

The Future of Late Life Spousal Bereavement

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The research presented in this volume provides a detailed portrait of late life widowhood in the United States. The authors documented the psychological, social, physical, and spiritual consequences of spousal loss for older adults. In addition, they provided important insights into both the etiology of grief and an evaluation of the effectiveness of current policies and interventions for assisting bereaved older adults. However, it is important to recognize that this research describes late life spousal loss as it is currently experienced, and not how it may be for *future cohorts* of bereaved elders. The members of the Changing Lives of Older Couples (CLOC) study were born in the early 20th century, and in many ways their experiences as widows and widowers reflect the distinctive experiences of a generation who came of age during the Depression and World War II years, and who went on to hold traditional gender-typed social roles in adulthood.

The CLOC participants' experiences are broadly representative of White, heterosexual, American-born older adults who had been married only once in their life. Future generations of older adults will be much more racially and ethnically diverse than the CLOC cohort, and will have family and marital histories that are very different from those of past generations. Future cohorts of older adults also will be much larger than current cohorts. Participants in the CLOC study belong to a relatively small birth cohort; during the first 3 decades of the 20th century, roughly 2 to 3 million babies were born per year. During the Baby Boom years of the mid-1940s through early 1960s, in

contrast, 3.5 to 4 million babies were born each year. The oldest members of the baby boom cohort, born in 1946, are on the verge of turning 60; in the coming decades this very large cohort will enter late life.

Due to its size and diversity, the aging baby boom cohort will create unprecedented challenges for policy makers, clinicians, and gerontology professionals. This chapter briefly describes the ways that future cohorts of older adults may differ from members of the CLOC sample, and speculates about how these differences may shape bereavement experiences among future cohorts of older adults. As the elderly population in the United States grows increasingly diverse, scholars and practitioners must develop an understanding of the distinctive ways that different subgroups experience and respond to spousal loss.

DIVERSITY IN THE OLDER POPULATION

The “Aging” of the Older Population

The most rapidly growing segment of the older population is the “oldest old,” or persons ages 85 and older. The oldest-old population is expected to increase fivefold, from 4 million in 2000 to 21 million by 2050 (Federal Interagency Forum on Aging-Related Statistics, 2004). The burgeoning “oldest old” population is of particular interest to policy makers because they are much more likely than younger elderly to experience physical disabilities and cognitive impairments. As a result, future generations of older caregiving spouses will include many frail persons, and they may be particularly overwhelmed by caregiving responsibilities and the eventual death of their spouse. Bereavement scholars may need to move beyond contrasting the experiences of older widows and widowers (i.e., persons over age 65) with younger and midlife bereaved persons, and may instead need to identify the distinctive challenges facing the “young” old (i.e., persons ages 65 to 84) and the “old” old (i.e., persons ages 85 and above).

Cultural Differences in Bereavement Experiences

Surprisingly little research has focused on the distinctive sources of distress and resilience among older African American, Hispanic/Latino, Asian American, and Native American bereaved spouses in the United States. How people grieve varies widely across ethnic groups due to cultural differences in how death is understood, beliefs about the possibility for future reunion with the deceased, and ways of communicating about death (Rosenblatt, 2001). Although small qualitative studies have documented the ways that specific

ethnic and religious groups grieve (see Rosenblatt, 2001), little systematic comparative research has been conducted. This omission reflects the fact that few sample surveys include adequate numbers of older ethnic minorities, yet this may soon change in coming decades.

The older population in the United States is more ethnically diverse than ever before, and will become even more diverse as the aging baby boom cohort enters late life. Today, non-Hispanic Whites account for nearly 83% of the U.S. population over age 65. Blacks account for 8% of the older population, Asians make up nearly 3%, and Hispanics (of any race) account for nearly 6% of the older population. Demographers predict that by the year 2050 these proportions will shift dramatically. According to some projections, in 2050 non-Hispanic Whites will account for just 61% of the U.S. population over age 65. Blacks will account for 12%, Asians will make up nearly 8%, and Hispanics (of any race) will account for fully 18% of the older population. In raw numbers, that means that the older Hispanic population is expected to grow from 2 million today to 15 million in 2050, whereas the older Asian population will increase from 1 to 7 million in that same time period (Federal Interagency Forum on Aging-Related Statistics, 2004).

The religious profile of the American population also is changing, due in part to high levels of immigration from Asia and parts of Africa. The U.S. government does not maintain official statistics on religious preference, yet the American Religious Identification Survey (ARIS), a large scale sample survey, reveals that the number of Americans who identify as Buddhist or Muslim has doubled over the past decade (Kosmin, Mayer, & Keysar, 2001). Consequently, programs and services for older people, particularly bereaved older spouses, will require greater flexibility to meet the needs of a more culturally and spiritually diverse population.

Some research suggests that older African Americans have special disadvantages and advantages, relative to Whites, as they cope with spousal loss. At every stage of the life course, African Americans have lower earnings, fewer assets, and lower rates of home ownership than do Whites (e.g., Oliver & Shapiro, 1995). Because the death of a spouse often is accompanied by costly end-of-life medical care and funeral expenses, the transition may be particularly devastating for older adults who already faced economic adversity prior to the loss. Yet research on racial differences in coping suggests that African Americans have several resources that may enable a more successful adjustment to loss. First, older African Americans are more likely than Whites to participate in formal religious activities (such as church attendance) and to rely on their religious beliefs as a strategy for coping with stressful life events (e.g., Levin, Chatters, & Taylor, 1995). The beneficial effects of religion—

particularly for older women—have been widely documented (Koenig, 1998); religion provides social support and a belief system that helps older bereaved persons to cope psychologically with loss.

Second, African American married couples have been found to have lower levels of marital quality, higher levels of marital conflict, shorter marriages, and a more egalitarian division of household labor than do White married couples (Orbuch & Eyster, 1997). Black women historically have been more likely than White women to work for pay outside the home, and the division of labor at home tends to be more egalitarian when both wife and husband work outside the home (Shelton & John, 1996). Because of their reduced dependence on their spouse for performing gender-typed household tasks and more strained emotional ties within marriage, African American widows and widowers may experience less distress and anxiety upon the loss of spouse than Whites. Third, African American elders are less likely than Whites to depend upon and interact with members of the nuclear family only, and instead maintain a more diffuse social network that may include friends, distant relatives, neighbors, and members of their church congregation (Ajrouch, Antonucci, & Janevic, 2001). Given that social support is one of the most important resources for coping with stressful life events, older African Americans' more varied interpersonal relationships and frequent contacts may provide an important source of instrumental and expressive support as they adjust to loss. One study based on the CLOC sample found that African American bereaved spouses reported lower levels of anger and despair than did their White peers, and this advantage was due in large part to their higher levels of social support and religious support (Carr, 2004).

Few studies have explored systematically the ways that older Hispanics and Asians manage the challenges of late life, particularly spousal loss. However, a number of recent small-scale and qualitative studies reveal cultural differences in practices surrounding death and bereavement. For instance, some Latinos experience *ataque de nervios* in response to the death of a loved one (Guarnaccia, DeLaCancela, & Carillo, 1989). The *ataque* is a display of sadness and anger that may involve shaking, shouting, swearing, striking out, and falling to the ground with convulsive movements, or lying still as if one were dead. *Ataques* typically occur in appropriate contexts such as funerals and are generally accepted by members of the community as a normal and appropriate grief response. An understanding of cultural differences in grief reactions can be useful to counselors and practitioners for treating members of ethnic subgroups. For example, a clinician who is aware of *ataque* and its significance in some Latin American cultures may be more likely to recognize

it as a culturally acceptable response, rather than as an indication of delirium or pathological grief (Wisocki & Skowron, 2000).

Identifying ethnic differences in family roles, relations, and customs may also be helpful in developing culturally sensitive interventions to help the older bereaved. For instance, older Chinese bereaved spouses may feel shame in turning to public agencies for support. Confucian principles of filial piety dictate that children (particularly one's oldest son and his wife) should care for their aging parents. Children who neglect their parents are looked upon with shame (King & Bond, 1985) and are believed to have violated a moral imperative (Wei-Ming, 1994). Yet older Chinese parents also may feel shame by turning outside the family for support; such an act would suggest that their children are not fulfilling their responsibilities. If cultural beliefs and traditions pose psychological barriers to help-seeking, then social workers and practitioners need to be fully aware of such barriers.

Partner Loss Among Older Gays and Lesbians

Researchers also know relatively little about how older gays and lesbians adjust to the loss of their long-term life partners. This dearth of research reflects the fact that no official statistics are available for same-sex unions, given the lack of social and legal approval for these relationships. Moreover, current cohorts of older adults (such as participants in the CLOC study) grew up during an historical era marked by limited awareness and acceptance of homosexuality. For future cohorts of older adults, however, gay partnerships may be both more common and more accepted than in past cohorts. Grief counselors and practitioners will need to develop an understanding of the ways that gay bereaved partners are both similar to and different from heterosexual widows and widowers.

Older gays and lesbians face special challenges, yet may also have distinctive advantages as they cope with partner loss. On one hand, bereavement may be particularly difficult. Bereaved gay partners may encounter conflict with their deceased partner's family members, particularly with respect to the dispersion of personal possessions following death (DeSpelder & Strickland, 1992). Lack of institutionalized support compounds the difficulty faced by gay partners. Although there are serious shortcomings in Social Security benefit levels and eligibility criteria for surviving spouses who were married (see Richardson, chapter 11), no benefits are available for surviving partners in gay and lesbian relationships. Other rights extended to heterosexual married couples are not typically available for same-sex couples, including the opportunity to

make health care and end-of-life decisions for ill partners. (The legal rights afforded to gay partners are rapidly evolving, however, with a handful of states now granting gays the right to marry or to form civil unions.) Bereaved partners may not receive sufficient emotional support upon loss, because the end of homosexual relationships may not be recognized or acknowledged in the wider community. Some may receive insufficient emotional support from their families of origin, if these relatives disapprove of their lifestyle or sexual orientation (Friend, 1990).

However, gays and lesbians also may have some resources that may enable better coping with the strains of late life partner loss. They may create their own support networks of friends, significant others and selected biological family members. Lesbians are more likely than heterosexual women to enact flexible gender roles throughout the life course; these roles, in turn, may foster greater adaptability to change and more positive self-identities, particularly upon the loss of one's life partner (Kimmel, 1992). Friend (1990) has argued that older gays and lesbians have had greater freedom than their heterosexual peers to learn skills that are nontraditional for their gender. Because they are not bound to traditional family roles, they may be better prepared for the daily challenges and responsibilities (or "restoration-oriented tasks") faced by the newly bereaved (Stroebe & Schut, 1999).

CHANGING DEMOGRAPHIC AND ECONOMIC CONTEXTS

Shifting Gender Roles

One of the most important social changes to occur in the late 20th century has been the transformation of men's and women's work and family roles. Cohorts of men and women born in the early 20th century, such as participants in the CLOC study, were socialized to maintain traditional gender roles in the home and workplace. Most women channeled their time and energy toward raising children and caring for their families. Relatively few women had continuous or high-paying careers, so most depended on their husbands for their financial well-being (Spain & Bianchi, 1996). Their husbands fulfilled the role of breadwinner and typically spent little time mastering home-making tasks. Moreover, men raised in the early 20th century often were socialized to be independent and self-reliant; many relied nearly exclusively on their wives for emotional support and had few other confidantes (Stevens, 1995).

In contrast, men and women in subsequent generations are much more likely than members of the CLOC cohort to share equally in household responsibilities (Shelton & John, 1996). Baby boom women have higher levels of education, more years of work experience, and higher personal earnings

than do past cohorts of women. While more than one-quarter of baby boom women are college graduates, only 6% to 7% of women born in the first 3 decades of the 20th century have college degrees (Hughes & O’Rand, 2004). Thus, future generations of older women may be less dependent on their husbands for income, as well as for support with male-typed tasks such as home repair and financial management tasks (Spain & Bianchi, 1996). Likewise, each cohort of men is more likely than his father’s generation to participate in homemaking and child-rearing tasks (Shelton & John, 1986). As the boundaries demarcating traditional men’s and women’s roles blur, we might expect that distress and anxiety will be minimized among future cohorts of widows and widowers. Newly bereaved elders will presumably face fewer challenges as they manage the tasks once performed by their late spouses, because they are likely to have shared such tasks while married.

Family Structure Changes

At the same time, adaptation to spousal loss may become more difficult for future cohorts of widows and widowers. Two important demographic trends—increasing divorce rates and declining fertility rates—may have important consequences for how older bereaved spouses adjust to loss. The members of the CLOC sample belong to a cohort who experienced relatively low levels of divorce and separation, given both the social stigma accompanying divorce and the lack of opportunities for women to provide for themselves economically in earlier decades (Cherlin, 1981; Holden & Smock, 1991). Thus, some men and women of this cohort may have remained in marriages that provided relatively low levels of warmth and relatively high levels of conflict. If we believe that current cohorts of married couples are more likely to dissolve dissatisfying marriages, then those who remain married until late life may have higher levels of marital satisfaction and thus may suffer worse following the loss of these close relationships.

Declining fertility rates and increases in geographic mobility mean that older men and women will have fewer children upon whom they can rely for social support, and these children will be less likely than past generations to live close to their parents (Connidis, 2001). Women born in the early decades of the 20th century were largely responsible for giving birth to the large baby boom cohort, with most giving birth to three or four babies. Women born in the 1940s and 1950s, however, have gone on to have just one to two babies, on average (Hughes & O’Rand, 2004). Future cohorts of older bereaved spouses may need to develop more expansive social networks that include friends and family members who are geographically proximate, to

counterbalance the fact that their children are fewer and less proximate than in past generations.

Although future cohorts of older adults will have fewer children than did past cohorts, a growing number of older adults are responsible for the care of their grandchildren. In 2000, nearly 6 million grandparents lived with grandchildren under the age of 18. Of these, 2.4 million co-residential grandparents were their grandchildren's primary caregivers. Nearly two-thirds of these grandparents are women, and roughly one-fifth live in poverty. Researchers have not explored extensively whether co-residential grandchildren are an additional stressor or a source of support when an older adult loses his or her spouse. Some evidence suggests that bereaved spouses who live with their grandchildren may be overwhelmed by the stressor of widowhood, because it is yet another stressor added to their already difficult lives. Many grandparents co-reside with their grandchildren because of a family crisis, such as the death of their child (i.e., the grandchild's parent), or because their child is incarcerated, ill, impoverished, or suffering from substance abuse or mental health problems (Fuller-Thomson, Minkler, & Driver, 1997). Future research should investigate the special stressors facing widowed co-residential grandparents, so that effective interventions may be developed.

Economic Trends

The Social Security Act of 1935 and subsequent amendments have been instrumental in lifting many older adults' incomes above the poverty level (see Richardson, chapter 11). While 35% of older adults lived below the poverty threshold in 1960, this proportion dropped to just 10% by 2002 (Federal Interagency Forum on Aging-Related Statistics, 2004). However, some older adults are much more likely to live in poverty than others, with unmarried (i.e., divorced/separated, widowed, and never married) women—particularly Black and Hispanic women—at greatest risk of poverty. While just 4% of White married couples over age 65 live in poverty, 41% of unmarried Black women and 47% of unmarried Hispanic women are poor (Federal Interagency Forum on Aging-Related Statistics, 2004). This economic disparity between the “haves” and “have nots” is expected to grow even larger among future cohorts of older adults. Inequality in household income has increased dramatically since 1980. Households in the top one-fifth of the income distribution have increased their share of income, whereas those in the bottom four-fifths have lost ground (Hughes & O’Rand, 2004). Rising inequality is an important trend, and one that may easily go unnoticed. Media depictions of aging baby

boomers tend to portray White, healthy, wealthy couples looking forward to their retirement, but the reality is that growing proportions of older adults will not enjoy economic stability in late life. As Utz (see chapter 7) observes, economic strain prior to and after spousal loss is an important and persistent source of distress for older bereaved spouses, particularly widows.

For future cohorts of older adults, even middle-class couples may face an uncertain economic future, and this has important implications for the well-being of the surviving bereaved spouses. Economists have found that older married couples often underestimate the number of years that the wife will outlive her husband, and consequently may not have sufficient savings or pension earnings to support the bereaved wife for an unexpectedly long spell of widowhood (Holden & Kuo, 1996). Moreover, it may be more difficult for future cohorts of older adults to save for retirement and old-age because workers are retiring earlier than in past generations. How long older adults (and eventually, widowed persons) will need to survive on their retirement earnings depends largely upon their age when they leave the workforce. Over the past 4 decades, workers have been retiring at increasingly younger ages. While men in the 1950s spent 3.3 years working per every 1 year they spent in retirement, in the late 1990s men spent 2.1 years working per every 1 year spent in retirement. The combination of longer life spans yet shorter work lives among baby boomers is expected to create a context of economic uncertainty for this generation as they face old age and spousal loss (Gendell, 2001). This uncertainty may be compounded by proposed changes in Social Security benefits. Although the future of Social Security is in flux, current proposals including the privatization of the system; this move could have a dramatic effect on the economic resources available to future generations of older Americans, particularly bereaved older spouses.

CONCLUSION

The central theme running through this volume is that bereaved older spouses are a remarkably heterogeneous group. Some experience severe depressive and grief symptoms after their spouse dies, while others are resilient and show few signs of distress after their spouse dies. Although therapy and interventions can be highly effective for treating the problems of some bereaved spouses, for others, such interventions may actually do harm. Widowhood does not have uniformly negative (or positive) effects on physical, emotional, economic, social, or spiritual well-being; rather, the personal consequences of spousal loss are contingent upon characteristics of the bereaved, characteristics of the late spouse, the context of the death, the

quality of social support available, the nature of the marital relationship, and even the historical time period in which one lives. In the future, researchers will be charged with exploring additional sources of heterogeneity, including the race, ethnicity, religion, sexual orientation, and family characteristics of the bereaved spouse. The CLOC data set has and will continue to answer important questions about bereavement among current cohorts of older adults. We very much look forward to seeing future studies explore the distinctive ways that the aging baby boom cohort experiences spousal loss in the coming decades.

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