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Socio-Economic Challenges, Support Systems and Coping Strategies of Older Widowed Women in Rural Zimbabwe: Towards an Integrated Community Support Framework

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Abstract

Older widowed women in rural Zimbabwe experience multiple and interconnected socio-economic challenges that threaten their wellbeing, dignity, and quality of life. Despite the existence of social protection policies and community support initiatives, many continue to face persistent poverty, food insecurity, limited access to healthcare, social isolation, and inadequate institutional support. This study explored the socio-economic challenges experienced by older widowed women in rural Zimbabwe, examined the formal and informal support systems available to them, and analyzed the coping strategies they employ to sustain their livelihoods. The study further proposes an Integrated Community Support Framework to strengthen coordinated responses to the needs of older widowed women in rural communities. Guided by Ecological Systems Theory, the study adopted a qualitative case study design within an interpretivist paradigm. Data were collected through in-depth interviews, key informant interviews, and focus group discussions involving older widowed women and relevant community stakeholders in Chiwarira Village, Nyanga North District. Data were analyzed using thematic analysis. The findings revealed that participants experienced severe socio-economic challenges, including financial insecurity, food shortages, poor access to healthcare, social exclusion, and increased caregiving responsibilities. Existing support systems were fragmented, inconsistent, and often inadequate to meet participants' long-term needs. In response, older widowed women adopted diverse coping strategies, including subsistence farming, informal income-generating activities, religious participation, and mutual aid initiatives. These findings informed the development of an ICS Framework, which emphasizes coordinated institutional support, strengthened community participation, sustainable livelihoods, and responsive social protection.

Keywords: *Older Widowed Women; Socio-Economic Challenges; Rural Zimbabwe; Social Protection; Coping Strategies; Community Support; Qualitative Research*

1. Introduction

Population ageing has emerged as one of the most significant demographic and social transformations of the twenty-first century. Globally, improvements in healthcare, nutrition, and living conditions have contributed to increased life expectancy and a rapidly growing population of older adults (United Nations Department of Economic and Social Affairs, 2023; World Health Organization [WHO], 2025a). Although population ageing reflects important development achievements, it also creates complex policy challenges, particularly where health, care, and social protection systems remain underdeveloped. Older adults may experience declining health, reduced earning capacity, social isolation, and increased dependence on family and community support (WHO, 2025b). These challenges are often more pronounced among older women because cumulative gender inequalities across the life course affect income, assets, care responsibilities, and access to services (United Nations Entity for Gender Equality and the Empowerment of Women [UN Women], 2022).

Widowhood represents a major later-life transition and is frequently associated with deteriorating socio-economic wellbeing. Research documents financial insecurity, nutritional disadvantage, loneliness, health concerns, and reduced access to productive resources among widowed women (Djuikom & van de Walle, 2022; Niino et al., 2025; Singham et al., 2021). In many African settings, patriarchal inheritance systems and discriminatory customary practices can further restrict women's control over land and property (Dube, 2023; Sinkala, 2021). Recent scholarship conceptualises widowhood stigma as operating through loss of social status, isolation, discrimination, and reduced material and social resources (Odhiambo et al., 2025). Widowhood therefore entails not only the loss of a spouse but may also produce diminished livelihood opportunities, weakened support, and increased caregiving responsibilities.

These challenges are particularly evident in rural sub-Saharan Africa, where families remain central to later-life support but often face their own economic constraints. Informal networks can protect psychological wellbeing, yet support may be irregular and responsive only to immediate crises (Gyasi et al., 2019; Jennings et al., 2020). Formal interventions such as cash transfers, healthcare programmes, food assistance, and community initiatives can improve wellbeing, but coverage and coordination remain uneven (Handa et al., 2022; HelpAge International, 2024). Older widowed women consequently combine family, religious, neighbourhood, and institutional support with individual livelihood strategies.

Zimbabwe reflects many of these regional realities. The country's ageing population is growing within a context of economic instability, constrained social services, limited pension coverage, and substantial rural vulnerability (Hungwe, 2022; Zimbabwe National Statistics Agency, 2023). Evidence from social-protection programmes that include Zimbabwe shows potential benefits for household consumption and livelihoods, but programme design and implementation remain decisive (Handa et al., 2022). Existing studies have documented socio-economic hardship and the importance of family, government, and civil-society support. However, these dimensions are often examined separately, leaving limited understanding of how socio-economic challenges, support systems, and coping strategies interact in the everyday lives of older widowed women.

This study is guided by Ecological Systems Theory (Bronfenbrenner, 1979), which conceptualises individuals as interacting continuously with multiple environmental systems that influence wellbeing and life experiences. The theory helps explain how family relationships, community structures, government institutions, cultural norms, and broader socio-economic conditions collectively shape later-life widowhood. Rather than locating vulnerability solely within individuals, the ecological perspective directs attention to interactions across personal, social, institutional, and policy environments.

Although widowhood research has advanced understanding of adjustment, gender, and socio-ecological vulnerability (Anderson et al., 2023; Bandini & Thompson, 2013; Barros-Lane et al., 2024), two gaps remain. First, socio-economic challenges, support systems, and coping mechanisms are

commonly examined as separate phenomena rather than interconnected processes. Second, relatively little attention has been given to integrated community-based approaches that coordinate responses for older widowed women in rural Zimbabwe.

Accordingly, this study explored the socio-economic challenges experienced by older widowed women in rural Zimbabwe, examined the formal and informal support systems available to them, and analysed the coping strategies they employ to sustain their livelihoods. Drawing on participants' lived experiences, the study further proposes an Integrated Community Support Framework that conceptualises effective support as a coordinated interaction between family, community, government, civil society organisations, and the agency of older widowed women themselves. By moving beyond the documentation of socio-economic vulnerability towards the development of a practical framework for strengthening community and institutional responses, this study contributes to scholarship in gerontological social work while offering evidence-informed recommendations for policy and practice.

2. Materials and Methods

2.1 Research Design

This study adopted a qualitative case study design within an interpretivist research paradigm to explore the socio-economic challenges, support systems, and coping strategies of older widowed women living in rural Zimbabwe. A qualitative approach was considered appropriate because it enabled an in-depth understanding of participants' lived experiences, perceptions, and everyday realities within their natural social context. The case study design facilitated a comprehensive examination of the complex interactions between socio-economic conditions, community support structures, and individual coping mechanisms in Chiwarira Village, Nyanga North District.

2.2 Study Setting

The study was conducted in Chiwarira Village, Ward 5, Nyanga North District, Manicaland Province, Zimbabwe. The village is predominantly rural, with livelihoods centred on subsistence agriculture, informal economic activities, and community-based support systems. The area was purposively selected because it has a substantial population of older widowed women who experience diverse socio-economic challenges associated with ageing, widowhood, and rural poverty, making it an appropriate setting for exploring the study objectives.

2.3 Participants and Sampling

The study employed purposive sampling to recruit participants who possessed direct experience relevant to the research objectives. Participants included older widowed women residing in Chiwarira Village, together with key informants drawn from community leadership and organisations involved in supporting older persons. Participant selection was guided by their ability to provide rich and detailed information regarding socio-economic challenges, available support systems, and coping strategies. Recruitment continued until data saturation was achieved, at which point no new information or themes emerged from the interviews.

2.4 Data Collection

Data were collected using in-depth semi-structured interviews, key informant interviews, and focus group discussions. Semi-structured interviews provided participants with the opportunity to describe their

lived experiences in their own words while allowing the researcher to explore issues arising during the interviews. Key informant interviews generated contextual insights regarding community support structures, social protection programmes, and challenges affecting older widowed women. Focus group discussions facilitated collective reflection on shared experiences and community responses to widowhood and ageing. Relevant policy documents and programme reports were also reviewed to complement the primary data and enhance contextual understanding.

2.5 Data Analysis

The data were analysed using reflexive thematic analysis following Braun and Clarke (2019). Audio-recorded interviews were transcribed verbatim before familiarisation with the data. Initial codes were generated and organised into broader themes through iterative comparison and refinement. The analysis identified three overarching themes relating to socio-economic challenges, existing support systems, and coping strategies. These interconnected themes informed the Integrated Community Support Framework.

2.6 Trustworthiness

Trustworthiness was enhanced through credibility, dependability, transferability, and confirmability procedures (Lincoln & Guba, 1985). Credibility was strengthened through prolonged engagement, triangulation of data-collection methods, and member checking where appropriate. Dependability was promoted through a transparent audit trail, while reflexive documentation supported confirmability. Thick description of the context was provided to help readers assess transferability to comparable rural settings.

2.7 Ethical Considerations

Ethical approval for this study was obtained from the Research Ethics Committee of [blinded for review] prior to the commencement of data collection. Permission to conduct the study was also obtained from the relevant local authorities. All participants received detailed information regarding the purpose and procedures of the study and provided informed consent before participating. Participation was voluntary, and participants were informed of their right to withdraw from the study at any stage without penalty. Confidentiality and anonymity were maintained through the use of pseudonyms, and all data were securely stored and used solely for research purposes. The study adhered to the ethical principles of respect for persons, beneficence, non-maleficence, and justice throughout the research process.

3. Literature Review

3.1 Socio-Economic Challenges Experienced by Older Widowed Women

The findings revealed that older widowed women in Chiwarira Village experienced multiple and interconnected socio-economic challenges that adversely affected their wellbeing, livelihoods, and quality of life. Participants described financial insecurity, persistent poverty, food shortages, limited access to healthcare, caregiving responsibilities, social discrimination, and social isolation as the most significant challenges confronting them. These challenges were mutually reinforcing, creating a cycle of vulnerability that constrained their ability to meet both their own needs and those of the dependants under their care.

Financial insecurity emerged as one of the most pervasive challenges. Most participants reported having no regular source of income and relied primarily on subsistence farming, informal economic activities, or occasional assistance from relatives. The absence of stable income made it difficult to

purchase food, clothing, medication, and other essential household necessities. Older widowed women caring for grandchildren described particular difficulties in meeting educational expenses, including school fees, uniforms, and stationery. One participant explained:

"Vana vatinochengeta vachiri kuenda kuzvikoro saka mamwe ematambudziko atinosangana nawo anosanganisira kushaya mari dzekuvabhadharira chikoro, kutenga mayunifomu nemabhuku. Dzimwe nguva vana vanodzoserwa kumba nekuda kwekusabhadharwa kwefees."

This illustrates how financial hardship extended beyond the participants themselves to affect the educational opportunities and wellbeing of the children in their care.

Food insecurity was another prominent challenge. Participants reported that declining agricultural productivity, recurrent droughts, shortages of farming inputs, and limited access to draught power reduced household food availability. Advanced age and declining physical strength further limited their ability to cultivate sufficient land, resulting in frequent food shortages. Several participants indicated that poor harvests often forced households to depend on external assistance or reduce the quantity and quality of meals consumed.

Limited access to healthcare also emerged as a major concern. Although some participants were aware of government policies intended to facilitate access to healthcare for older persons, many reported that financial constraints prevented them from seeking timely medical attention. Costs associated with transport, consultation fees, medication, and referrals to hospitals outside their communities created substantial barriers to accessing healthcare services. One participant remarked:

"Nemhaka yekushaya mari handichakwanisi kuenda kun'anga kana kuchipatara nguva dzose. Dai ndichine simba rekushanda, ndaizvitsvagira mari yekurapwa."

Participants explained that advancing age, chronic illnesses, and declining physical capacity increased their need for healthcare at precisely the time when their financial resources were most constrained.

The findings further revealed that many older widowed women had assumed primary caregiving responsibilities for grandchildren and other dependants following parental migration or family disruption. Participants expressed concern that these additional responsibilities placed considerable emotional and financial strain on already limited household resources. While caring for grandchildren provided emotional fulfilment for some participants, it also increased demands for food, education, healthcare, and clothing, thereby intensifying household vulnerability.

Beyond economic hardship, participants described experiences of social discrimination and exclusion associated with both age and widowhood. Several key informants indicated that older widowed women often occupied marginal social positions within their communities and had limited influence over household and community decision-making. Some participants also reported experiences of neglect, verbal abuse, and reduced social interaction, particularly following the death of their spouses. Feelings of loneliness were frequently associated with declining health, reduced mobility, and the migration of adult children to urban centres or neighbouring countries in search of employment.

Overall, the findings demonstrate that the socio-economic challenges experienced by older widowed women were multidimensional and interconnected. Financial insecurity, food shortages, poor access to healthcare, caregiving responsibilities, and social exclusion collectively contributed to persistent vulnerability, highlighting the complex realities of ageing and widowhood in rural Zimbabwe. These findings also underscore the need for coordinated support systems that address both the immediate welfare needs and the longer-term resilience of older widowed women.

3.2 Formal and Informal Support Systems Available to Older Widowed Women

The findings revealed that older widowed women relied on a combination of formal and informal support systems to cope with the socio-economic challenges associated with ageing and widowhood. These support systems included assistance from family members, local communities, religious organisations, government social protection programmes, and non-governmental organisations. While participants acknowledged the importance of these support mechanisms, they consistently reported that support was often irregular, fragmented, and insufficient to meet their long-term needs.

Family members constituted the primary source of support for most participants. Adult children, grandchildren, and extended family members provided assistance in the form of food, financial contributions, agricultural labour, and emotional support. However, participants indicated that family assistance had become increasingly unreliable because many younger relatives were themselves experiencing unemployment and economic hardship or had migrated in search of employment. Consequently, support from family members was often occasional rather than consistent. One participant explained:

> *"Kana vana vangu vakawana mabasa vanotitumira zvishoma zvekudya kana mari, asi nguva zhinji vanenge vasinawo nekuti hupenyu hwakaoma kwese."*

This finding demonstrates that although family networks remain an important source of social support, their capacity to provide sustained assistance has been weakened by broader economic challenges.

Community support also emerged as an important resource for older widowed women. Participants described receiving assistance from neighbours, local leaders, churches, and community members during periods of illness, bereavement, or food shortages. Religious organisations were particularly valued for providing emotional encouragement, spiritual support, and, in some cases, material assistance such as food parcels or clothing. Participants emphasised that community solidarity helped reduce feelings of isolation and strengthened their ability to cope during difficult periods.

Government social protection programmes were identified as another source of support, although participants expressed mixed views regarding their effectiveness. Some older widowed women reported benefiting from food assistance and social welfare programmes, while others indicated that access was inconsistent and that available support rarely met their household needs. Delays in programme implementation, limited coverage, and resource constraints were frequently cited as barriers to effective assistance. Several participants felt that existing government interventions provided temporary relief rather than sustainable solutions to the socio-economic challenges they faced.

Support from non-governmental organisations (NGOs) was also acknowledged by participants, particularly through food distribution, livelihood projects, agricultural inputs, and community development initiatives. However, respondents noted that NGO assistance was often project-based and time-limited, resulting in discontinuity once projects came to an end. Participants expressed concern that many interventions focused on immediate humanitarian needs without providing sustainable livelihood opportunities capable of improving long-term wellbeing.

Overall, the findings indicate that older widowed women depended on multiple support systems operating at family, community, governmental, and organisational levels. Although these support mechanisms contributed significantly to addressing immediate needs, participants consistently perceived

them as fragmented, inconsistent, and insufficient to respond to the complex and interconnected challenges associated with ageing and widowhood. These findings highlight the importance of strengthening coordination among different stakeholders to improve the effectiveness and sustainability of support provided to older widowed women in rural communities.

3.3 Coping Strategies Adopted by Older Widowed Women

Despite experiencing multiple socio-economic challenges and limited institutional support, older widowed women demonstrated considerable resilience by adopting a range of coping strategies to sustain their livelihoods and meet their daily needs. The findings revealed that participants relied on livelihood diversification, subsistence farming, informal income-generating activities, social networks, religious participation, and community-based savings initiatives to navigate the challenges associated with ageing and widowhood. These strategies reflected participants' resourcefulness and determination to maintain their households despite persistent economic hardship.

Subsistence farming emerged as the most commonly reported coping strategy. Participants cultivated small plots of land to produce staple crops for household consumption and, where possible, for sale to generate modest income. However, many acknowledged that declining rainfall, poor soil fertility, shortages of agricultural inputs, and advancing age limited agricultural productivity. Although farming remained essential for household survival, participants noted that it no longer guaranteed adequate food security throughout the year.

In addition to farming, many participants engaged in informal income-generating activities to supplement household income. These activities included selling vegetables, poultry, firewood, traditional crafts, and other locally available products. Some participants undertook casual labour within their communities whenever opportunities arose. Although these activities generated limited financial returns, they provided an important source of income for purchasing food, medication, and other household necessities. One participant explained:

> *"Tinotengesa muriwo, huku kana huni kana zvawanikwa kuti tiwane mari yekutenga chikafu nezvimwe zvinodiwa mumba."*

The findings further showed that social relationships played a significant role in strengthening resilience. Participants relied on reciprocal support from relatives, neighbours, and friends during periods of financial hardship, illness, or food shortages. Informal exchanges of labour, food, and small financial contributions enabled many households to cope with temporary crises. These reciprocal relationships reflected strong community solidarity and mutual responsibility among rural households.

Religious faith also emerged as an important coping mechanism. Participants consistently described churches as sources of emotional comfort, hope, and social connectedness during periods of bereavement and economic hardship. Beyond spiritual encouragement, some religious organisations provided material assistance, including food, clothing, and counselling services. Participants explained that religious participation strengthened their resilience by helping them cope with loneliness, uncertainty, and emotional distress associated with widowhood.

Community-based savings and lending groups were identified as another important coping strategy. Participants who belonged to savings groups explained that regular financial contributions enabled members to access small loans, support income-generating activities, and respond to household emergencies. These groups also provided opportunities for social interaction, peer support, and collective problem-solving, reducing feelings of isolation while strengthening economic resilience.

Overall, the findings demonstrate that older widowed women actively employed diverse coping strategies to mitigate the effects of socio-economic vulnerability. However, participants consistently

emphasised that these strategies were primarily survival mechanisms rather than sustainable solutions to poverty and social exclusion. Their continued reliance on informal livelihood activities, community solidarity, and religious support underscores both the resilience of older widowed women and the limitations of existing formal support systems. These findings suggest the need for coordinated and sustainable interventions that strengthen community resources while improving access to comprehensive social protection and livelihood opportunities.

4. Discussion

4.1 The Interconnected Nature of Socio-Economic Vulnerability Among Older Widowed Women

The findings demonstrate that the socio-economic challenges experienced by older widowed women cannot be understood as isolated problems but rather as interconnected dimensions of vulnerability that reinforce one another throughout later life. Financial insecurity, food shortages, limited healthcare access, caregiving responsibilities, and social isolation collectively shaped participants' lived experiences, creating a cycle in which one challenge intensified another. For example, limited financial resources reduced participants' ability to access healthcare services, while poor health further diminished their capacity to engage in productive livelihood activities, thereby deepening poverty and food insecurity. Similarly, caregiving responsibilities for grandchildren increased household expenditure and emotional burden while simultaneously reducing opportunities for income generation. These findings suggest that socio-economic vulnerability among older widowed women is multidimensional and cumulative rather than episodic.

This finding is consistent with Ecological Systems Theory, which recognises that individual wellbeing is shaped by interactions among personal, familial, community, institutional, and wider socio-economic environments (Bronfenbrenner, 1979). Participants’ experiences show how vulnerability arose from the intersection of gender inequality, rural poverty, inadequate social protection, changing family structures, and unmet health and care needs (Djuikom & van de Walle, 2022; Hungwe, 2022; WHO Regional Office for Africa, 2025). The stigma and resource losses documented in wider African widowhood research further demonstrate that these disadvantages are cumulative rather than isolated (Odhiambo et al., 2025).

4.2 The Strengths and Limitations of Existing Support Systems

The findings demonstrate that although older widowed women benefited from multiple formal and informal support systems, these mechanisms were generally fragmented, inconsistent, and insufficient to address the multidimensional challenges associated with ageing and widowhood. Participants relied heavily on family members, neighbours, religious organisations, government social protection programmes, and non-governmental organisations to meet their immediate needs. However, the effectiveness of these support systems was constrained by economic hardship, limited institutional capacity, and weak coordination among service providers. As a result, available support frequently provided temporary relief rather than sustainable improvements in participants' wellbeing.

The continued importance of family support highlights the enduring role of kinship networks in rural Zimbabwe. However, broader economic pressures have weakened families’ capacity to provide consistent assistance. Evidence from rural South Africa and Ghana likewise shows that social support remains important for later-life wellbeing but is shaped by household resources, health, and network availability (Gyasi et al., 2019; Jennings et al., 2020). Family support therefore remains essential but cannot function as the sole pillar of social protection during prolonged economic instability.

Similarly, community structures, religious organisations, government programmes, and non-governmental organisations made important contributions to addressing participants' immediate needs through food assistance, psychosocial support, livelihood initiatives, and social welfare programmes. However, participants consistently reported that these interventions operated independently, with limited coordination, inconsistent coverage, and inadequate long-term sustainability. This fragmentation often resulted in duplication of some services while leaving other needs insufficiently addressed. Such findings suggest that institutional responses remain largely reactive, responding to immediate crises rather than addressing the structural conditions that perpetuate socio-economic vulnerability among older widowed women.

These findings support Ecological Systems Theory by illustrating that effective support for older widowed women depends not on the strength of individual institutions alone but on the quality of interactions among family, community, governmental, and organisational systems. The evidence indicates that meaningful improvements in wellbeing require coordinated and integrated support mechanisms capable of addressing the interconnected social, economic, health, and psychosocial needs of older widowed women. Consequently, the findings provide a strong empirical basis for moving beyond fragmented interventions towards a more comprehensive and collaborative community support approach.

4.3 From Coping to Resilience: Towards an Integrated Community Support Framework

The findings demonstrate that although older widowed women developed diverse coping strategies, these primarily enabled short-term survival rather than long-term resilience. Subsistence farming, informal income generation, reciprocal support, religious participation, and savings groups reflected agency, but remained constrained by poverty, declining agricultural productivity, inadequate healthcare access, and fragmented support. Wider evidence similarly links widowhood with adjustment challenges, loneliness, isolation, and health risks, while also showing that supportive relationships can strengthen adaptation (Anderson et al., 2023; Niino et al., 2025; Singham et al., 2021).

The relationship between the three major themes identified in this study suggests that socio-economic vulnerability, support systems, and coping strategies operate as interdependent rather than independent dimensions of wellbeing. Socio-economic challenges increase reliance on formal and informal support systems, while the effectiveness of these support systems directly influences the coping strategies available to older widowed women. Conversely, when institutional support is inadequate or poorly coordinated, participants become increasingly dependent on informal survival mechanisms that often provide only temporary relief. These findings indicate that improving the wellbeing of older widowed women requires interventions that simultaneously address structural socio-economic barriers, strengthen institutional support systems, and enhance individual and community resilience.

Ecological Systems Theory provides a useful framework for understanding these interconnected relationships by emphasising that individual wellbeing is shaped through continuous interaction between personal, family, community, institutional, and policy environments. The findings suggest that sustainable improvements cannot be achieved through isolated interventions targeting a single aspect of vulnerability. Instead, effective responses require coordinated action across multiple levels of the social environment, bringing together families, communities, government institutions, civil society organisations, and older widowed women themselves within an integrated support system.

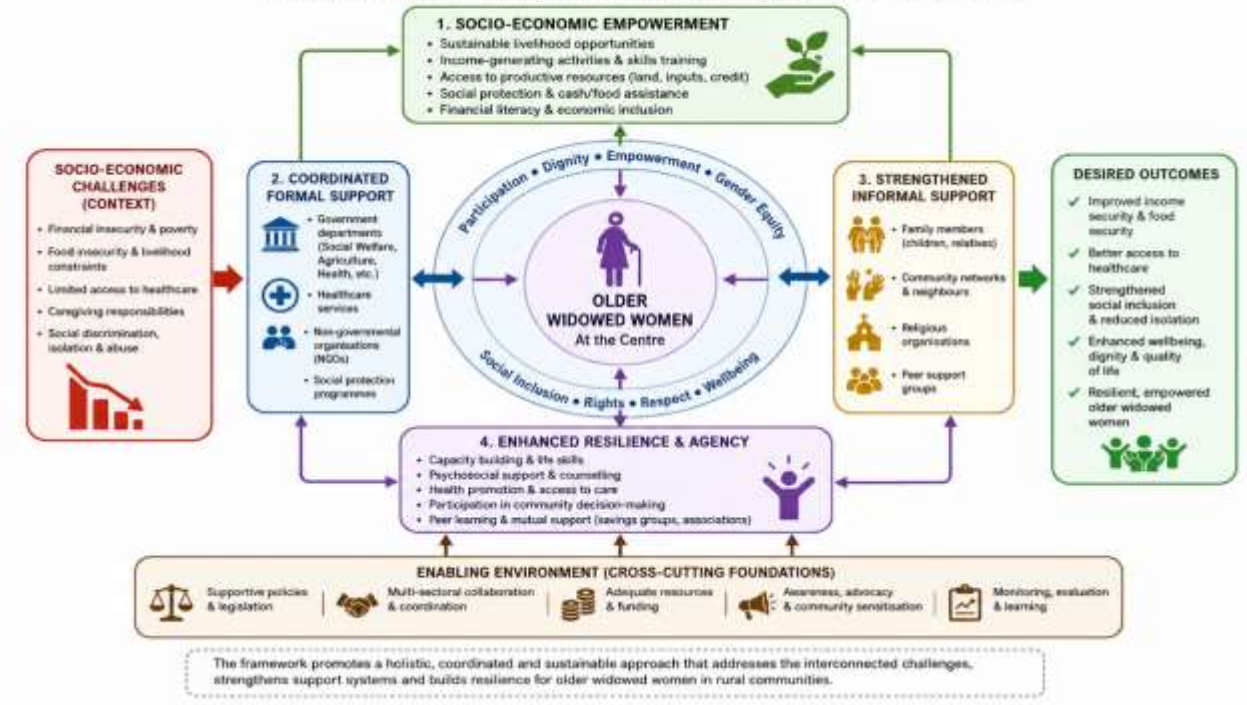
Drawing on these findings, this study proposes an Integrated Community Support Framework that positions older widowed women at the centre of coordinated community and institutional responses. The framework strengthens four interconnected components: socio-economic empowerment and social protection; coordinated formal support; strengthened informal networks; and resilience through participation, capacity building, and agency. This multi-level orientation is consistent with the Decade of

Healthy Ageing emphasis on person-centred, community-connected systems (WHO, 2020) and recent calls for gender-responsive social protection for older women (HelpAge International, 2024).

The proposed framework therefore extends existing approaches by shifting attention from fragmented service provision towards integrated community-based support that recognises older widowed women as active participants in their own wellbeing rather than passive recipients of assistance. In doing so, the framework provides a practical guide for social workers, policymakers, community leaders, and development organisations seeking to strengthen coordinated interventions that respond to the complex realities of ageing, widowhood, and rural poverty in Zimbabwe and comparable settings.

Figure 1: Integrated Community Support Framework for Older Widowed Women

A Multi-Level, Collaborative Approach to Promote Wellbeing, Resilience and Dignified Ageing



The framework demonstrates that improving the wellbeing of older widowed women requires coordinated rather than fragmented interventions. It positions older widowed women at the centre of interconnected support systems involving families, communities, government institutions, civil society organisations, and social work practitioners. The framework recognises that sustainable outcomes cannot be achieved through isolated interventions but depend on integrated efforts that simultaneously address socio-economic vulnerability, strengthen formal and informal support systems, and enhance individual and community resilience. As such, the framework provides an evidence-informed guide for policy development, programme design, and social work practice in rural settings.

5. Implications for Social Work Practice and Policy

The findings of this study have important implications for social work practice, social policy, and community development interventions aimed at improving the wellbeing of older widowed women in rural Zimbabwe. The study demonstrates that the socio-economic challenges experienced by older widowed women are multidimensional and require coordinated responses that extend beyond short-term welfare assistance. Addressing these challenges demands integrated interventions that recognise the interconnected nature of poverty, health, social exclusion, caregiving responsibilities, and limited livelihood opportunities.

For social work practice, the findings underscore the importance of adopting holistic, person-centred, and community-based approaches when working with older widowed women. Social workers should strengthen case management, psychosocial support, community mobilisation, and advocacy while facilitating collaboration among families, community structures, government departments, healthcare providers, and civil society organisations. Such coordinated approaches can improve access to available services while strengthening the resilience and social inclusion of older widowed women.

At the policy level, the findings suggest the need to strengthen existing social protection programmes by improving their accessibility, coverage, and sustainability. Policies should move beyond fragmented assistance programmes towards integrated systems that combine income support, healthcare, food security, livelihood development, and psychosocial services. Greater investment in community-based support initiatives and sustainable livelihood opportunities would enhance the long-term wellbeing and dignity of older widowed women living in rural communities.

The proposed **Integrated Community Support Framework** provides a practical guide for translating these findings into action. By promoting collaboration between government institutions, non-governmental organisations, community leaders, religious organisations, families, and older widowed women themselves, the framework offers an evidence-informed approach for strengthening coordinated support systems. Its implementation has the potential to improve resilience, reduce socio-economic vulnerability, and promote healthy, active, and dignified ageing among older widowed women in Zimbabwe and similar resource-constrained settings.

Conclusion

This study explored the socio-economic challenges, support systems, and coping strategies of older widowed women in rural Zimbabwe, revealing that their experiences are shaped by complex and interconnected forms of socio-economic vulnerability. The findings demonstrate that financial insecurity, food insecurity, limited access to healthcare, caregiving responsibilities, and social isolation collectively undermine the wellbeing and quality of life of older widowed women. Although participants benefited from support provided by families, communities, religious organisations, government programmes, and non-governmental organisations, these support systems were frequently fragmented, inconsistent, and insufficient to address their multidimensional needs. Consequently, many older widowed women relied on personal resilience and informal coping strategies, including subsistence farming, small-scale income-generating activities, reciprocal community support, religious participation, and savings groups, to sustain their households despite persistent hardship.

By demonstrating the interdependence between socio-economic challenges, support systems, and coping strategies, this study extends current understanding of ageing and widowhood beyond descriptive accounts of vulnerability. The findings informed the development of an **Integrated Community Support Framework**, which emphasises coordinated collaboration among families, communities, government institutions, civil society organisations, and older widowed women themselves. The framework provides an evidence-informed approach for strengthening social protection, improving service coordination, promoting sustainable livelihoods, and enhancing resilience among older widowed women in rural communities.

The study contributes to gerontological social work by highlighting the importance of integrated, community-based, and person-centred interventions that recognise older widowed women as active participants in their own wellbeing rather than passive recipients of assistance. While the framework was developed from evidence generated within a rural Zimbabwean context, its principles may also inform policy, practice, and future research in comparable low-resource settings seeking to strengthen coordinated support for older women experiencing socio-economic vulnerability.

Study Limitations

This study has several limitations that should be considered when interpreting its findings. First, the research was conducted in Chiwarira Village, Ward 5, Nyanga North District, and the findings are therefore context-specific. While the experiences reported by participants provide rich insights into the socio-economic realities of older widowed women in rural Zimbabwe, they may not be directly generalisable to other geographical settings with different socio-cultural and economic contexts.

Second, the study employed a qualitative research design, which prioritised an in-depth exploration of participants' lived experiences rather than statistical representativeness. Consequently, the findings should be interpreted as providing contextual understanding rather than population-level estimates. Future studies could adopt mixed-methods or comparative designs involving multiple rural districts to examine whether similar patterns exist across different settings.

Third, the study relied primarily on participants' self-reported experiences. Although measures such as prolonged engagement, triangulation of data sources, and member validation were employed to enhance the credibility of the findings, participants' accounts may have been influenced by recall bias or social desirability bias.

Despite these limitations, the study offers valuable empirical evidence on the interconnected socio-economic challenges, support systems, and coping strategies of older widowed women in rural Zimbabwe. The findings provide an important foundation for strengthening gerontological social work practice, informing social protection policies, and guiding the development of contextually relevant community-based interventions aimed at improving the well-being and resilience of older widowed women in similar rural settings.

Declarations

Ethics Approval and Consent to Participate

Ethical approval for this study was obtained from the relevant institutional ethics review committee prior to data collection. Permission to conduct the study was also obtained from the relevant local authorities in Nyanga District. All participants provided informed consent before participating in the study. Ethical principles of voluntary participation, confidentiality, anonymity, and the right to withdraw from the study at any stage without penalty were strictly observed throughout the research process.

Consent for Publication

Not applicable.

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Competing Interests

The authors declare that they have no competing interests.

Author Contributions

Livingson Moyo conceptualised the study, designed the methodology, conducted the fieldwork, analysed and interpreted the data, and prepared the original manuscript. All authors reviewed, revised, and approved the final version of the manuscript.

Data Availability

The datasets generated and/or analysed during the current study are available from the corresponding author upon reasonable request.

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