# Patterns of Widowhood Mortality

### **Research Questions**

1. Why do widows face a higher mortality risk than married individuals of the same age?

2. Do the same factors predict mortality among the married and the widowed?

### Background

-Death of a spouse increases probability of death for the surviving spouse, relative to same aged married women or men.

-3 pathways may mediate the effect of widowhood on mortality: -Social Support: High levels of social support are associated with lower mortality. The most important support is often a spouse, or possibly children.

-Education: Education is associated with longer life. However, previous research does not find that higher levels SES are protective against mortality among widows.

### -Psychosocial Factors

-Role theory: The surviving spouse struggles to compensate for lost material & task support, raising mortality risk. -Caregiver burden: Caring for an ill spouse increases

- mortality risk after the death of a spouse.
- -Grief: The "broken heart" hypothesis links becoming widowed to a decline in health of surviving spouse.

### Data & Methods

-Data are from the Health and Retirement Study (HRS) -Sample restricted to the 1992 recruitment cohort and their spouses -Sample further restricted to include only those respondents married at baseline in 1992 -Follow-up information extends through Wave 9 (2008) for a maximum of 16 years -Method is Cox proportional hazard models -Respondents enter analysis at age of first interview -Observation continues until age at last interview, age at divorce, or age at death -All models control for age & race/ethnicity -Marital status is a time-dependent variable -Key predictors include years of education, number of

children, and type of spouse death (classified based on information from the exit interview)

# **Kaplan-Meier Survival Estimates**



### **Descriptive Statistics, HRS Sample**

Mean or Proportion (s.d.)

Demograph % Male

Age at e Race/Et

Whit

Black

Hisp

Othe

Number % child

Years of Edu

Baseline sel

Became wid

**Final Status** 

Dead

Died

Died

	Married Respondents	
	n=9,955	
nic Characteristics		
	49.8%	
entry	55.6 (6.0)	
hnicity		
e	77.1	
<	12.0	
anic	8.8	
er/Missing	2.2	
r of children	3.5 (2.1)	
ess	4.4	
ucation		
If-rated health=fair or poor	19.7	
dowed	1,532	
S		
	1845	
married	1631	
widowed	214	

### Question 1: Widows' Mortality

	Model 1	Model 2:	Model 3: Model 2+ Education	Model 4: Model 3+ Health
		Model 1 + Children		
Marital Stat.				
(ref=married)				
Widowed	1.47***	1.45***	1.41***	1.32***
Gender				
(ref=male)				
Female	0.56***	0.56***	0.56***	0.57***
Children^				
0		1.55***	1.55***	1.41***
1		1.39**	1.37**	1.26*
2-3		Ref	Ref	Ref
4		1.14	1.12	1.09
5+		1.27***	1.18**	1.12
Yrs of Education			0.94***	1.00
SR Health <sup>^</sup>				
Good+				Ref
Fair or poor				5.32***
generalized R <sup>2</sup>	1.6	2.0	2.6	12.8

^denotes time-varying

-Children do not explain the disadvantage of widows.

disadvantage of widows.

-Health explains an additional 22% of the mortality disadvantage of widows.



-Education explains only a modest portion (~10%) of the

## **Question 2: Mortality Predictors**

Factor	Interaction with Widowho
Gender	No
Number of Children	No
Years of Education	No
Health	Yes

-Contrary to expectations, the effects of gender, children, and education on mortality are not different for widows compared to married people.

-Health interacts with marital status, such that being in fair or poor health is less harmful for widows that it is for married individuals.



-Men and women respond differently to whether the decedent spouse's death was anticipated or unanticipated.

-Consistent with predictions from role theory, men fare worse when their wives die unexpectedly.

-Women, consistent with caregiving burden, do worse when their husbands' death was anticipated.

-Men do worse as widows than women.

-Note: Missing death type was imputed using ICE.

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### Exits from Marriage



### Conclusions

-Widows in this sample face a 47% higher risk of mortality than married individuals of the same age. Number of children or education do not explain much of the disadvantage.

-Health explains some of the difference, though this is difficult to interpret, as self-rated health may be related to marital status. Becoming widowed may be associated with deteriorating health; alternately, those in worse health may be more likely to become widowed.

-In contrast to other studies, here I find education is protective in both widowhood and married life. More highly educated widows are not disadvantaged relative to less highly educated widows.

-Being in fair or poor health is less harmful for widows. One explanation is that widows define health differently; another is that widows decline more quickly than the married.

Becoming widowed is harmful for health. The health and mortality of others can have important health consequences for individuals.

