as risks to mortality, but far less scientific attention has been accorded to social factors despite known significant associations between loneliness and specific mental health (e.g., depression) and physical health (e.g., systolic blood pressure) conditions. The growing international evidence on the impacts of SI&L has profound implications for positive health status and substantially reduced health and welfare budgets.

For these implications to be realised, new studies are required to enable the early detection of pathways in and out of SI&L. The four presentations, involving recent research projects from New Zealand, England, Belgium and Italy present a broad range of new evidence from differing contexts, including quantitative and qualitative datasets, pathways in and out of SI&L and policy implications. Focus will be given to multiple domains of SI&L, including spatial contexts, social relations, community participation, health and wellbeing, economic trends, elder abuse and ethnic dimensions.

After attending this symposium, participants will have a clear understanding of SI&L in terms of: (1) the broad contextual dimensions; (2) the measurable negative impacts, (3) pathways in and out of SI&L, and (4) useful policy dimensions.

RECENT TRENDS ON SOCIAL ISOLATION AND LONELINESS AMONG OLDER PEOPLE IN ITALY

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This presentation will provide a basic understanding of how social isolation and loneliness in older age are experienced in Italy. Through the use of both national data and findings from comparative studies, it will be highlighted how social and economic trends are affecting older Italians in this regard, including relationships and contacts with family members, neighbours, friends and the wider society. The connection with elder abuse will be also analysed, as a clear association has been found between social isolation and elder abuse. Finally, recent evidence suggests also that migrants might experience these phenomena differently than native Italians. In particular, findings concerning the Albanian and Moroccan ethnic groups (two of the largest in the country) show that their relatively large networks of close family members and other relatives protect them from social isolation, but not from loneliness, due to the lack of relationships with non-kin co-ethnic peers.

UNEQUAL SOCIAL RELATIONSHIPS: EVIDENCE FROM ENGLAND

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Growing evidence points to the influence of social relationships on morbidity and mortality outcomes in later life. With the quantity and quality of individuals’ social relationships increasingly a concern for public health, this paper explores the scale and nature of inequalities that characterise the social relationships of people aged 50 and over in England. A central focus is on social isolation and loneliness. The paper draws on evidence from a multi-stage scoping review of inequalities in later life, conducted within the methodological framework suggested by Arksey and O’Malley (2005). The review explores inequalities in terms of personal social relationships that are associated with the characteristics of gender, age, ethnicity, socio-economic status, and place of residence. The review process assesses not only the quality and strength of evidence concerning unequal social relationships in later life, but also identifies promising opportunities for interventions to narrow inequalities in such relationships.

SOCIAL RELATIONS ACROSS THE LIFE COURSE: PATHWAYS TO AND FROM SOCIAL EXCLUSION


Research on old-age social exclusion seldom takes a life course perspective into account. Therefore, this study aims to explore how older adults experience social relations across the life course and how inclusion in or exclusion from social relations is associated with other social exclusion dimensions (e.g. material resources and participation). Data were collected through 44 life story interviews with older adults (60+) living in Belgium. The interview scheme was based on McAdam’s life story method (2008). Findings reveal that social relations can help to cope with experiences of exclusion and might protect from exclusion (e.g. material resources). Besides, exclusion from meaningful social relations earlier in life has lifelong influences. As social relations and events in social networks affected older adults’ social exclusion, the principle of linked lives was supported by this study. Conversely, life stories also revealed older adult’s influence on other lives.

HEALTH AND WELL-BEING IMPACTS OF BOTH SOCIAL CONNECTION AND LONELINESS AMONG OLDER PEOPLE

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There is a growing body of research that links loneliness and isolation to greater ill-health and shorter life spans. This presentation will provide results from the New Zealand Longitudinal Study of Ageing (NZLSA). Amartya Sen’s capabilities approach has formed the conceptual basis of the theoretical framework of this research programme (Sen, 1999). Two survey waves of a national random sample in excess of 3,000 older New Zealand citizens aged between 50 to 86 years have been carried out, which included scales and various questions on health, well-being, social connections and loneliness. The results demonstrated highly significant relationships between the domain scales and the health and well-being scores. Higher loneliness scores were strongly associated with lower health and well-being scores, whereas higher social connection scores were strongly associated with higher levels of health and well-being. The analysis and conclusions include attention to likely causal connections and policy implications.