

## The Effectiveness of a Counseling program based on Acceptance and Commitment in Reducing the Existential Vacuum among Widows in Riyadh

Samiha Muqbil Abdullah Alharbi<sup>1</sup>, Yahya Mubark Suleiman Khatatbeh<sup>2</sup>

### Abstract

*This study aimed to identify the effectiveness of a counseling program based on acceptance and commitment to reduce the existential vacuum among widows. The study sample consisted of 18 widows randomly divided into an experimental and control group. A semi-experimental approach was applied to achieve the study objectives, the existential vacuum scale prepared by Demirtas (2018) which was translated and codified by the researcher, and a counseling program based on acceptance and commitment that involved eleven sessions of counseling, therapeutic, and rehabilitation for the target group.*

*The results indicated that there are statistically significant differences between the experimental and control groups, in the dimensional measurement on the scale of existential vacuum in favor of the experimental group, and between the averages of the experimental group scores and the control group in favor of the experimental group after two months of follow-up.*

**Keywords:** acceptance and commitment, existential emptiness, widowed women.

### 1. Introduction

The existential vacuum is one of the most important problems that widows currently face as the existential vacuum is an individual's experience of their life's lack of meaning and the purpose of their existence which creates a vacuum (Frankl, 1984). The Loomba Foundation (2015), estimates that there were 21 million widows globally in 2015, an increase of 9% compared to 2010. Many studies have indicated that experiences of sadness, anxiety, and depression lead to health problems in general and that widowed women are most affected by these experiences. Thakur and Basu (2010) stated that depression is associated with the loss of meaning from life, and awareness of meaninglessness leads to the emergence of an existential vacuum. Many studies have proven the existence of an existential vacuum in widowed women, such as Ali's (2015) study, which proved that it is due to the feelings of emptiness and uselessness that widowed women feel in most aspects of their lives. The numerous problems and crises faced by widows and the monotony of the surrounding environment may push them to live a life devoid of meaning and value, which completely affects all aspects of their neighborhood. Al-Kishki et al. (2020) believe that the existential vacuum is likely to involve two aspects, a person's feeling of inability to achieve the meaning they aspire to or the inappropriateness of the meaning they embrace for the new stage and roles. The

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<sup>1</sup> Student, Department of Psychology, Faculty of Social Sciences, Imam Mohammad Ibn Saud Islamic University (IMSIU), Smalharbi@imamu.edu.sa

<sup>2</sup> Department of Psychology, Faculty of Social Sciences, Imam Mohammad Ibn Saud Islamic University (IMSIU), ymkatatbh@imamu.edu.sa

existential vacuum is an emotional experience with a cognitive and mental impact on the widow, so she needs health, psychological, and social support to deal with this experience (Sekgobela et al., 2020). A review of the theoretical frameworks that dealt with the problems of women in general, and the problems of the widow in particular, found that a widow suffers from several psychological and social problems. Recently, several theories have emerged that contribute to the introduction of counseling programs for this category, including Acceptance and Commitment Counseling, a type of cognitive behavioral counseling that improves the symptoms in people with deep grief and is particularly suitable for older people (Wetherell et al., 2011).

## **2. Theoretical and previous studies**

### Acceptance and Commitment

Counseling for acceptance and commitment is referred to as a "third wave" or "new wave" for psychotherapy, whereby the "first wave" refers to classical adaptation and behavioral approaches based on active learning developed in the fifties. The "second wave" therapies focused further on information processing, more specifically, cognitive processes as well as the principles of behavioral learning. The "third wave" therapies share the basics with these previous approaches but extend in other directions by type (Hayes, 2004). From the perspective of counseling for acceptance and commitment, the essence of mental illness is inflexibility, and what sets it apart is the content, accuracy, and scope of its analysis of why inflexibility occurs and what to do about it. From the perspective of this treatment, the blessing and curse of human existence is language, as the natural processes of human language tend to attract people to psychopathology. People can find a healthier balance by learning new ways of verbal events (Luoma et al., 2017). Acceptance and commitment counseling, as an intervention, differs from other therapeutic approaches because it does not rely on a symptom reduction model but rather has the main goals of increasing value-based behaviors, and skillfully managing the internal obstacles that arise in the process (Bennett & Oliver, 2019). Treatment with acceptance and commitment aims to:

1. Focus on acceptance: A person's increased acceptance of their circumstances, persistent thoughts in their mind, and their struggle with symptoms can lead to increased psychological resilience.
2. Encourage gaining insight into thought patterns, avoidance patterns, and the presence or absence of behavior consistent with chosen life values (Luoma et al., 2017).
3. Treatment of generalized anxiety disorders, depression, eating disorders, chronic pain, and substance use disorders (Roemer et al., 2009).
4. Minimizing the person's struggle to control or eliminate unpleasant internal experiences.
5. Increase participation in meaningful life activities, and those that align with personal values (Luoma et al., 2017).

### The Existential Vacuum

The existential vacuum is one of the basic concepts in existential theory which believes that a person is vulnerable at any period of their life to be infected with it, and when the individual complains about their lack of meaning, this is evidence that they suffer from emptiness. The cause of the existential vacuum is the dependence that results from excess, exaggeration, forced or fatalistic view of life, lack of achievement, and lack of planning for life, which results from laziness, frustration, and lack of confidence in life, as well as collective thinking that results from marginalization and avoidance of bearing responsibility, and self-intolerance that results from excessive freedom and neglect of

others (Brethen, 2011). Suffering from existential emptiness does not mean neurosis, or be diagnosed as a clinical disorder, all these symptoms are by no means pathological in themselves, they are rather normal reactions of man, and if there are important symptoms, it is a socially generated disorder resulting from a spiritual problem, where other adverse behaviors rush into this void (spiritual emptiness). Alcohol, all kinds of substances, substance abuse, and significant risks to life and health all increase the risk of potential disorders, such as addiction, depression, anxiety, and suicide (Devivere, 2018). If one does not succeed in discovering the meaning of their life, this life becomes of little value, and it becomes absurd for one to exert oneself in enduring difficulties. The meaning of life is not a ready-to-use conception, but rather a discovery that one can only reach through a research process that begins from the moment one feels that one's life is devoid of meaning and purpose, or when one suffers from existential emptiness or loss of the meaning of life (Maamaria, 2012). Problems experienced by people with emptiness and existentialism include a feeling of boredom and boredom due to the monotonous lifestyle, a sense of despair and frustration for the lack of purpose in life, depression as a prominent indicator of existential emptiness, loss of order and commitment to carry out life tasks and the control of suicidal thoughts (Abdullah, 2012). Viktor Frankl believes that the existential vacuum phenomenon is widespread in the twentieth century, and reveals that it is basically a state of boredom. Multiple manifestations appear by the existential vacuum and may occur as compensation for the will of meaning frustrated will of force, or replace the will of pleasure frustrated will of meaning (Frankl, 1974, 1982). He also believes that the existential vacuum is the result of individuals, unlike the animals, having no motives or instincts to tell them what to do, or customs and traditions, Man doesn't even know what he wants to do, and instead wants to do what others do, or do what others want (Frankl, 1988). When an individual finds themselves in an inevitable situation, then they must face the unchangeable, and have the opportunity to achieve the higher value and the deepest meaning of life, which is the meaning of suffering, and suffering can only have meaning if it is absolutely necessary and indispensable (Frankel, 1974, 1982).

#### Widows

When the family is disintegrated by the loss of a husband, it is considered a transitional event affecting the widow because this loss is accompanied by high levels of psychological distress and difficulties in adjusting to a new life without a husband. Some widowed women may exhibit hostile and harmful behaviors, such as constant crying, feeling excessively sad and anxious, acting angrily, social incompatibility with others, inclination to hostility, ease of anger, tendency to retreat into one's self, apathy, unwillingness to see meaning and value in life; disconnection from society, and sleeping too much (Eremie et al., 2012). Reports issued by the United Nations (United Nations, 2020) stated that there are more than 258 million widows globally. Widowed women in the current study are defined procedurally as women who lost a husband due to different causes, who did not marry after his death, who are not widowed for more than seven years, and who refer to the Ayami Association for the Care of Widows and Divorced Women. There are many psychological and social problems that women suffer from, as widowhood affects their level of social and psychological adaptation. Moreover, widows with medium and low incomes tend to use the negative coping method when facing the pressures of daily life (Shirawi, 2012).

A widow may experience various psychological problems such as the feeling of abandonment, because, after the death of her husband, her relationship with those around her changes, and they stay away from her because it constitutes an additional burden and responsibility on those around her. Also, she may feel psychological alienation and loss of friendliness because she feels painful feelings and is in a state of non-acceptance and lack of love for others. The feeling of personal isolation increases, which is represented by withdrawal and unwillingness to mix with society (Khreisat, 2020).

### **3. Previous studies**

Al-Attafi (2014) identified the effectiveness of a cognitive-behavioral counseling program in reducing psychological loneliness among working and non-working widows. The study sample consisted of twenty widows randomly distributed into two groups: experimental and control. The experimental group underwent twelve training sessions lasting 45 minutes each. The results indicated the effectiveness of a cognitive-behavioral counseling program to reduce the psychological loneliness of the widows. Barakat's study (2017) aimed to identify the effectiveness of a collective counseling program based on cognitive-behavioral therapy and story therapy to reduce anxiety and depression among widows and divorced women. The study sample consisted of forty widows and divorcees randomly distributed into two groups: experimental and control. The program consisted of fourteen training sessions lasting 90–120 minutes, and the results showed the effectiveness of a group counseling program based on cognitive-behavioral therapy and story therapy to reduce anxiety and depression. Azimi et al. (2018) compared the effectiveness of therapy with acceptance, commitment, and meaning therapy on symptoms of depression, anxiety, and stress in women with relapsing MS. The study sample consisted of forty-five women randomly distributed into three groups: an experimental group to which acceptance and commitment therapy was provided, a second experimental group to which meaning therapy was provided, and a third control group. The Admission Therapy Program and commitment consisted of eight sessions, the existential therapy program involved ten treatment sessions, while the control group had eight simple group meetings without therapeutic intervention. The results indicated that treatment acceptance, commitment, and treatment in the sense are effective in reducing symptoms of depression, anxiety, and stress, this improvement continued beyond three months, and there was no difference between the two treatment types.

Covington (2018) identified the feelings of grief and loss experienced by widows who underwent psychological counseling to address the impact of losing a husband for 12–48 months before the start of the study. The study sample consisted of eight widows aged 21–80 years in the US state of North Carolina. The study indicated that widows seek psychological counseling because of the tangible need for guidance, or help in dealing with the new situation resulting from the loss of their husband. Also, counseling psychology is useful when it facilitates or allows a widow to share her emotions and feelings with others, enables her to overcome this loss, and fuels her personal growth. Davies (2018) used acceptance and commitment therapy to work on increasing psychological flexibility, well-being, and job performance among people who are on the waiting list in psychiatric clinics. The study sample consisted of seven people and involved ten training sessions of 45 minutes. The results indicated that of those who completed the treatment sessions (3), two had a significant clinical improvement in flexibility, well-being, and functionality.

Fallahchai (2019) compared the effectiveness of cognitive-behavioral therapy, acceptance, and commitment therapy in raising the emotional self-efficacy of women who care for their families. The study sample consisted of forty-five women randomly distributed to three groups: two experimental groups and a control group. The first experimental group underwent cognitive behavioral therapy and the second experimental group underwent acceptance therapy. The nine program sessions lasted 90 minutes each. The results indicated the effectiveness of acceptance and commitment therapy in raising the emotional self-efficacy of the study members. Mohidat (2019) aimed to identify the effectiveness of rational emotional behavioral therapy in improving the quality of life and reducing feelings of loss and future anxiety among a sample of thirty widowed women. The program consisted of twenty sessions of 90–120 minutes duration. The study confirmed the effectiveness of rational emotional behavioral therapy in improving the quality of life and reducing feelings of loss and future anxiety among widows.

The Badr study (2021) aimed to identify the effectiveness of a group counseling program based on acceptance and commitment therapy in reducing symptoms of depression, anxiety, and a sense of inferiority in a group of divorced Saudi women. The study sample consisted of eight divorced women who underwent sixteen four-hour sessions interspersed with two rest periods. The results indicated the effectiveness of treatment with acceptance commitment to reducing symptoms of depression, anxiety, and feelings of inferiority, with continued improvement after three months. Akbarinejhad and Faroughi (2021) compared the effectiveness of acceptance therapy, commitment, and meaning therapy in improving the level of psychological well-being and reducing death anxiety in women with AIDS. The study sample consisted of thirty women randomly distributed into three groups: two experimental groups and a control group. The program involved eight treatment sessions of 90 minutes. The results indicated the effectiveness of treatment in raising the level of psychological well-being and reducing death anxiety. The treatments led to the acceptance of the disease and conscious acceptance of death anxiety, thereby helping the women to cope better with the disease.

#### **4. Study problem**

Widowhood is one of the most influential events experienced by adults and widowed women are more likely to develop major depression than male widows (Bharathi et al., 2015). Given the results of previous studies that indicated that widows suffer from psychological problems and multiple social pressures, the current study focused on answering the following questions:

H1 differences between the experimental and control groups in reducing the existential vacuum before and after the implementation of a counseling program with acceptance and commitment.

H2 differences between the experimental and control groups in reducing the existential vacuum after the application of the counselor-based program with acceptance and commitment, and a period after its application.

#### **5. Methodology**

##### **5. 1. Population and Participants**

To achieve the study objectives, a semi-experimental design was used to identify the effectiveness of a counseling program based on acceptance and commitment counseling in reducing the existential vacuum of widowed women. The study population was widowed women (69,432) in the city of Riyadh in the Kingdom of Saudi Arabia (General Authority for Statistics, 2017) and the study sample consisted of eighteen widows who lost their husbands as a result of death and did not remarry, with different causes of death and the duration of widowhood. The participants were chosen intentionally from 2853 widowed women according to the Ayami Association for the Care of Widows and Divorced Women in the city of Riyadh. The existential vacuum scale was applied to 70 widows and those women who obtained a high score and were willing to participate in the study program, who did not marry after the death of their husband, and who had not been widowed for more than seven years were recruited to the study. The participants were randomly distributed to the experimental and control groups with nine widows in each group, and their demographic characteristics are shown in Figure 1.

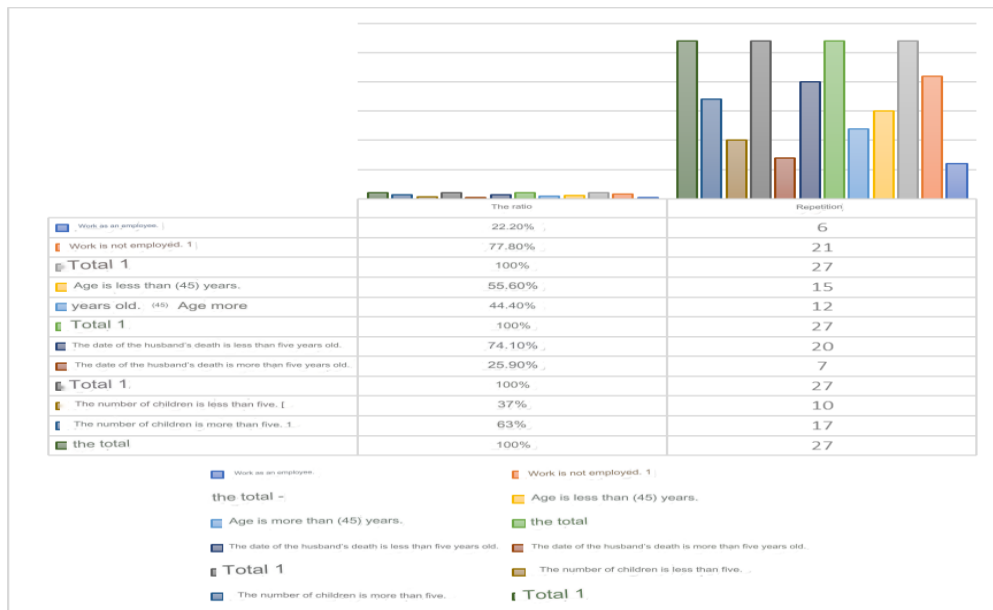


Figure 1 Demographic characteristics of the study participants

The study sample consisted of six employees (22.2%) compared to twenty-one non-employees (77.8%), probably because of the old age of widowed women, the desire to stay at home, the interest in their children and their needs in the event of a stable financial income for them, and the difficulty of obtaining a job. Regarding age, fifteen widows were under 45 years of age (55.6%) compared to twelve widows aged over 45 years (44.4%). Ten widows had fewer than five children (37%) compared to seventeen widows with more than five (63%). The researcher believes that this is commensurate with employment, as the more children, the more the mother needs to pay attention to them and their requirements.

## 5. 2. Measurement

### 5.2.1. Existential vacuum scale

The existential vacuum scale of Demirtas (2018) was applied in this study and consists of twenty-seven items in four dimensions, namely seven items regarding the feeling of internal emptiness, eight items regarding the feeling of spiritual emptiness, eight items regarding the feeling of connection, and four items of the feeling of loss of meaning. The participants were asked to score the scale as follows: 0 it does not apply to me at all, 1 it applies to me a little, 2 it applies to me some of the time, 3 it applies half of the time, 4 it applies to me a lot, 5 it applies to me most of the time and 6 it applies to me all the time. The highest combined score was 162 and indicated a very high feeling of existential emptiness, while the lowest score of 0 means there is no feeling of existential emptiness at all.

The authenticity of the instrument was verified using the validity of internal consistency, with the correlation coefficients ranging between 0.76 and 0.91, and the correlation value of each dimension with the total score was 0.95-0.89-0.89-0.94, indicating that the scale has a good level of validity. The exploratory factorial honesty was used for the statements of the scale, which proved that the scale has high truthfulness and the Cronbach alpha coefficient was 0.98. Half-hash was also used, and the degrees of half-hash in dimensions ranged between 0.96 and 0.94, while the total value was 0.90, so the scale and its dimensions have a high level of stability.

### 5. 2 .2. Honoring the Acceptance and Commitment Counseling Program

The program was developed after reviewing several theoretical studies and knowledge frameworks on the theoretical foundations of building the program (Barakat, 2017;

Hamad, 2015; Al-Tus, 2016; Al-Emotional, 2014; Mahidat, 2019; Eremie et al., 2012; Covington, 2018), counseling based on acceptance and commitment (Davies, 2018; Fallahchai, 2019), and studies based on acceptance and commitment in reducing existential void or improving life management skills (Badr, 2021; Titi et al., 2018; Azimi et al., 2018; Akbarinejhad & Faroughi, 2021). Thus, the counseling program consisted of eleven sessions each lasting sixty minutes, with two sessions per week distributed as follows: an introductory session to build trust, identify the axes and titles of the counseling program sessions, as well as the nature of the problem, and applying the pre-measurement of the existential vacuum scale; eight sessions applying the counseling techniques based on acceptance and commitment according to the session objectives; the termination, evaluation, and post-application session; final follow-up session and application of the tracking scale. of the experimental group.

The program was designed based on several guiding techniques (Bennett & Oliver, 2019) on which counseling is based on acceptance and commitment, such as lectures, discussion and dialogue, homework, formal sanity training, sky and weather training, tug of war training, Chinese finger trap training, and training the best ten minutes, training values, goals and procedures, training both sides of the paper, and training the miracle question as an alternative

## 6. Results

The comparison of the intervention and control groups using the Mann-Whitney test revealed statistically significant differences between the two groups (Table 1). The average ranks of widowed women on the scale of existential emptiness and its dimensions had a value of z for the total score of 3.60, while the value of z for the dimensions of inner emptiness, spiritual emptiness, feeling of disconnection, and feeling of loss of meaning were 3.58, 3.58, 2.96, and 3.42, respectively and there were statistically significant ( $p=0.01$ ) in favor of the counseling group. Based on acceptance and commitment, the scores of the group of widows who received guidance with acceptance and commitment decreased on the scale of existential emptiness and its dimensions compared to the control group that did not receive counseling skills, and its scores are still high on the scale of existential vacuum.

Table 1 Comparison of the existential vacuum dimensions of both groups using the Mann-Whitney test

Dimension	The Collection	N	Average ranks	Sum of squares	Z	Sig
After the internal space	Guidance Acceptance and Commitment	9	5.00	45.00	3.58	0.000
	Control group	9	14.00	126.00		
After the spiritual emptiness	Guidance Acceptance and Commitment	9	5.00	45.00	3.58	0.000
	Control group	9	14.00	126.00		
After feeling disconnected	Guidance Acceptance and Commitment	9	5.78	52.00	2.96	0.003
	Control group	9	13.22	119.00		
After feeling lost meaning	Guidance Acceptance and Commitment	9	5.28	47.50	3.42	0.001
	Control group	9	13.72	123.00		



The overall score of the existential vacuum scale	Guidance Acceptance and Commitment	9	5.00	45.00	3.60	0.000
	Control group	9	14.00	126.00		

The comparison between the guidance group with acceptance and commitment and the control group on the scale of existential vacuum and its dimensions at the two-month follow-up using the Mann-Whitney test is shown in Table 2.

Table 2 Comparison of the guidance group Acceptance and commitment and the control group on the scale of existential vacuum and its dimensions in the follow-up measurement

Dimension	The Collection	N	Average ranks	Sum of squares	Z	Sig
After the internal space	Guidance Acceptance and Commitment	9	5.44	49.00	3.23	0.001
	Control group	9	13.56	122.00		
After the spiritual emptiness	Guidance Acceptance and Commitment	9	5.44	49.00	3.23	0.001
	Control group	9	13.56	122.00		
After feeling disconnected	Guidance Acceptance and Commitment	9	6.89	62.00	2.08	0.03
	Control group	9	12.11	109.00		
After feeling lost meaning	Guidance Acceptance and Commitment	9	5.72	51.50	3.01	0.003
	Control group	9	13.28	119.50		
The overall score of the existential vacuum scale	Guidance Acceptance and Commitment	9	5.00	45.00	3.58	0.000
	Control group	9	14.00	126.00		

There were statistically significant differences between the two groups in the average ranks of widowed women on the existential vacuum scale and its dimensions at the two-month follow-up. The value of z for the total score was 3.58, and the value of z for the dimensions of inner emptiness, spiritual emptiness, and feeling of loss of meaning were 3.23, 3.23, and 3.01, respectively and statistically significant ( $p=0.01$ ), while the value of z for the dimension of feeling disconnected was 2.08 ( $p=0.05$ ), all of which are in favor of the counseling group with acceptance and commitment, as this group had the lowest measures of feeling existential emptiness at follow-up. This indicates the effectiveness of the counseling program two months after completion in reducing the existential vacuum among the widows in comparison to those who did not receive any guidance.

## 7. Discussion

Widows experience suffering from the loss of their husbands in addition to feelings of loneliness and sadness associated with this loss, as they have lost the person they are dependent on in many aspects of their lives. The shock results from suddenly finding themselves assigned many important responsibilities, as well as the psychological and social pressures resulting from her endurance, all of which contribute to their lack of acceptance of this suffering. They must accept this new status and deal with it effectively



until its existential vacuum decreases. This is consistent with what Maamaria (2021) stated that when a widow loses her husband, she goes through suffering that she cannot get rid of, but suffering may cease to be so in some way the moment suffering acquires meaning, such as the meaning of sacrifice. Counseling based on acceptance and commitment is based mainly on principles that help the individual to accept suffering and the circumstances in which they live, and to accept the positive and negative experiences to increase their psychological resilience (Luoma et al., 2017). An individual's increased acceptance of their circumstances, persistent thoughts in their mind, and struggle with symptoms will lead to increased psychological resilience. This result can be explained by many factors related to the efficiency of the counseling method and its techniques which helped the participants in the counseling program to increase their psychological resilience, as well as learn some methods and discover them in their thoughts and experiences about the suffering they experienced, and the meaning and purpose of their lives. The effectiveness of this counseling program in reducing the existential vacuum can be explained by the hexagonal model of psychological resilience, which focuses on several processes, including openness consisting of acceptance and non-integration, as it describes an open attitude towards the widow's internal experiences due to the loss of her husband to reduce the internal conflict resulting from the sudden responsibilities that she is forced to bear as a result of widowhood.

The awareness that widows experienced in the counseling sessions also indicates an increased ability to connect with the present through openness and awareness of their status as widows and the judgments of society that may be imposed on them rather than controlling the feelings and painful experiences of the past or the fears and anxiety of the future. Acceptance is one of the principles of counseling based on acceptance and commitment, which results in openness to different experiences and allowing them to be the same. Bennett and Oliver (2019) stated that acceptance focuses on behavioral more than emotional traits, acceptance reduces the chances of multiplying perceived problems, leaving more energy to do the things that are important in life. Several techniques and counseling exercises were used in this mentorship program including Chinese finger trap and tug-of-war training.

#### Limitations

The limitations of this pilot study are represented in its variables (counseling based on acceptance and commitment, existential vacuum) conducted on widows in the city of Riyadh who frequented the Ayami Association for the Care of Widows and Divorced Women and agreed to participate in the current study. After observing the number of women who attended the association for three months, this study was conducted during the winter of 2022 over three months. The tools were applied after checking their psychological characteristics, therefore, generalization of the results is limited to the category in which this study was conducted.

#### Recommendations

The following recommendations were made based on the study results:

1. Benefiting from the applied skills in the current study tools to train widows and qualify them in associations that provide psychological services for this category.
2. Creating support programs for newly widowed women to help reduce the psychological and moral impact of losing a husband.
3. Designing psychological and social counseling programs for the children of widows, emphasizing the importance of their role in the life of their mother (widow).

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