



# The relationship between wealth and loneliness among older people across Europe: Is social participation protective?



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## ABSTRACT

**Objective.** 1. Examine the relationship between household wealth, social participation and loneliness among older people across Europe. 2. Investigate whether relationships vary by type of social participation (charity/volunteer work, sports/social clubs, educational/training course, and political/community organisations) and gender. 3. Examine whether social participation moderates the association between wealth and loneliness.

**Methods.** Data (N = 29,795) were taken from the fifth wave of the Survey of Health, Ageing and Retirement in Europe (SHARE), which was collected during 2013 from 14 European countries. Loneliness was measured using the short version of the Revised-University of California, Los Angeles (R-UCLA) Loneliness Scale. We used multi-level logistic models stratified by gender to examine the relationships between variables, with individuals nested within countries.

**Results.** The risk of loneliness was highest in the least wealthy groups and lowest in the wealthiest groups. Frequent social participation was associated with a lower risk of loneliness and moderated the association between household wealth and loneliness, particularly among men. Compared to the wealthiest men who often took part in formal social activities, the least wealthy men who did not participate had greater risk of loneliness (OR = 1.91, 95% CI: 1.44 to 2.51). This increased risk was not observed among the least wealthy men who reported frequent participation in formal social activities (OR = 1.12, 95% CI: 0.76 to 1.67).

**Conclusion.** Participation in external social activities may help to reduce loneliness among older adults and potentially acts as a buffer against the adverse effects of socioeconomic disadvantage.

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## 1. Introduction

European societies are facing unprecedented demographic change due to increasing longevity and declining birth rates. It is estimated that the proportion of people aged 65 years and over in the European Union will increase to around 30% of the total population by 2060, and the proportion of people aged over 80 years will more than double, reaching 12% of the population (Davies, 2014). Although life expectancy is approximately 5.5 years higher for women, the gender difference in healthy life-years is considerably narrower, only 0.1 years in 2013 (Eurostat, 2015). As a consequence, future years will likely see a greater number of elderly individuals, particularly women, living alone and experiencing multiple health conditions. This may lead to an increasing

number of people affected by feelings of loneliness and social isolation, which may particularly impact on the least advantaged in society.

Loneliness is thought to arise as a result of the deficit between the actual and expected number, or quality, of social interactions and relations (Yang and Victor, 2011). It is equivalent to feelings of social isolation, but is not the same as objective social isolation, when individuals are actually lacking in social contact or relationships (Hawkey and Cacioppo, 2010). Therefore, it is possible to be married and have a rich social life, but still experience a feeling of loneliness, and also to live with little social contact and not feel socially isolated. Loneliness is associated with an increased mortality risk (by 26% in a recent meta-analysis), making it comparable to well-established risk factors such as smoking and physical inactivity (Holt-Lunstad et al., 2015). Longitudinal studies demonstrate that loneliness is associated with increased blood pressure and incident coronary heart disease (Hawkey et al., 2010; Thurston and Kubzansky, 2009), as well as a decline in cognitive function and increased risk of late-life dementia, especially among those with fewer educational qualifications (Shankar et al., 2013; Wilson et al., 2007). Higher levels of loneliness are also linked to more physician consultations (Ellaway et al., 1999; Gerst-Emerson and Jayawardhana,

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2015). Preventing loneliness is therefore an increasing public health priority (Equal Opportunities Committee, 2015; Nicole and Hanratty, 2012).

Loneliness is influenced by a myriad of factors including age, marital status, social networks and participation, functional limitations and mental health (Aartsen and Jylha, 2011; Bosma et al., 2015; Cacioppo et al., 2010; Fokkema et al., 2012; Hansen and Slagvold, 2015). Loneliness affects individuals of any age (Yang and Victor, 2011), but older people are particularly susceptible as a result of losing close friends and relatives, as well as the increased prevalence of limiting health conditions. Gender differences in loneliness exist; older women frequently report higher levels of loneliness compared to men (Fokkema et al., 2012; Hansen and Slagvold, 2015). These differences are largely explained by health status, living arrangements and socioeconomic position (Hansen and Slagvold, 2015). Gender may also moderate the influence of particular risk factors for loneliness. For example, divorced men report higher levels of loneliness compared to women, which may be due to the greater sense of support they generally derive from a partner and smaller support networks (Dykstra and Fokkema, 2007). In addition, several studies demonstrate that participation in formal activities, such as volunteering and attending social clubs, is associated with reduced loneliness in later life (Croezen et al., 2015; Gilmour, 2012; Heaven et al., 2013).

A disadvantaged socioeconomic position is linked with loneliness (Aylaz et al., 2012; Bosma et al., 2015; Hansen and Slagvold, 2015; Victor et al., 2005), but in general, studies have rarely adopted an inequalities lens. Socioeconomic inequalities in loneliness may arise via a number of pathways. Individuals with less income or wealth may not have the financial resources to fully participate in society and visit friends and family. They are more likely to have limiting physical and mental health conditions that make it more difficult to leave home, navigate the local environment, and interact with others. Those with a disadvantaged socioeconomic position are more likely to be widowed; one of the strongest risk factors for loneliness (Pinquart, 2003). Individuals with fewer educational qualifications also may not have had as many opportunities to develop social networks as those with higher education, as a result of longer working hours, the increased risk of unemployment and insecure employment throughout the life course (Näswall and De Witte, 2003).

Opportunities for social contact may lessen in older age as individuals retire from the labour force, potentially losing their social roles and associated sense of purpose and identity (Heaven et al., 2013). Whilst participation in formal social activities may help prevent loneliness in later life, several barriers to social participation exist, including disability, a lack of supportive community environment and diminished financial resources (Goll et al., 2015). It is therefore plausible that social participation may widen or narrow socioeconomic inequalities in loneliness. If those in a more advantaged socioeconomic position are more likely to participate in community groups and events, inequality may increase. However, inequalities in loneliness may narrow if those in a disadvantaged position benefit more from social participation.

The present study takes a social inequalities approach to loneliness and focuses on the influence of social participation, defined by attending external activities, such as social clubs or volunteering. It aims to first describe the relationship between wealth, social participation and loneliness among older people across Europe. Second, it examines whether the relationships differ by type of social participation and gender. Third, it investigates whether social participation may moderate any relationship between wealth and loneliness.

## 2. Methods

### 2.1. Data

Data were taken from the fifth wave (release 1.1.0) of the Survey of Health, Ageing and Retirement in Europe (SHARE) (Börsch-Supan,

2015), collected during 2013. It included a representative sample of non-institutionalised individuals born in 1962 or earlier who had their regular domicile in the respective country (Austria, Belgium, Switzerland, Czech Republic, Germany, Denmark, Estonia, Spain, France, Italy, Luxembourg, Netherlands, Sweden and Slovenia). Spouses or partners were also eligible to be interviewed, regardless of age (Börsch-Supan et al., 2013) and were included in the analyses. Data were collected by face-to-face computer assisted personal interviewing (CAPI) and all aspects of the survey, including translation procedures, are subject to strict quality standards (Börsch-Supan et al., 2013). Further methodological details about the survey can be found elsewhere (Malter and Börsch-Supan, 2015). We included individuals aged 65 years or over who were not in the paid labour force ( $N = 31,639$ ), a subset of the original SHARE sample. This included individuals who self-reported as retired, unemployed, looking after the home or family, or permanently sick or disabled, which is consistent with previous research (Coe and Zammaro, 2011).

### 2.2. Outcome

Loneliness was measured using the short version of the Revised-University of California at Los Angeles Loneliness scale (R-UCLA) (Hughes et al., 2004), which is a frequently used and validated indicator of loneliness (Boss et al., 2015; Samuel et al., 2015), particularly within the United States and United Kingdom (Luo et al., 2012; Pikhartova et al., 2014; Steptoe et al., 2013). The scale was recently harmonised for use in SHARE (Malter and Börsch-Supan, 2013), and few studies have used it in a cross-national context, to date (Shiovitz-Ezra, 2015; Wagner and Brandt, 2015). It includes the following three questions: how much of the time do you feel a lack of companionship; how much of the time do you feel left out; how much of the time do you feel isolated from others? The answers are recorded using three categories: often, some of the time, hardly ever/never. These form a scale that ranges from three to nine, whereby three corresponds to not feeling lonely and nine indicates the highest level of loneliness. Previous research has often treated the measure as continuous (Hughes et al., 2004), however, the distribution of responses is not normal. Therefore, we converted it to a binary measure. Country-specific quartiles were calculated and we defined those who fell into the first, second and third quartiles as “not lonely” and those in the fourth quartile as “lonely”, similar to the method used in a previous paper (Pikhartova et al., 2014).

### 2.3. Independent variables

Wealth was selected as the primary measure of socioeconomic position as it reflects the accumulation of assets across the life course and may be a more appropriate measure of economic resources among retired populations (Demakakos et al., 2015). Self-reported wealth was measured by the sum of household financial (e.g. money in bank accounts, stocks or government bonds) and real (e.g. value of own residence or vehicle) assets, minus liabilities (e.g. mortgage or credit card debt). Wealth was equivalised using the Organisation for Economic Co-operation and Development (OECD) equivalence scale (OECD, 2006) and divided into country-specific quintiles. Missing values were multiply imputed by the SHARE team (De Luca et al., 2015).

Social participation was measured by a combination of questionnaire items that asked whether the respondents had, in the past 12 months, participated in voluntary or charity work, attended an educational or training course, gone to a sport, social or other kind of club, or taken part in a political or community-related organisation. Answers were categorised into a combined binary variable distinguishing those who participated in any of the above activities frequently (almost every day or week) or infrequently (almost every month, less often, or never). Sensitivity analysis was conducted, increasing the frequent social participation group to those who did so almost every day, week or

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