

Statue Quo and Influencing Factors of Loneliness in Widowed Elderly Women in Deyang Community

Ruifang Xiang, Dan Li, Xiaoqin Liu

Health Management Center, Deyang People's Hospital, Deyang, China
Email: 592010874@qq.com

How to cite this paper: Xiang, R. F., Li, D., & Liu, X. Q. (2025). Statue Quo and Influencing Factors of Loneliness in Widowed Elderly Women in Deyang Community. *Open Journal of Social Sciences*, 13, 383-389.

<https://doi.org/10.4236/jss.2025.131023>

Received: December 12, 2024

Accepted: January 24, 2025

Published: January 27, 2025

Copyright © 2025 by author(s) and Scientific Research Publishing Inc. This work is licensed under the Creative Commons Attribution International License (CC BY 4.0).

<http://creativecommons.org/licenses/by/4.0/>



Open Access

Abstract

Objective: To investigate the loneliness status and influencing factors of widowed elderly women in Deyang community. **Method:** From September to October, 2023, we investigated the loneliness of 80 elderly widowed women who met the inclusion and exclusion criteria in Deyang community. The survey tool is UCLA scale. Frequency statistics, chi-square test and logistic regression were used to analyze the current situation and influencing factors. **Result:** 77 valid questionnaires were collected, with an effective recovery rate of 96.25%. The total score of UCLA is (46.56 ± 6.68) , and more than 72.73% of the subjects scored more than 43 points in UCLA. Single-factor analysis showed that there were significant differences in loneliness scores of widowed elderly women with different age, hobbies, children's financial support and neighborhood relations. Logistic regression analysis showed that younger and better neighborhood relations are the protective factors for loneliness. **Conclusion:** Older widowed women generally have a strong sense of loneliness. The older they are and the worse their neighborhood relationship, the stronger their sense of loneliness is.

Keywords

Loneliness, Elderly Women, Widowed Woman, Community

1. Introduction

Loneliness is an unpleasant and painful emotional experience that people feel subjectively, this experience is the social relationship that individuals expect, there is a gap in quantity and quality between the actually perceived social relationships (Costello, 1983). Loneliness is common in the elderly population, it not only has

a negative impact on the cardiovascular, sleep, and endocrine systems of the elderly, but also causes significant psychological damage to them, in addition to affecting their subjective well-being and sense of achievement, it can also cause depression and cognitive decline, leading to dementia in the elderly (Grover *et al.*, 2019), and it's a risk factor for the increase of mortality and many physiological diseases such as hypertension, diabetes, anxiety and depression in middle-aged and elderly people (Wu *et al.*, 2017). Research has shown that since 1995, the sense of loneliness among elderly people in China has been increasing year by year (Wang, 2022), reaching 42.10, which is higher than the normal range, widowed elderly people have a stronger sense of loneliness than married elderly people (Cacioppo & Patrick, 2009). The death of a partner makes it difficult for elderly widowed women to find someone to confide in and share the pressure of life. This study intends to investigate the loneliness status and influencing factors of widowed elderly women in a city community, in order to provide some basis for the intervention of widowed elderly people who feel lonely.

2. Object and Method

2.1. Object

From September to October, 2023, the widowed elderly women in a community in Deyang City, Sichuan Province, were investigated by convenient sampling method. Inclusion criteria: age ≥ 60 years old; Widowed; Clear consciousness, no language communication and communication barriers; Informed consent and voluntary participation in this study. Exclusion criteria: people with hearing impairment.

2.2. Research Tool

2.2.1. General Information Questionnaire

General information questionnaire includes three parts. Part 1: personal basic information, such as age, education, professional status, hobbies, religious beliefs, monthly income and physical condition. Part 2: formal support system, such as old-age insurance, accident insurance, and participation in community temple fairs. Part 3: informal system includes family situation (number of children, way of providing for the aged, membership relationship, time and frequency of children's visits, etc.), neighborhood relationship (number and time of active and passive door-to-door visits, number of friends in the neighborhood), and local customs and conventions (participation in New Year's greetings and double ninth festival parties, etc.)

2.2.2. UCLA Loneliness Scale (Cacioppo & Patrick, 2009)

UCLA Loneliness Scale is a one-dimensional scale with 20 items, and each item is scored by four grades, and the four grades of "never", "rarely", "sometimes" and "always" are integrated with "1", "2", "3" and "4" correspondingly (9 of them are called reverse scoring). After the measurement, add the scores. If the score is greater than or equal to 44, it means that loneliness is very strong. If the score is lower than 28, it means that loneliness is very weak. Most people score between

33 and 39.

2.3. Research Method

This study mainly adopts the questionnaire survey method. A survey team composed of community administrators who have been trained in a unified way is responsible for the investigation, unifying the instructions, obtaining the informed consent of the respondents during the investigation, and explaining the methods, precautions and confidentiality principles of the questionnaire survey to the respondents. Then, the investigators conducted a face-to-face question-and-answer questionnaire survey and filled it out on their behalf according to the oral choice of the respondents. After the questionnaire is completed, it will be collected on the spot, and all the collected questionnaires will be carefully checked and the data will be entered by two people. After the data is recorded, 20% of the samples are randomly selected for re-recording, and the consistency of the input data is checked to ensure the accuracy of the data in this study. A total of 80 copies were distributed in this study. 77 valid questionnaires were collected, and the effective rate was 96.25%.

2.4. Statistical Methods

EpiData 3.1 software was used to establish a database for data entry, and SPSS 26.0 software was used for statistical analysis. The measurement data conforming to the normal distribution were expressed as mean standard deviation ($x \pm s$). The measurement data of non-normal distribution are expressed by median (M) and interquartile interval (IQR), and the statistically significant factors in general data are taken as independent variables, and multiple stepwise regression analysis is carried out. Inspection level $\alpha = 0.05$.

3. Result

3.1. Status Quo of Loneliness of Widowed Elderly Women in Community

The survey results show that the total score of UCLA is (46.56 ± 6.68), and more than 72.73% of the subjects scored more than 43 points in UCLA, as shown in **Table 1**. According to the scoring standard, the respondents' loneliness score is high and most of them have a strong sense of loneliness.

Table 1. Total score of UCLA of respondents.

Total score	number of people	Percentage (%)	Cumulative percentage (%)
≤ 27	1	1.30	1.30
28 - 43	20	25.97	27.27
≥ 43	56	72.73	100.00

3.2. General Situation of Respondents

A total of 77 elderly widowed women completed the questionnaire survey, of

which junior high school education or above accounted for 61.04%, as shown in **Table 2**.

Table 2. General situation of respondents.

Characteristic	population	Percentage (%)	Cumulative percentage (%)
Age			
≥60	22	28.57	28.57
≥70	41	53.25	81.82
≥80	13	16.88	98.70
≥90	1	1.3	100.00
degree of education			
Illiteracy	8	10.39	10.39
primary school	22	28.57	38.96
junior school	22	28.57	67.53
High school or technical secondary school	15	19.48	87.01
universities and colleges	7	9.09	96.10
Bachelor degree or above	3	3.90	100.00
hobbies and interests			
Single interest	38	49.35	49.35
Rich in hobbies	39	50.65	100.00
Preference for personal activities	14	18.18	18.18
Preference for Group-biased activities	63	81.82	100.00
felt unwell in the past month			
Yes	58	75.32	75.32
No	19	24.68	100.00
Living style			
live in solitude	36	46.75	46.75
Live with son	27	35.06	81.82
Live with daughter	14	18.18	100.00
Children provide financial support			
not at all	3	3.95	3.95
rarely	9	11.84	15.79
sometimes	46	60.53	76.32
often	17	22.37	98.68
always	1	1.32	100.00
Children provide emotional support			
No	15	19.48	19.48
Yes	62	80.52	100.00
Neighborhood			
Bad	35	45.45	45.45
Well	42	54.55	100.00

3.3. Single Factor Analysis of Loneliness of Widowed Elderly Women

Single-factor analysis showed that there were significant differences in loneliness scores of widowed elderly women with different age, hobbies, children's financial support and neighborhood relations, as shown in **Table 3**.

Table 3. Single factor analysis of loneliness of widowed elderly women.

	χ^2	<i>p</i>
Age	11.151	0.011*
degree of education	10.540	0.061
Single or rich interest	0.045	0.833
personal or Group-biased activities	10.608	0.001**
felt unwell in the past month	2.798	0.094
Living style	5.763	0.056
Children's financial support	20.610	0.000**
Children's emotional support	2.802	0.094
Neighborhood	19.285	0.000**

* $p < 0.05$ ** $p < 0.01$

3.4. Logistic Regression Analysis of Loneliness of Widowed Elderly Women

Using whether feel lonely as independent variables and different age, hobbies, children's financial support, neighborhood relations as dependent variables, a logistic regression analysis was conducted. The results showed that different hobbies and children's financial support did not enter the regression equation. Younger and well neighborhood relations (Have more than 2 friends in the community and spend at least 30 minutes with them every week) are the protective factors for loneliness, as shown in **Table 4**.

Table 4. Logistic regression analysis of loneliness of widowed elderly women.

Item	regression coefficient	Standard error	z	Wald χ^2	p	OR	OR 95% CI
Age	1.309	0.570	2.296	5.271	0.022	3.702	1.211 - 11.317
personal or Group-biased activities	-1.359	0.804	-1.691	2.860	0.091	0.257	0.053 - 1.241
Children's financial support	-0.279	0.382	-0.730	0.533	0.465	0.756	0.357 - 1.600
Neighborhood	-3.645	1.077	-3.383	11.448	0.001	0.026	0.003 - 0.216

4. Discussion

4.1. Widowed Elderly Women Have a High Level of Loneliness

The total scores of loneliness of 77 elderly widowed women who participated in

the survey were (46.56 ± 6.68), which was higher than the normal loneliness range of 33 - 39, indicating that their loneliness level was high. This is consistent with many previous research results (Mangarun, 2020; King, 2020; Sun *et al.*, 2021). What's more, the survey results show that the widowed elderly aged ≥ 80 have the highest loneliness score (50.38 ± 3.45), and 60 - 69 have the lowest loneliness score (44.59 ± 7.60), this is consistent with Wang's research results (Huang *et al.*, 2023).

4.2. The Older and the Worse Neighborhood Relations, the Stronger Their Sense of Loneliness

Through the results of univariate and multivariate analysis, it is known that widowed elderly women of different ages and neighborhood relationships have different loneliness, and the difference is statistically significant. The overall performance is that the older and the worse neighborhood relations are, the stronger their sense of loneliness is. This may be because with age, physical activity decreases, and participation in social activities outside gradually decreases. Colleagues and children are busy with work, ultimately leading to a weak social support system for elderly widowed women (Huang *et al.*, 2023). The economic support of children showed significance in univariate analysis, but showed no significance in multivariate analysis. This may be due to the fact that as the age of elderly widowed women increases, the economic support of children also increases, resulting in significant economic support for children in univariate analysis.

4.3. Strengthening Community Integration and Encouraging "Going Out" May Alleviate the Loneliness of Elderly Widowed Women

Nowadays, the departments providing services for the elderly are becoming increasingly diversified. In the context of family based elderly care in China, community services are an important part of ensuring the health of the elderly. However, due to inadequate community promotion, elderly widowed women have weak awareness of community participation. They do not understand or even know about these service departments, lack bridges to connect with them, and lack community integration, which is not conducive to adapting and starting a new life after widowhood. In recent years, China has begun to implement grid based services in communities, where each community worker has a corresponding fixed service target. They play the role of resource providers, helping the elderly contact government departments, enterprises and institutions, volunteer departments, and community (family) departments to obtain the resources needed by elderly widows and widowers, and pass them on to them, improving the efficiency of helping others.

5. Conclusion

Older widowed women generally have a strong sense of loneliness. The older they are and the worse their neighborhood relationship is, the stronger their sense of loneliness is.

6. Limitations and Future Directions

The investigation object of this study is limited to a community in Deyang city, which has a large sampling error. The next step is to expand the survey population and obtain more accurate information.

Fund Project

Research topic of mental health education in Sichuan province (project number: XLJKJY2356C); Deyang Philosophy and Social Sciences Planning Project “Deyang Social Work” Special Project (project number: DY24ZC043)

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

References

- Cacioppo, J., & Patrick, W. (2009). *Loneliness Is Shameful* (p. 11). Renmin University of China Press.
- Costello, E. (1983). Loneliness: A Sourcebook of Current Theory, Research and Therapy. *Journal of Behavior Therapy and Experimental Psychiatry*, *14*, 281. [https://doi.org/10.1016/0005-7916\(83\)90066-6](https://doi.org/10.1016/0005-7916(83)90066-6)
- Grover, S., Verma, M., Singh, T., Dahiya, N., & Nehra, R. (2019). Loneliness and Its Correlates amongst Elderly Attending Non-Communicable Disease Rural Clinic Attached to a Tertiary Care Centre of North India. *Asian Journal of Psychiatry*, *43*, 189-196. <https://doi.org/10.1016/j.ajp.2019.06.001>
- Huang, C. Y., Huang, R., Wang, Y. et al. (2023). Relationship between Depression, Loneliness and Quality of Life of Widowed Elderly Women Living Alone in Rural Areas. *Journal of Central South University*, No. 12, 1865-1873.
- King, B. M., Carr, D. C., & Taylor, M. G. (2020). Loneliness Following Widowhood: The Role of the Military and Social Support. *The Journals of Gerontology: Series B*, *76*, 403-414. <https://doi.org/10.1093/geronb/gbz164>
- Mangarun, A. J. S. (2020). Lived Experiences of Elderly Remarried Widows: Adjustment and Coping to New Roles as Bi-Parent. *Belitung Nursing Journal*, *6*, 203-208. <https://doi.org/10.33546/bnj.1173>
- Sun, Y. Y., Zhang, H. M., Gao, J. et al. (2021). Analysis of Loneliness Status and Influencing Factors of Elderly Hypertensive Patients in Community. *Nursing Research*, No. 5, 808-814.
- Wang, J. J. (2022). *Research on the Group Work Intervention in Alleviate the Loneliness of Elderly Widowed Women—Take X Community in Baoding City, Hebei Province as an Example*. Hebei University.
- Wu, J., Li, H. Q., & Xu, S. (2017). The Influence of Loneliness and Social Support for the Elderly Mental Health. *China Journal of Health Psychology*, *25*, 1837-1840.