



Impact of Spousal Loss on The Self-Esteem of Older Adults

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ABSTRACT

Spousal loss is one of the most profound life events in old age, often accompanied by psychological challenges such as loneliness, depression, and reduced self-esteem. Self-esteem plays a vital role in older adults' mental health, influencing their ability to adapt to aging and cope with bereavement. This study aimed to examine the relationship between spousal loss and self-esteem among older adults. A correlational quantitative design with a cross-sectional approach was employed. A total of 87 older adults were recruited using purposive sampling. Data collection was conducted from March to April 2023 using the Rosenberg Self-Esteem Scale (RSES) questionnaire. Data were analysed using univariate analysis and bivariate analysis with the chi-square test. The average age of the respondents was 66 years. Most participants were female, of Javanese ethnicity, Muslim, residing in Malang City, had low educational attainment (elementary school), worked in the private sector, and were in stable health condition. The analysis revealed a significant association between spousal loss and self-esteem among older adults (p -value < 0.0001). Self-esteem in older adults is associated with the presence of a spouse. Those who still have a living spouse tend to exhibit higher levels of self-esteem. Psychosocial interventions, as well as family and community support, are essential to enhance self-acceptance and self-esteem among older adults who have experienced spousal loss.

Keyword: Older adults, Spousal loss, Self-esteem, Widowhood, Psychosocial well-being



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1. Introduction

During the aging process, older adults experience various issues and personal changes, including emotional and psychosocial adjustments that may influence their self-perception (Maulida & Ramadhan, 2022). Psychosocial changes in aging are often associated with life transitions and experiences of loss. One of the most significant losses commonly faced by older adults is the death of a spouse (Wianti & Muchlisin, 2020). Spousal loss is a profound and frequent experience among the elderly, often resulting in considerable psychological and emotional challenges. This phenomenon is increasingly relevant considering the growing global aging population, with the number of individuals aged 60 years and older projected to rise substantially by 2030 and beyond (Putran & Ak, 2024). The death of a spouse can have a detrimental impact on the mental

health of older adults, contributing to feelings of loneliness, depression, and decreased self-esteem—an essential component of their overall well-being (Putran & Ak, 2024; Rahmadewi & Lestari, 2024). Studies have shown that widowed older women tend to experience greater psychosocial stress, higher levels of loneliness, and more severe depressive symptoms compared to their male counterparts (Putran & Ak, 2024).

Prevalence data indicate that a significant proportion of older adults who are widowed and live alone in changing social environments experience increased feelings of isolation and a loss of psychosocial support. For instance, a study conducted in Kerala, India, involving 200 widowed older adults found a significant correlation between social relationships, life satisfaction, loneliness, and depression—highlighting the complex interplay of these factors in post-bereavement adjustment (Putran & Ak, 2024). Globally, the psychosocial impact of spousal loss is recognized as a major public health concern, particularly in mental health and aging (Schladitz et al., 2021). The proportion of widowed older women is significantly higher than that of older men, at 48.86% compared to 13.10%. Additionally, 7.10% of older adults live alone, 22.07% live with a spouse, and the remainder reside with nuclear families, multigenerational households, or other household members (Statistik Penduduk Lanjut Usia 2023, 2023).

The loss of a spouse not only causes emotional grief but also has the potential to disrupt psychosocial stability and lower self-esteem. According to Özcan Tozoğlu and Gürbüz (2025), self-esteem plays a crucial role in shaping older adults' attitudes toward the aging process. Spousal loss, as part of the life experience in old age, can exacerbate feelings of worthlessness, loneliness, and social alienation—particularly in the absence of strong social support and a stable sense of self-worth (Özcan Tozoğlu & Gürbüz, 2025).

Research by Archibald (2010) and Šare, et al (2021) has shown that widowhood is negatively associated with self-esteem, as the loss of a spouse often leads to social isolation, diminished social roles, and emotional stress, all of which contribute to decreased self-esteem in older adults (Archibald, 2010; Šare et al., 2021). A study in Meru County, Kenya, revealed that widowed women exhibited significantly lower self-esteem compared to widowed men, due to factors such as lack of social support, discrimination, and economic dependency (MMburugu et al., 2015). Furthermore, widowed older adults living in nursing homes or without a partner tend to have lower self-esteem than those living with family or in community settings (Šare et al., 2021). Although the precise prevalence of low self-esteem among older widows is less frequently measured, a strong association between widowhood and increased depression—affecting approximately 13.8% to 45% of widowed older adults across various settings—suggests that low self-esteem is a common psychological consequence of bereavement (P. Das et al., 2024; Srivastava et al., 2021). Overall, widowhood presents a considerable risk for reduced self-esteem in later life, particularly among women and those facing social and economic vulnerability (MMburugu et al., 2015; Šare et al., 2021).

Understanding the relationship between spousal loss and self-esteem in older adults is essential for comprehending how such loss impacts their psychological resilience and overall quality of life. Self-esteem plays a critical role in shaping attitudes toward aging and mental health outcomes, influencing how older adults cope with changes resulting from both bereavement and the aging process itself (Özcan Tozoğlu & Gürbüz, 2025). Studies have shown that social support, community involvement, and religiosity can mitigate the negative effects of spousal loss, promoting acceptance and positive adaptation in its aftermath (Putran & Ak, 2024; Rahmadewi & Lestari, 2024). Moreover, the subjective meaning attributed to the loss significantly affects self-esteem and life satisfaction; individuals who perceive the loss in a more positive light tend to experience better psychological outcomes (Reitz et al., 2022).

Previous research by Schladitz, et al (2021) has examined the psychological impact of spousal loss in older adults, revealing that as age increases, grief and bereavement are closely linked with higher levels of depression and deteriorating mental health (Schladitz et al., 2021). Qualitative studies by Rahmadewi & Lestari (2024) and Gabrielová, et al (2025) have also explored coping strategies among widows, highlighting the role of social support, religious beliefs, and personal resilience in navigating life post-loss (Gabrielová et al., 2025; Rahmadewi & Lestari, 2024). In addition, longitudinal analyses by Reitz et al (2022) indicate that while the loss itself may not uniformly predict declines in self-esteem, an individual's subjective experience and interpretation of the loss are key determinants of their psychological adjustment (Reitz et al., 2022). In summary, the relationship between spousal loss and self-esteem in older adults is a multifaceted issue influenced by social, psychological, and demographic factors. Understanding this relationship is crucial for designing targeted interventions aimed at enhancing social support, community integration, and mental health services for widowed older adults. Such efforts can improve their life satisfaction and facilitate a healthier aging trajectory following the loss of a spouse.

In summary, the relationship between the loss of a partner and self-esteem in older adults is a complex issue influenced by social, psychological, and demographic factors. Although previous studies have revealed the psychosocial impact of losing a partner, several gaps have not been adequately explained. First, most studies focus on aspects of depression, loneliness, and social support, but few specifically focus on the mechanism of self-esteem change as an important component of psychological adaptation after loss. Second, findings regarding the direct relationship between the loss of a spouse and self-esteem are still inconsistent—some studies find a significant decline, while others emphasize that subjective perceptions and the meaning attributed to the loss are more decisive than the status of widowhood/widowerhood itself. Third, most studies have been conducted in developed countries or within specific cultural contexts, so evidence regarding the socio-cultural context of Asia, particularly Indonesia, is still limited. Finally, there are still a few studies that simultaneously integrate social, emotional, economic, and spiritual factors in explaining the decline in self-esteem among older adults who have lost their spouses. These gaps indicate the need for more in-depth research to understand how the loss of a spouse comprehensively affects the self-esteem of older adults in different socio-cultural contexts. This study aims to determine the relationship between the loss of a spouse and self-esteem in older adults.

2. Methods

2.1 Study Design

This study employed a quantitative design using a correlational approach with a cross-sectional framework. The research was conducted from March 20 to April 20, 2023, involving 87 older adults residing in Malang City respondents determined by G-Power version 3.1 with Z-Test. Participants were selected through purposive sampling based on the following inclusion criteria: older adults living in Pisang Candi Subdistrict, Malang City; having no cognitive impairment; and willing to participate as respondents.

2.2 Measurements

To assess the level of self-esteem, the study utilized the Rosenberg Self-Esteem Scale (RSES). The RSES is a globally recognized, multidimensional instrument designed to measure overall self-esteem. It consists of 10 items evaluating general self-worth rather than specific dimensions. Each item is rated using a four-point Likert scale: Strongly Agree (SA), Agree (A), Disagree (D), and Strongly Disagree (SD). For positively worded items, the scoring is SA = 3, A = 2, D = 1, SD = 0. For negatively worded items, the scoring is reversed: SA = 0, A = 1, D = 2, SD = 3. Based on the total score, respondents were classified into three categories: high self-esteem (score 26–30), normal self-esteem (score 15–25), and low self-esteem (score 0–14) (Oancea et al., 2020).

Based on the results of research by (Classen et al., 2007) which tested the validity and reliability of the Rosenberg Self-Esteem Scale (RSES) in 986 non-institutional elderly people using Item Response Theory (IRT) analysis with the Rasch model, it was found that all 10 items had good fit statistics (infit and outfit mean square (MnSq) were in the range of 0.60–1.40). The reliability of the instrument was in the excellent category, as indicated by a person reliability index of 0.83, which is equivalent to Cronbach's alpha in classical test theory, and a separation index of 2.17, which was able to separate respondents into three different self-esteem groups.

2.3 Data Analysis

Statistical analysis was performed using SPSS software (Statistical Package for Social Science) version 30. A 95% confidence interval and a significance level of 0.05 were applied. To examine the association between spousal loss and self-esteem among older adults, the Chi-square test was used.

2.4 Ethical Consideration

This study was approved by the University Ethics Committee (May 2023), ethical number: E.5.a/108/KEPKUMM/2023. All the respondents had agreed with the given informed consent.

3. Results

Table 1 Respondent Characteristics (n=87)

Characteristics	No Spouse f (%)	Have a Spouse f (%)	Total f (%)
Age			
Elderly (60 – 74)	44 (50.6)	32 (0)	76 (87.4)
Old (74 – 90)	11 (12.6)	0 (0)	11 (12.6)
Gender			
Man	11 (12.6)	19 (21.9)	30 (34.5)
Woman	44 (50.6)	13 (14.9)	57 (65.5)
Ethnic			
Javanese	55 (63.2)	32 (36.8%)	87 (100%)
Religion			
Islam	54 (62.0)	32 (36.9)	86 (98.9)
Christian	1 (1.1)	0 (0)	1 (1.1)
Education			
Not in school	16 (18.4)	3 (3.4)	19 (21.8)
Elementary school	30 (34.5)	3 (3.4)	52 (59.8)
Junior high school	5 (5.7)	2 (2.3)	7 (8.0)
Senior high school	3 (3.4)	3 (3.4)	6 (6.9)
Bachelor's degree	1 (1.1)	2 (2.3)	3 (3.4)
Jobs			
Not working	26 (29.9)	6 (6.9)	32 (36.8)
Working	29 (33.2)	26 (30)	55 (63.2)
Disease History			
None	39 (44.8)	25 (28.7)	23 (26.4)
Yes	16 (18.4)	7 (8.0)	6 (6.9)
1) Hypertension	6 (6.9)	0 (0)	1 (1.1)
2) Cataract	1 (1.1)	0 (0)	2 (2.3)
3) Gout	2 (2.3)	0 (0)	3 (3.4)
4) Stroke	2 (2.3)	1 (1.1)	3 (3.4)
5) Joint pain	2 (2.3)	1 (1.1)	1 (1.1)
6) Osteoporosis	1 (1.1)	0 (0)	2 (2.3)
7) Heart	1 (1.1)	1 (1.1)	4 (4.6)
8) Diabetes mellitus	1 (1.1)	3 (3.4)	1 (1.1)
9) Gallstones	0 (0)	1 (1.1)	
Living together			
Child	34 (39.1)	15 (17.2)	49 (56.3)
Alone	21 (24.1)	17 (19.6)	38 (43.7)

Table 1. Of the 87 older adult respondents, the majority (63.2%) reported not spouse, while only 36.8% were currently have a spouse. Most participants were in the elderly category (60–74 years), with all a have spouse individuals falling within this range. In contrast, 12.6% of no spouse respondents were in the older age group (75–90 years), suggesting that older age is associated with being no spouse. A significant gender imbalance was observed: 50.6% of unpartnered respondents were female, while partnered individuals showed a more balanced gender composition (21.9% male, 14.9% female). Ethnic and religious backgrounds were largely homogeneous, with all respondents identifying as Javanese and nearly all (98.9%) identifying as Muslim.

Educational attainment was low across the sample, particularly among no spouse, where 18.4% had no formal education and 34.5% had only completed elementary school. Employment status also varied, with no spouse older adults more likely to be unemployed (29.9%) compared to their have a spouse (6.9%). Health-related findings indicated that unpartnered individuals had a higher burden of chronic illnesses such as hypertension, joint pain, stroke, and diabetes. Regarding living arrangements, 39.1% of unpartnered respondents lived with their children, while 24.1% lived alone. Among partnered individuals, co-residence with children was less common (17.2%), and 19.6% lived independently with their spouse.

In terms of psychological well-being, 58.6% of respondents had normal levels of self-esteem, while 41.4% exhibited low self-esteem. This indicates a considerable proportion of older adults experiencing reduced self-worth, which may be influenced by marital status, health conditions, and living arrangements. Collectively, these findings highlight the vulnerability of unpartnered older adults, particularly in terms of age, gender, education, health status, and psychosocial well-being.

Table 2 Fisher's exact analysis of the relationship between spousal loss and self-esteem level

Marital status	Self-esteem Level		Total	Sig(2-sided)
	Normal self-esteem	Low self-esteem		
No Spouse	21	34	55	<0.001
Have a Spouse	30	2	32	

Table 2. Since the chi-square test cannot be used if the frequency value of one cell is too low (less than 5), the fisher test is used as an alternative to fulfill this assumption. A fisher's exact test of independence was conducted to examine the association between marital status and self-esteem levels among older adults. The results revealed a statistically significant relationship between marital status and self-esteem ($p < 0.001$). Among those without a partner, the majority (61.8%) had low self-esteem, whereas among partnered respondents, 93.8% had normal self-esteem and only 6.2% had low self-esteem. These findings suggest that having a spouse in later life is strongly associated with higher self-esteem, highlighting the potential psychosocial benefits of spousal companionship for the elderly.

4. Discussion

The results of the study show that there is a significant relationship between the loss of a spouse and self-esteem. These findings indicate that the presence of a spouse plays a protective role for the self-esteem of older adults. Older adults who are married or have a spouse receive emotional support, affection, a sense of security, and social validation that enhance their self-perception. Conversely, elderly people who live without a partner may experience loneliness, loss of role, or reduced social interaction, making them more vulnerable to low self-esteem.

Of the various types of loss, one issue that often goes unnoticed is when the elderly experience the loss of a spouse. The loss of a much-loved partner due to death is an event that cannot be compared to other loss events (Risma, 2021). Likewise, with the loss of a life partner due to divorce. The divorce incident will result in some elderly people feeling that they have failed to maintain their marriage.

Research by Purrington (2023) indicates that spousal loss can lead to varied trajectories in self-esteem among older adults. Some studies found that older adults with high pre-loss emotional or instrumental dependency on their spouse may experience a boost in self-esteem six months post-loss. This increase is thought to arise from discovering personal emotional resources or new responsibilities that affirm their self-efficacy and coping abilities (e.g., managing household or financial tasks) after the spouse's death. This aligns with theories of meaning reconstruction, where successfully rebuilding a sense of order and control post-loss enhances self-esteem. Conversely, those unable to reconstruct such continuity may face increased anxiety and lowered self-esteem, suggesting that the quality of adjustment is crucial (Purrington, 2023).

Widowhood may also lead to decreased self-esteem through several pathways: loss of the meaningful spouse role, diminished social connections, increased isolation, and economic hardship, especially for widows. Emotional efficacy may decline, contributing to lower self-esteem. The stress of bereavement can have long-lasting effects on self-esteem, even six months post-loss. Chronic grief is associated with the lowest self-esteem levels, distinguishing it from normal grief processes. Moreover, low self-esteem in widowed older adults is linked to higher risks of depression and suicidality (Archibald, 2010). The spouse usually provides emotional intimacy, affirmation, and a central social role, so bereavement often removes a key source of validation and belonging that supports self-esteem in old age. Widowhood is also one of the most stressful later-life events and is consistently linked with higher depression, anxiety, and poorer psychological well-being, conditions that are closely tied to reduced self-worth (Zheng & Yan, 2024).

Losing a spouse in later life is strongly associated with a decline in self-esteem among many older adults, mainly through pathways such as grief, loneliness, loss of roles, and reduced social and economic resources (Alaviani et al., 2025; Essid N, 2025). After losing a spouse, many older adults face role loss (e.g., "wife/husband," joint decision-maker) and reduced authority in the family, which can erode their sense of competence and personal value. Economic dependence or financial strain after widowhood, especially among

women, further amplifies feelings of insecurity and inadequacy, contributing to low self-esteem (Sarker, 2024; Zheng & Yan, 2024).

Other studies by Gayatri, et al (2021) also explain that elderly people who have a partner have better readiness to face old age than those without a partner. The elderly without a partner will feel dissatisfied and tend to consider their lives not as meaningful as expected. In addition, social and financial dependence on a partner also has a major effect after loss, because after research was conducted on elderly people who did not have a life partner, not a few of them felt able to carry out social activities. After all, there was no encouragement and support, morally and materially, resulting in the loss of social relationships, which triggered low self-esteem disorders (Gayatri et al., 2021). The loss of life partners and social relationships to the environment makes the elderly feel lonely. This loneliness raises self-confidence, and it is not uncommon for them to bring up regression behaviours such as crying and confining themselves / social isolation (Nova & Kunci, 2022). Deep sadness after losing a partner is also one of the causes of other psychological disorders, including a negative self-concept reflection of low self-esteem, depression stress.

A cross-sectional study by Purrington (2023) involving older adults in Iran found that self-esteem (SE) positively correlates with mental health (MH) but negatively correlates with loneliness, which acts as a strong mediator between SE and MH. Older adults with higher self-esteem tend to experience better mental health and lower loneliness, while increased loneliness significantly harms mental health outcomes. This suggests that spousal loss, which often increases loneliness, can indirectly lower self-esteem and mental health by reducing social connections and emotional support. The study highlights that loneliness is not merely living alone but a subjective feeling of social isolation that profoundly affects self-worth and psychological well-being in older adults (Alaviani et al., 2025). Another study identified key characteristics that facilitate or inhibit psychological adjustment to spousal bereavement in older adults, which likely influence self-esteem trajectories post-loss. Effective adjustment is linked to regaining a sense of control and social support, which can help maintain or improve self-esteem, whereas poor adjustment may exacerbate feelings of loss and reduce self-esteem (Purrington, 2023).

Given the findings and limitations, several recommendations can be made. Future research should use longitudinal, mixed, or other approaches to analyze the development of self-esteem over time and explore the cultural, spiritual, and interpersonal resources that shape adaptive responses to the loss of a partner. In addition, it is necessary to consider moderator variables such as social support, religiosity, coping strategies, economic status, and other related factors. Psychosocial interventions aimed at older adults who have lost their partners should be developed and implemented, with a focus on grief counseling, support groups, and community engagement activities that foster social connections and emotional resilience. Family members and community stakeholders should be actively involved in promoting an environment that supports positive aging and self-acceptance, especially for those who have lost their partners.

5. Conclusion

This study provides empirical evidence of a significant association between spousal loss and self-esteem among older adults. The findings indicate that older individuals who have experienced the loss of a spouse are more likely to exhibit lower levels of self-esteem compared to those who remain partnered. These results underscore the critical role of marital status in the psychological well-being of aging individuals and suggest that spousal presence serves as an important protective factor in preserving self-esteem during the aging process. Moreover, the findings reinforce the relevance of self-esteem as a determinant of how older adults adapt to emotional stressors, such as bereavement, and cope with the broader challenges of aging.

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