that is what they are interested in. This is despite the fact that the pension provides for only a subsistence existence, and a woman widowed in her thirties, forties or fifties has potentially much to contribute in the labour market, and personally a lot to gain from education, training and possible employment, as well as the probability that, once her youngest child leaves home she may lose pension eligibility and be forced to support herself.

6.5 Home Maintenance

This was one of the most frequently mentioned problem areas for women of all ages, and for the older men. Two things that came up frequently were firstly the difficulty that many experienced in carrying out routine maintenance tasks around the home. The other,

expressed particularly by women, was finding reliable tradesmen for major maintenance tasks around the home. The problems that women faced arose partly from lack of financial resources to meet the expenses of paying tradesmen, but also from lack of knowledge and experience with home maintenance tasks that had traditionally been carried out by their husbands. Men, on the other hand, tended to complain about lack of time for home maintenance tasks, and older men in particular, of physical incapacity that made it difficult to carry out some jobs around the home.

Some women were contemplating selling their homes and moving into a flat because of the cost and difficulty of routine home maintenance. Many relied on family members, children (particularly sons) or grandchildren to help them with home maintenance tasks. Those who lived in municipalities in which the local council had a handyman on staff, or where the social worker kept a list of reliable local tradesmen, were particularly fortunate and found those services helpful. However many did not know about their availability. The extent to which local government has accepted assistance with home maintenance as one of its responsibilities varies greatly. On the basis of the research, however, home maintenance is a serious problem, particularly for widowed women, and is a major cause for them moving.

Moving house is not necessarily a completely negative experience. As D. Rowland (26) points out, it may be a rational response to reduced needs for living space, and an attempt to deal with transportation problems mentioned by widowed women in particular. For some younger widowed women, it was also a response to the need to establish a new life and a new identity. However, insofar as

some assistance with routine home maintenance tasks and locating tradesmen would help to prevent undesired moves and help to reduce stress on the elderly, a large proportion of whom are widowed, it would seem to be an important and logical focus of social welfare programming at the local government level.

While employment difficulties and need for training as well as financial problems were difficulties mainly for the younger widowed, poor health and transportation problems were frequently mentioned as concerns by the older people in the sample.

6.6 Transportation

Transportation or getting around was a difficulty for widowed women and particularly older women (60 and over). A smaller percentage of the older men also had difficulties with transportation. Many of these problems arose because women had relied on their husbands for transportation, had never obtained a drivers' license and felt that they were too old to learn how to drive, and that they could not afford to maintain a car in any case.

The fact that the aged in particular face difficulties in getting around and with transportation is not a new discovery. However it is important to recognize the extent to which this problem dominates and shapes the lives of many of the elderly, particularly elderly widowed women. Although public transportation is available and those on pensions obtain fare concessions, poor health and, for women in particular, concern with physical safety often precluded using public transport, particularly at night. Difficulties in getting about were likely to determine or at least influence decisions on where to live, participation in social activities and

their nature as well as their social contacts. In particular it exacerbated the social isolation and loneliness and lack of independence that many of the widowed reported following the death of a spouse.

Resources for dealing with transportation difficulties were correspondingly scarce. While some relied on adult children this was a regular resource for only a relatively few of the widowed, and was not feasible for the majority who did not have adult children living close by. While the cost of public transportation was not usually mentioned as a problem, poor health, inaccessible public transportation with poor connections and/or fear of personal safety when using public transportation at night forced reliance on taxis. The cost of regular use of taxis was perceived realistically by many as being beyond their means.

While there are few obvious or easy solutions to the problems of transportation amongst the older widowed, it is important to realize the extent to which it is a factor limiting freedom and increasing the risk of dependency especially for women.

6.7 Health

Deterioration in physical health is recognized as being an inevitable and major problem of aging. Researchers in the health field have also pointed out the relationship between bereavement and deterioration in physical health (27, 28, 29). The relationship between physical health problems and societal norms and social welfare policy has rarely been explored, however. As has been discussed in detail elsewhere (30), it was evident that the family doctor was used by the widowed as a resource for many aspects of

life that could not be strictly described as health related. Definition of emotional and practical difficulties as health problems is socially acceptable as well as gaining access to the general practitioner for help. This is encouraged by health care policy which makes medical care available free of charge to pension recipients who qualify for Pensioner Health Benefits.

In any assessment of helping networks of the widowed the general practitioner would have to be included as a major, "front line" professional. As we have pointed out (31) widows were often not satisfied with the non-health care services offered by doctors, but were rarely aware of other resources in the community to help them to deal with practical and personal emotional difficulties. The availability and accessibility of social work, psychological and counselling and referral services needs to be better publicized to the widowed. These services are often more appropriate and cheaper than the health care system for dealing with bereavement-related problems, but lack of information about appropriate services was evident from many of the interviews. Information and referral services are currently available at Citizens Advice Bureaus. In addition information for the widowed could be available through people and publications that the widowed are likely to come in contact with. This includes funeral directors, banks, social security offices and local doctors as well as life insurance and trust organizations. Innovative work in the information and referral area has been done by life insurance societies and some funeral directors as a part of perceived community service. Such services vary from booklets (32) which discuss services, give phone numbers and addresses and occasionally give information in lay language about

grieving and the adjustment to loss to actually hiring a social worker for counselling and referral services to the recently bereaved.

In the U.S.A. several banks and trust companies have also hired social workers or welfare officers to help people to deal with personal and social problems that arise in conjunction with financial difficulties. Since the widowed usually have to deal with the bank and the bank manager in the process of probating or handling estate matters as well as personal finances, such a resource would also seem to be appropriate for Australia.

6.8 Loneliness and Emotional Problems

A major set of difficulties that should be mentioned are emotional or psychological readjustments. The extent to which these are amenable to assistance through existing social services is a matter for question; there are, however, several initiatives tried in other countries that are worthy of consideration.

Loneliness was the most frequently mentioned problem of both widowed men and women. Amongst both there was a relationship between age and the frequency with which loneliness was reported, with a smaller percentage of the youngest age groups (who were likely to have children at home) and the oldest women and men likely to report loneliness than those aged between forty and sixty-five. The reasons for this pattern, we believe, are related to the fact that both women and men in their forties and fifties are in the stage of the family life course at which children are leaving or have left home, thereby losing one major source of companionship. They are also in the age group in which they are

likely to be somewhat socially isolated in a couple-oriented society.

"Loneliness" is an idiosyncratic phenomenon that has a different meaning to each individual. For some it means a lack of companionship, for others the absence of some one person who cares about them, and to others it is missing the dead spouse. Under any circumstances it would appear to be a psychological problem not directly amenable to amelioration through social welfare policies.

There are several programmes utilizing a self-help model tried overseas that are particularly worthy of consideration. Widow-to-widow programme models were initially developed by Silverman (33) and have since been replicated throughout the U.S.A. and Canada. These are usually based on the findings that (a) social support is crucial in mitigating high stress situations such as those caused by death of a spouse, (b) that widowed women, after the initial crisis phase is over, draw most of their support from widowed friends (34). Sponsoring organizations include religious groups, social service organizations, psychiatric institutes, funeral homes and social groups such as Parents Without Partners. The extent to which and ways in which self-help groups are structured depends upon the sponsoring organization.

Those reported in the literature are usually fairly highly organized and tend to follow one or both of two models. One is an individual contact network on which a widowed woman from the network contacts and befriends other similarly widowed women offering support, guidance and a chance to share experiences. The other is a discussion or social group which may exist with or without the individual outreach programme. The focus of such groups varies greatly,

with some focusing on consciousness raising, others on problem solving and support, and others are predominantly set up for companionship and social interaction. Evaluation of a Widow's Self-Help programme in Toronto, Canada (35) suggests that women who participated in a Widow-to-Widow programme had significantly less distress and accelerated adaptation and level of adjustment to widowhood over a two-year period.

There are some widows groups functioning in Australia that we are aware of. Some are organized purely on a self-help basis with a group of widowed women getting together for support; others are formal organizations such as Civilian Widows or War Widows Associations, or are groups developed within the context of a hospital setting. Relatively few are able to offer the continuing psychological support and assistance available through some of the better widow-to-widow programmes. Experience elsewhere suggests that a minimum amount of seed money, and a paid coordinator with participation, or at least consultation from professionals, is necessary for a self-help programme such as the Widow-to-Widow programme to run successfully. Such assistance is not particularly expensive if it helps to reduce some of the loneliness and emotional distress reported by so many widowed men and women, which often also forces them to rely on expensive medical or psychiatric services which are government-subsidized.

7.1 Widowhood Within the Multicultural Context of Australian Society

Given the sustained migration programme that Australia has experienced and the encouragement of family immigration, it is

inevitable that a proportion of the widowed in Australia will not be Australian born. Census figures show that 22.39% of the widowed women and 24.26% of widowed men are not Australian born, and approximately 10% of both widowed women and men are born in countries other than the United Kingdom or Ireland. Depending on how long they have been in Australia, some of these are likely to combine the problems already discussed which appear common to widowhood with the difficulties of isolation from family and friends, lack of familiarity with the English language, and reconciling social and cultural prescriptions about appropriate behavior of the widowed within their own culture with the expectations of Australian society.

A component of the research programme on which this report is based involved parallel interviews in Greek with thirty Greek widowed women in Melbourne (36). The findings from this are indicative of some of the additional problems faced by widowed migrant women from non-English speaking cultures, and the need for cultural differences to be taken into account in formulating social welfare policy towards the widowed.

Greek culture clearly defines appropriate mourning behavior following death of a spouse. This includes overt vocal expressions of grief, regular mourning services at specified intervals, wearing black dress, not going out and keeping an attitude of quietness and reserve. Widows traditionally should remain in mourning for the rest of their lives or until they remarry; Kobatsiari found, however, that the younger women in her sample modified these prescriptions somewhat in accordance with Australian societal prescriptions, but often felt guilty about it.

In general, the widowed Greek women reported having multiple problems and difficulties related to their widowed status. In particular high percentages reported problems with loneliness (90%), poor health (80%), finances (76.7%) and difficulties with children (56.6%). These percentages were much higher than in the comparable sample of Australian women.

Financial problems were particularly marked because most were not working and were totally reliant upon the Widows' Pension. In addition the fact of being migrants and having had to establish themselves economically in a new society meant that most families had no financial resources to fall back on at the time of the husband's death. Practical problems of lack of skills and lack of prior work experience, along with cultural prescriptions on appropriate behavior of bereaved women limited their ability to seek employment as a way of dealing with their financial difficulties.

In addition the women reported substantial health problems, and saw themselves as being under considerable stress and worry. A much larger proportion of Greek than Australian women were using prescribed tranquilizers to deal with problems. Kobatsiari suggests that some of this may result from the lack of English language competence of many of the Greek women which made it difficult for them to explain symptoms to doctors and to the lack of understanding by medical personnel of cultural prescriptions about appropriate mourning behavior in Greek society, which led them to prescribe drugs rather than offer or make referrals for counseling and support.

The marked extent of loneliness and social isolation also in part

were related to the observance of culturally prescribed mourning behavior as well as to financial and health limitations. It was probably also related to the absence of a closely-integrated social support network especially if the extended family was not available. Children--both adult and young--were extremely important as sources of support and companionship.

The Greek widows then reported considerably more problems than the English-speaking sample. Many of these difficulties resulted from their poor command of English, their poor financial status and associated downward social mobility, and the lack of understanding within Australian society of appropriate mourning behavior in the Greek culture. This both created conflicts and stress for the widowed women in trying to meet the demands of both cultures as well as misinterpretation by Australian society of the needs and behaviors of widowed Greek women (37).

Adequate culturally based support services, and better information and knowledge about the mourning customs and rituals within Greek society amongst helping personnel seems necessary. In addition, the financial situation of migrant women who are widowed subsequent to their arrival in Australia is particularly precarious. With little or no resources to fall back on the Widows' Pension is not adequate. Increasing the dependent's allowance within the pension would be one way of targetting the pension on those particularly in need, namely women with dependent children.

8.1 Summary and Conclusions

Death of a spouse is still the major cause of termination of a mar-

riage in Australia. Although the needs of the widowed have been recognized to some extent within tax and transfer policies, there are still major areas of need that are not met adequately or at all by social welfare policy.

Particular areas of need that require a response through policy and programme initiatives are financial problems, difficulties with housekeeping, child care and home maintenance, employment and job training and job placement for women in particular; and transportation and health care difficulties amongst the elderly. A problem common to most of the widowed is loneliness. There are programme initiatives tried elsewhere which to some degree may help to alleviate some loneliness. Treating the widowed as a unitary group from the point of view of policy development does not necessarily acknowledge the wide range of difficulties they face and the differences within the population of the widowed. The one thing that all of the widowed have in common is that they have lost a spouse through death. Regardless of whether the death was anticipated or sudden, or the spouse was loved or loathed, there is usually a period of grieving and readjustment that may vary in length from a few days to many years. Social welfare policies, then, should recognize that there may be a period of emotional, social and financial dislocation during which counselling and financial assistance may be required.

Beyond this, however, the needs of the widowed vary greatly depending in part on some of the following factors:

1. Age: Widowhood is predominantly a phenomenon of aging but occurs across the individual and family life span. Needs vary greatly

depending upon age and stage of the life span at which a person is widowed.

2. Birth cohort as distinct from age differences: Rosow (38) points out that cohort proxies for many things. Each cohort is born into and experiences a particular set of social and economic and political conditions that differ from generation to generation. Most social welfare policies are instituted to meet the perceived needs of one generation; they are, however, rarely changed or adapted to reflect changing circumstances. A forty-year-old woman widowed in 1981 is not likely to be like a forty-year-old woman widowed in 1943, the year in which Civilian Widows' Pensions were instituted. To name only two things, labour force experience and economic expectations are likely to be very different, and yet this is hardly reflected in income maintenance programmes.

3. Sex: Both women and men become widowed. Since the socialization and life experiences of men and women differ greatly, and societal expectations about appropriate behavior also differ, sex differences in the needs and experiences of the widowed are to be expected. There are still many similarities in part mediated by age.

4. Adaptation to widowhood changes over time: Widowhood is not a static situation. Research suggests that people go through many stages in adjusting to widowed status, and that the time period of adjustment may extend and change over several years. The needs of someone widowed six months are often very different from those of a person widowed five years, yet, widowhood tends to be dealt with as a static situation by social welfare policy.

5. Widowhood often comes at the end of a long-term illness: Needs of the spouse and family during a period of terminal illness have received little attention by social welfare policy.

6. Ethnic differences: The role of marriage in the lives of women and men, and appropriate behavior when it is terminated by death, varies greatly between cultures. Social welfare policies towards widowhood in Australia have been developed for the customs and expectations of a British-based society. They are not always appropriate for members of other ethnic groups. This must be recognized and dealt with if Australia is to continue to label and view itself as a multicultural society.

7.2 Recommendations for Social Welfare Policy

1. Transfer programmes:

- a) The income cut-off for Pensioner Health Benefits should be increased to allow the widowed to work and still retain eligibility for the in-kind programmes linked to possession of a PHB card.
- b) Consideration should be given to increasing the dependent's allowance on the Widows' Pension and Supporting Parents' Benefit to more nearly reflect the expenses of bringing up children alone.
- c) More publicity needs to be given about the availability of and eligibility criteria for Class C Widows' Pensions.
- d) DSS should encourage widowed women to seek employment to supplement the pension through positive advertising in its pamphlets of the income gained rather than pension lost through working.

- e) The lower age limit for Class B Widows' Pensions should be reduced to 45. Many women, when their marriages end through death of a spouse, are displaced homemakers with few skills and little work experience. They are often not immediately employable.
- f) The eligibility of the terminally ill for the Invalid Pension should be reviewed particularly in terms of access to Pensioner Health Benefits and the eligibility for Tax Rebates for housekeeper services.

2. Tax policy:

- a) Extraordinary medical, health, housekeeping and child care costs incurred as a result of terminal illness within a family should be tax deductible or rebatable regardless of whether or not the family member is an Invalid Pensioner.
- b) Child care costs incurred by a single parent should be tax deductible or rebatable.
- c) The Sole Parents' Rebate should have a sliding scale on the dependents' deduction rather than cutting out entirely at \$1720.00 of annual earned income by a dependent.

3. Home help services: Funding should be made available so that home help services can be extended to widows and widowers as needed before the death of the spouse if the spouse is suffering from a terminal illness, and subsequent to the death on a long-term basis.

4. Job training: Job training or retraining and job placement for widowed women who are interested in re-entering the labour force is necessary. The current focus of training programmes through NEAT is mainly on youth. Older women have special needs not met by such programmes.

5. Home maintenance advice and handyman services should be made available through all local councils and well-publicized. Emphasis needs to be put on help to widowed and other similarly single women. Some councils view and advertise such help as being predominantly for the elderly.

6. Improved access to information, counselling and referral for the bereaved is needed. Such services could be provided in the private sector through funeral directors and banks. Consideration should be given to government provision of seed money or financing and evaluating a few demonstration projects in such settings. Additional counselling and self-help services such as those provided within widow-to-widow programmes could also be set up with small amounts of government funding.

7. Information on the process of grieving and adaptation to bereavement needs to be made available to such front line professionals as general practitioners. In particular, better information about cultural differences in dealing with bereavement need to be made available.

FOOTNOTES

1. Additional reports focusing on the impact of widowhood on children, family and social networks and on widowhood and aging are currently in preparation.
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