The Cognitive Health of Widows in the United States

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Problem Statement

In the United States, more than 900,000 older adults are widowed each year. Losing a spouse is considered one of the most stressful life events, ^{2,3} one that is predominantly experienced by older women. ⁴⁻⁶ About 30% of women aged 60 to 74 years are widowed, ⁵ and over 40% of women aged 65 years and older are widowed compared to only 13% of men aged 65 and older. ⁶ Women typically live another 15 years after the loss of their spouse ⁵ and face aging-related challenges without their life companion. ²

The loss of a spouse can be a very isolating experience,^{4,7} leaving the surviving partner to grieve not only the death of a loved one but also the loss of their planned life as a couple.⁷ Since women tend to outlive male partners, this primarily affects widows. The transition to widowhood entails the process of grieving and the need to adjust to a new livelihood² as well as challenges related to loneliness. This significantly stressful life event can also negatively affect social connections, life satisfaction, and mental health.⁷ Through the increased stress and changes, spousal loss also affects the cognitive health of older adults.³

Status of Literature

Several studies have confirmed that older widows experience poorer cognition and accelerated decline in their cognitive function.^{8-10, 1, 11-13} Assessing cognitive health is a complicated process,⁴ but various explanations exists.

First of all, the loss of a spouse can be detrimental for

the brain because it may result in dysregulation of the hypothalamic-pituitary-adrenal axis.³ Secondly, this loss commonly increases depressive symptoms and may cause major depressive disorder.^{14,12,3} Lastly, spousal loss usually means the loss of one of the most important social contacts—a critical source of daily cognitive stimulation—which may accelerate cognitive decline.^{2,3,13}

Cognitive interventions may target those who have been recently widowed.¹ As widowed women navigate through the process of rebuilding their social world, social leisure activities (SLA) may help maintain cognition and better adjust to life during widowhood.^{2,7} SLA can be defined as important determinants of health and well-being for older adults that encompass a variety of activities and shared experiences.^{7,15} These activities can be physical or cognitive, such as attending a church, group, or organization meeting; visiting with friends or family members; participating in a fitness class; sharing interests with a group; going out for dinner or shopping; or walking and hiking outdoors.¹⁵

Social leisure can play an integral role in the coping process for widowed women by allowing them to find distraction, new paths forward, and social groups where they can discover and build a sense of community. In one study, leisure provided widowed women with a safe space to explore the adjustment to widowhood and learn from other women who have already been living this lifestyle. This sense of understanding and peer-mentorship created hope for recently widowed women that their loss may not be painful forever and that they could live a meaningful and pleasurable life.⁷

Call to Action

The growing large number of older widows suffering from cognitive decline poses a heavy burden currently not met by sufficient attention and policy interventions.¹³ It is crucial to find ways for widows to maintain cognitive functioning.²

SLA provide a protective role for widowed women and may serve as a coping strategy to preserve cognitive functioning.² Given the research and findings, interventions at community and policy levels that encourage social involvement and engagement in cognitive activities for older widowed women should be favorably supported.^{2,7} Social workers, program directors, and other community leaders should be engaged in efforts that promote, advocate, and implement these types of community-based programs for widowed women.⁷

References

- 1. Singham, T., Bell, G., Saunders, R., & Stott, J. (2021). Widowhood and cognitive decline in adults aged 50 and over: A systematic review and meta-analysis. Ageing Research Reviews, 71.
- 2. Lee, Y., Chi, I., & A. Palinkas, L. (2019). Widowhood, leisure activity engagement, and cognitive function among older adults. Aging & mental health, 23(6), 771-780. doi: 10.1093/geroni/igy023.642
- 3. Wörn, J., Comijs, H., & Aartsen, M. (2020). Spousal loss and change in cognitive functioning: An examination of temporal patterns and gender differences. The Journals of Gerontology: Series B, 75(1), 195-206. doi: 10.1093/geronb/gby104
- 4. Frost, C. J. & Digre, K.B. (2016). The 7 domains of women's health: Multidisciplinary considerations of women's health in the 21st century. Dubuque, Iowa: Kendall Hunt Publishers.
- 5. Høy, B., & Hall, E. O. (2020). "Take good care of yourself" An integrative review of older widows' self-care for health and well-being. Journal of women & aging, 1-30. doi: 10.1080/08952841.2020.1753484
- 6. Konigsberg, R. D. (2017). Grief, bereavement, mourning the death of a spouse. https://www.aarp.org/caregiving/basics/info-2017/truth-about-grief.html
- 7. Standridge, S. H., Dunlap, R., Kleiber, D. A., & Aday, R. H. (2020). Widowhood and leisure: An exploration of leisure's role in coping and finding a new self. Journal of Leisure Research, 1-17. doi: 10.1080/00222216.2020.1844553
- 8. Liu, H., Zhang, Y., Burgard, S. A., & Needham, B. L. (2019). Marital status and cognitive impairment in the United States: Evidence from the National Health and Aging Trends Study. Annals of epidemiology, 38, 28-34. doi: 10.1016/j.annepidem.2019.08.007
- 9. Shin, S. H., Kim, G., & Park, S. (2018). Widowhood status as a risk factor for cognitive decline among older adults. The American Journal of Geriatric Psychiatry, 26(7), 778-787. doi: 10.1016/j.jagp.2018.03.013
- 10. Shin, S. H., Behrens, E. A., Parmelee, P. A., & Kim, G. (2021). The role of purpose in life in the relationship between widowhood and cognitive decline among older adults in the US. The American Journal of Geriatric Psychiatry. doi: 10.1016/j.jagp.2021.07.010

- 11. Sommerlad, A., Ruegger, J., Singh-Manoux, A., Lewis, G., & Livingston, G. (2018). Marriage and risk of dementia: Systematic review and meta-analysis of observational studies. Journal of Neurology, Neurosurgery & Psychiatry, 89(3), 231-238.
- 12. Vable, A. M., Subramanian, S. V., Rist, P. M., & Glymour, M. M. (2015). Does the "widowhood effect" precede spousal bereavement? Results from a nationally representative sample of older adults. The American Journal of Geriatric Psychiatry, 23(3), 283-292. doi: 10.1016/j.jagp.2014.05.004
- 13. Xiang, N., Liu, E., Li, H., Qin, X., Liang, H., & Yue, Z. (2021). The association between widowhood and cognitive function among Chinese elderly people: Do gender and widowhood duration make a difference?. Healthcare 9(8), 991. doi: 10.3390/healthcare9080991
- 14. Kristiansen, C. B., Kjær, J. N., Hjorth, P., Andersen, K., & Prina, A. M. (2019). The association of time since spousal loss and depression in widowhood: A systematic review and meta-analysis. Social psychiatry and psychiatric epidemiology, 54(7), 781-792. doi: 10.1007/s00127-019-01680-3
- 15. Talmage, C. A., Coon, D. W., Dugger, B. N., Knopf, R. C., O'Connor, K. A., & Schofield, S. A. (2020). Social leisure activity, physical activity, and valuation of life: Findings from a longevity study. Activities, Adaptation & Aging, 44(1), 61-84. doi: 10.1080/01924788.2019.1581026