

REVISIÓN DE FACTORES RELACIONADOS CON LA SOLEDAD EN PERSONAS MAYORES

Título	Revista	Factores relacionados con la soledad	Resumen
Ageing, health, loneliness and wellbeing	Social Indicators Research	Integración social, red social, género	Older people experience high rates of depression and suicide, yet they make a positive net contribution to the economy through activities such as employment, volunteering, and looking after grandchildren. The wellbeing of older people is therefore important not only on moral but also economic grounds. To understand which policies will facilitate the overall wellbeing, we use Australian data to explore the determinants of wellbeing and loneliness of natives and migrants in the 65–85 age group, taking into account the extent to which social networks contribute to the wellbeing and possible reduction in loneliness. Results show that social networks have a strong positive effect on wellbeing and a strong effect in reducing loneliness among both natives and migrants. The positive effect of social networks is stronger for females than males
Centenarians' experience of (non-) loneliness—Life lessons	Educational Gerontology	Optimismo, actividad a lo largo de la vida	This article presents the results of qualitative research carried out among Polish centenarians who have not experienced loneliness. Objectives: An attempt to find factors protecting against loneliness. A total of 17 cases were included in the research. Method: A collective case study (Stake, 2009) with in-depth interview was applied to the research carried out by the authors. The results show that activity together with personal characteristics (lifelong optimism) allows the building of positive social relationships and contribute to protection against loneliness among the oldest old. Discussion and Implications: The centenarians interviewed experienced many traumatic events in their lives and still they did not know the feeling of loneliness. The cases researched were diverse with respect to social and economic status, health condition, and family status but the common aspect was their lifetime activity and their high level of optimism. The lifelong activity of the respondents allowed them to build social relationships and establish new acquaintanceships, both intra- and intergenerationally. Promoting examples of “positive long-livers” may play preventive role and contribute to the quality of life in late old age, and as societies are ageing, the results are also important for public health.
Sibling relationships in older adulthood: Links with loneliness and well-being	Journal of Family Psychology	Relación conflictiva con hermano/a, favoritismo parental, afecto hermano/a	Researchers have documented associations between family relationships and a variety of well-being outcomes. Yet, sibling relationships, the longest lasting relationships in most people’s lives, have received very little research attention beyond young adulthood. The goals of the current study were to: provide descriptive information about sibling relationships in later adulthood, investigate predictors of individual differences in sibling relationship quality, and examine associations among sibling relationship quality, loneliness, and well-being in later adulthood. The sample included 608 older adults (329 men, 279 women) who were 64.6 years old ($SD = 4.58$) on average. Participants provided self-report data about their relationships and well-being. Results showed that older adults reported high levels of sibling warmth and low levels of sibling conflict and parental favoritism. Sister-sister pairs had warmer sibling relationships than other gender-compositions. Sibling conflict and parental favoritism were positively associated with symptoms of depression, anxiety, hostility and loneliness. Sibling warmth was negatively associated with loneliness. Loneliness partially mediated the associations between sibling relationship quality

			and well-being. Results from this study highlight the importance of sibling relationships in older adults' health and well-being.
Nature of retirement and loneliness: The moderating roles of social support	Journal of Applied Gerontology	Naturaleza de la jubilación, apoyo social	Drawing from the social convoy model, this study investigates whether the nature of retirement (voluntary or involuntary) influences loneliness among retirees, and how different social support types may affect this association. Data come from the 2014 Health and Retirement Study (<i>N</i> = 2,055). Five social support types were identified: weak, ambivalent, strong positive, children strain, and family strain. Involuntary retirement was associated with a higher level of loneliness; however, involuntarily retired individuals with strong positive social support had a relatively lower level of loneliness. Findings from this study suggest that social support may alleviate the negative impacts of involuntary retirement. Our research provides a theoretical basis for developing a practical program to reduce the negative impacts of involuntary retirement on well-being.
Predictors of loneliness among older lesbian and gay people	Journal of Homosexuality	Soltería, menor conexión con la comunidad LG, edad, homofobia interiorizada, experiencias vitales de discriminación, experiencias recientes de discriminación	This study sought to understand the social and individual factors that predict loneliness among older lesbian and gay people in Australia. A sample of 508 gay men and 241 lesbian women, aged 60 and over, completed a survey including measures of loneliness, internalized homonegativity, sexual orientation discrimination, and connectedness to lesbian and gay communities. A multivariable linear regression predicting loneliness was conducted. Not being in an intimate relationship and having less connection to lesbian and gay communities were significant predictors of loneliness for both older lesbian women and gay men. For the men, younger age, internalized homonegativity and more frequent lifetime experiences of sexual orientation discrimination also appeared to predict greater likelihood of loneliness. More frequent recent experiences of sexual orientation discrimination predicted loneliness for the women. The findings confirmed loneliness as an issue of concern among older lesbian and gay people and identified factors amenable to intervention to address loneliness.
Loneliness perceptions in older portuguese gay and bisexual men	Journal of Homosexuality	Apoyo social, discriminación	The purpose of this study was to explore the perceptions of loneliness among gay and bisexual men in Portugal over 60 years old. Despite the growth of the older population in Portugal, the social isolation and loneliness experiences in older gay and bisexual men is only beginning to be understood. A structured electronic inquiry with 35 gay and bisexual men over 60 years of age from Portugal (mean age was 66.45 years (SD = 4.45) was used, ranging from 60 to 77 years). Data were analyzed using thematic analysis, comparing self-perceived loneliness levels by sexual orientation and by levels of loneliness. The recurrent themes in the narratives of loneliness perception of the participants in the study were as follows: Mental Health, Support System, Dating and Relationships, Discrimination, Coping, Personal Characteristics, and Coming-out issues. Differences between sexual orientation and levels of loneliness were also found.
Living alone, loneliness, and depressive symptoms among indonesian older women	Health Care for Women International	Vivir sola, síntomas depresivos	In this study, the researchers aimed to investigate the factors associated with loneliness and depressive symptoms among Indonesian older women. A secondary data analysis of the Indonesian Family Life Survey-5 was conducted. Data from 1233 women aged 60 years or above were analyzed using logistic regression. Results indicated fewer than one in five older women lived alone, half reported loneliness, and 16% reported depressive symptoms. Living alone was significantly associated with loneliness and depressive symptoms. Different factors were

			associated with loneliness and depressive symptoms. Loneliness and depression were found to be independent constructs of older women living alone in Indonesia.
Volunteering and loneliness in older adults: A parallel mediation model	Aging & Mental Health	Voluntariado (mediado por control percibido y autoeficacia social)	This study aimed to examine the relationship between participation in volunteer work and loneliness among older adults, and to explore the mediating role of perceived control and perceived social self-efficacy in this association. Method: This study was developed as a secondary data analysis using the data sampled from the 2016 Health and Retirement Study in USA. The sample comprised 9,944 individuals aged between 65 and 107 years (mean = 75.94, SD = 7.70; 59.4% females). Using a multi-item survey questionnaire, frequent participation in volunteer youth work and charity work, loneliness, perceived control, and social self-efficacy were assessed. To examine the mediating effects of perceived control and social self-efficacy on the association between volunteer work and loneliness, the bootstrapping technique was performed. Results: Two forms of volunteer works, namely, volunteer youth work and charity work, significantly predicted perceived control, social self-efficacy, and lower levels of loneliness. Perceived control and social self-efficacy appeared to significantly mediate the relationship between volunteer activities and loneliness. Conclusion: The study's findings put forward a need to develop policy provisions that facilitate supporting systems and organizations for life-long education and recruitment of older volunteers. Community-based organizations should create and promote volunteer opportunities in older adults, thereby alleviating later-life loneliness
The relation between loneliness or positive solitude with posttraumatic symptoms of Holocaust survivors	The Journal of Gerontopsychology and Geriatric Psychiatry	Soledad positiva, síntomas postraumáticos, aislamiento	The current study examined how reported early life experiences of isolation encountered by Holocaust survivors affect the relationship between their current feeling of loneliness/feeling of positive solitude and their level of posttraumatic stress symptoms. To this end, using a convenient sampling methodology 81 community-dwelling older adults reported the number of years they had been alone or the level of loneliness they had experienced during the Holocaust, their level of current loneliness/positive solitude, and their level of posttraumatic stress symptoms. More years spent alone during the Holocaust were related to a stronger positive association between loneliness and posttraumatic stress symptoms; feeling lonelier was also related to a stronger negative association between positive solitude and posttraumatic stress symptoms. The findings emphasize that survivors who reported more years of isolation during the Holocaust are prone to be more sensitive when associated with current loneliness to the deleterious results of posttraumatic stress symptoms. However, survivors who felt lonelier during the Holocaust demonstrate lower levels of posttraumatic stress symptoms when reporting on a higher level of positive solitude. Intervention focus on improving positive solitude capability may become beneficial for those suffering from loneliness and posttraumatic stress symptoms.
Gratitude and loneliness: Enhancing health and well-being in older adults	Research on Aging	Gratitud, salud	We experimentally investigated gratitude's impact on loneliness and health in older adults. Participants were assigned to a daily gratitude writing exercise (treatment group) or a control group. Self-reported loneliness and health (i.e., subjective well-being, subjective health, health symptoms) were measured daily over a 3-week period. In support of our hypotheses, within-person variability in gratitude predicted differences in loneliness and health. Furthermore, those in the treatment group showed stronger cumulative effects of gratitude on loneliness and health symptoms when aggregated across the 20-day study. Additionally, a series of conditional,

			<p>multilevel indirect effect models found that loneliness acted as a mechanism for gratitude's differential impact on subjective well-being and health symptoms across conditions. Taken together, this study provides initial evidence that a simple gratitude exercise can strengthen associations among daily gratitude and loneliness and, consequently, improve health, for older adults.</p>
<p>Changes in prevalence of loneliness over time in institutional settings, and associated factors</p>	<p>Archives of Gerontology and Geriatrics</p>	<p>Sentirse depresivo/a</p>	<p>The aim of this study was to examine changes in the prevalence of loneliness over time from 2011 to 2017 in long-term care facilities; and its related factors. Material and methods: Repeated cross-sectional studies exploring loneliness and its associated factors among residents in long-term care facilities were conducted in Helsinki, Finland in 2011 (N = 4966) and 2017 (N = 3767). Residents in temporary respite care or with severe cognitive impairment, and those unable or refusing to respond to the loneliness item were excluded. The total number of participants in this analysis was 1563 in 2011, and 1367 in 2017. In both samples, we used the same loneliness measurement by asking "Do you suffer from loneliness?" (never/sometimes/often or always). When comparing the samples in order to reduce the effect of confounding between them, we used propensity score matching. A multivariable logistic regression model explored the relationship between various characteristics and loneliness. Results: Loneliness showed no change in prevalence over time: propensity score-adjusted loneliness was 36 % in 2011 and 2017. In the multivariate logistic regression model, feeling depressed was the only independent characteristic associated with loneliness. Of the respondents who did not feel depressed, 24 % suffered from loneliness at least sometimes. Among the respondents who felt depressed, the respective figure was 55 %. Conclusion: Loneliness is common in institutional settings. It remained stable, and not decreased over time. Because loneliness impairs the well-being, quality of life and health of residents, it needs to be addressed. Screening loneliness and developing interventions to alleviate it, is essential.</p>
<p>Loneliness as a mediator of perceived discrimination and depression: Examining education contingencies</p>	<p>The International Journal of Aging & Human Development</p>	<p>Discriminación percibida, depresión, educación</p>	<p>This study examines whether loneliness explains the association between perceived everyday discrimination and depressive symptoms among older adults as well as whether this indirect pathway differs by education. Three waves (2006, 2010, and 2014) of the Health and Retirement Study (N = 7,130) are analyzed with random-effects models that adjust for repeated observations and fixed-effects models that control for all time-stable influences. Everyday discrimination is associated with loneliness and depressive symptoms but more weakly in fixed-effects models. The association between discrimination and loneliness is stronger at low educational attainment, leading discrimination to be indirectly associated with depressive symptoms through loneliness only at low education. The consequences of everyday discrimination for depression in late life are limited to older adults with low education due to education-contingent associations with loneliness. Perceived discrimination may have broad health consequences through loneliness, especially for older adults at low education</p>
<p>Examining the influence of early-life and recent traumatic events on loneliness in centenarians</p>	<p>The International Journal of Aging & Human Development</p>	<p>Eventos traumáticos recientes y pasados</p>	<p>Early-life traumatic experiences have lasting implications for late-life socio-emotional development, contributing to a greater prevalence of poor mental health in very old age. The purpose of this study was to examine the influence of early-life and recent traumatic life experiences on loneliness among centenarians. A total of 154 centenarians participated in a semistructured interview. The time of traumatic occurrence and type of trauma experienced</p>

			influence loneliness in centenarians. Experiencing a natural disaster 70 or more years ago significantly predicted loneliness. Terror management theory proposes that coming to terms with one's mortality represents an underlying source of anxiety that can influence human behavior to create both immediate and future defenses. Evidence from this study can be used to improve how aging service practitioners integrate reminiscence or life-review therapy or counseling within clinical or educational settings.
Loneliness in the older adult marriage: Associations with dyadic aversion, indifference, and ambivalence	Journal of Social and Personal Relationships	Aversión diádica, indiferencia, ambivalencia	Marriage protects against loneliness, but not all marriages are equally protective. While marriage is a highly interdependent relationship, loneliness in marital dyads has received very little research attention. Unlike most studies proposing that positive and negative marital qualities independently affect loneliness at the individual level, we used a contextual approach to characterize each partner's ratings of the marriage as supportive (high support, low strain), ambivalent (high support, high strain), indifferent (low support, low strain), or aversive (low support, high strain) and examined how these qualities associate with own and partner's loneliness. Using couple data from the Wave II National Social Life, Health and Aging Project (<i>N</i> = 953 couples), we found that more than half of the older adults live in an ambivalent, indifferent, or aversive marriage. Actor-partner interdependence models showed that positive and negative marital qualities synergistically predict couple loneliness. Spouses in aversive marriages are lonelier than their supportively married counterparts (actor effect), and that marital aversion increases the loneliness of their partners (partner effect). In addition, wives (but not husbands) in indifferent marriages are lonelier than their supportively married counterparts. These effects of poor marital quality on loneliness were not ameliorated by good relationships with friends and relatives. Results highlight the prominent role of the marriage relationship for imbuing a sense of connectedness among older adults and underscore the need for additional research to identify strategies to help older adults optimize their marital relationship
Loneliness and depressive symptoms: The moderating role of the transition into retirement	Aging & Mental Health	Síntomas depresivos, jubilación	The transition to retirement implies significant changes in daily routine and in the social environment. More specifically, it requires more self-directed efforts in order to stay socially engaged. Hence, for those who suffer from loneliness, the transition to retirement could result in increased depressive symptoms due to the lack of structured daily routine. Methods: We used two waves of the Health and Retirement Study, and tested whether the transition to retirement between the two waves moderates the effects of loneliness on depressive symptoms. Results: The transition to retirement moderated the effect of loneliness in wave 1 on depressive symptoms in wave 2, such that for those who retired, the effect was stronger in comparison to those who stayed employed. Conclusions: Although many manage to easily transition into retirement, lonely older workers are at increased risk for maladjustment and the experience of depressive symptoms following retirement. This group could perhaps benefit from interventions aimed at increasing daily social interactions and establishing a socially satisfying routine.
Body image satisfaction and loneliness among young adult and older adult age cohorts	Archives of Gerontology and Geriatrics	Satisfacción con la imagen corporal	Lower body image satisfaction has been linked with greater loneliness among young adults, but this relationship has not been investigated among older adults. Objective: The purpose of the current study was to investigate the relationship between body image and loneliness among young and older adult age cohorts as well as explore stigma consciousness as a mediator between body image dissatisfaction and loneliness among older adults. Methods: Participants

			<p>consisting of 459 young adults and 353 older adults over the age of 59 completed a cross-sectional survey regarding health and perceptions of aging from fall 2017 through spring 2018. Results: Young adults had lower levels of body image satisfaction and higher levels of loneliness in comparison to older adults. The relationship between loneliness and body image satisfaction was stronger among young adults when compared to older adults. Among older adults, stigma consciousness mediated the relationship between body image satisfaction and loneliness. Conclusion: Older adults lower in body image satisfaction may be more conscious of age-based stigmas and thereby have greater loneliness.</p>
Loneliness in men 60 years and over: The association with purpose in life	American Journal of Men's Health	Salud mental pobre, propósitos en la vida	
The combined effect of functional independence, loneliness, and social engagement on older adult drinking levels	Journal of Social Work Practice in the Addictions	Independencia funcional, compromiso social y nivel de consumo de alcohol	<p>Loneliness has long been associated with older adult alcohol use; however, the relationship between loneliness and alcohol use remains complex, and poorly understood. The purpose of this study is to examine a possible causal pathway between functional independence, social engagement, loneliness, and drinking among older adults using structural equation modeling. A lower level of functional independence was a significant predictor of higher levels of loneliness and lower levels of social engagement. Additionally, higher feelings of loneliness predicted higher levels of drinking and higher levels of social engagement predicted lower levels of drinking.</p>
Gender Differences in Social Support, Loneliness, and Isolation among Old Age Citizens	Peshawar Journal of Psychology and Behavioral Sciences	Género, apoyo social, aislamiento	<p>The present paper attempted to explore the impact of gender on social support, social isolation and loneliness (social and emotional) among senior citizens. In order to assess the study constructs 6-Item (short) De Jong Gierveld Loneliness Scale (1985), 6-item (short) scale developed by Hawthorne (2006) and, Social Support Scale developed by Malik (2002) were used. Standardized back translation procedure was used for the translation of the measures into Urdu. Purposive convenient sampling technique was used to draw the sample of 500 senior citizens from both urban and rural areas of the various districts of the Khyber Pakhtunkhwa province of Pakistan. The age of the participants ranged between 60 to 90 years (M = 67.59, SD= 7.54). -test analysis revealed significant gender differences on social support and its sub constructs. Moreover results demonstrated non-significant gender differences for isolation and loneliness.</p>
Trajectories of depressive symptomatology and loneliness in older adult sexual minorities and heterosexual groups	Clinical Gerontologist: The Journal of Aging and Mental Health	Síntomas depresivos, orientación sexual	<p>Objectives: This article examines whether sexual minority men and women experience greater increases in depressive symptoms and loneliness with age compared to heterosexual men and women. Methods: Using three waves of data from sexual minority (n Men = 87 and n Women = 62) and heterosexual (n Men = 1,297 and n Women = 1,362) older adults in the National Social Life, Health, and Aging Project, we used latent growth curve modeling to test whether change in depressive symptoms and loneliness varies across sexual orientation and whether annual household income and family support accounted for this change. Results: Although differences in the growth trajectories of depressive symptoms and loneliness across sexual orientation were not observed, gender differences were. Annual household income and family support more strongly influenced initial depressive symptoms and loneliness in sexual minority men and women than in heterosexual men and women. Conclusions: Trajectories of depressive symptoms and loneliness in older adulthood do not vary by sexual orientation. Economic and family resources may allow sexual minorities to cope effectively with depressive symptoms and loneliness. Clinical Implications: Clinicians should be cautious about assuming that older sexual</p>

			minority group members are more susceptible to depressive symptoms and loneliness than heterosexual groups by virtue of their sexual preference.
Understanding the mechanisms underlying the effects of loneliness on vulnerability to fraud among older adults	Journal of Elder Abuse & Neglect	Susceptibilidad a la persuasión, autocontrol, vulnerabilidad al fraude	The current study aimed to clarify the relationships among loneliness, susceptibility to persuasion, self-control, and vulnerability to fraud among older adults. Especially, we wanted to investigate whether susceptibility to persuasion mediates the association between loneliness and vulnerability to fraud, and whether self-control moderates the relationship in this process. A moderated mediation model was examined with 252 Chinese older adults (M age = 67.94, SD = 6.27) who completed questionnaires regarding loneliness, susceptibility to persuasion, self-control, and vulnerability to fraud. The results revealed that loneliness significantly predicted older adults' vulnerability to fraud and susceptibility to persuasion partially mediated this relationship. Moreover, this mediating effect was only significant for older adults with low self-control. These findings enrich our understanding of how loneliness affects older adults' vulnerability to fraud and provide practical guidance for establishing protections against fraud targeting older adults. (PsycInfo Database Record (c) 2022 APA, all rights reserved) (Source: journal abstract)
Productive engagement, sleep-wake disturbances, and loneliness: SEM analysis of depressive symptoms of community-dwelling Chinese elders	Aging & Mental Health	Depresión, compromiso de productividad, alteraciones sueño-vigilia	This study set out to examine the bidirectional relationship between loneliness and productive engagement, delineate the association between different dimensions of productive engagement and depression, and explore the potential mediating effect of sleep-wake disturbances in the relationship between loneliness and/or productive engagement and depression. Method: Data from a total of 4427 older adults in China were included in the analysis. Factor analysis was conducted to explore a set of discrete dimensions of productive engagement (recreational activities, group artistic and learning activities, sportive activities, paid work, volunteering, and family caregiving). Structural equation modeling was used to assess the potential relationships between loneliness, multidimensional productive engagement, sleep-wake disturbances, and depression. Results: All dimensions of productive engagement were found to be negatively associated with loneliness, except for paid work which was associated with elevated level of self-reported loneliness. Sleep-wake disturbances mediated the relationship between leisure activities and depression but this was not significantly related to other forms of productive engagement. The direct effect of productive engagement on depression varied, in that leisure activities and family caregiving were negatively associated with depressive symptoms, while doing paid work was positively associated with depressive symptoms. Volunteering was not significantly related to depressive symptoms. Discussion: This study makes an important contribution to the research on the relationship between loneliness, productive engagement, sleep-wake disturbances, and depression, by distinguishing the different effects of different dimensions of productive engagement. The findings provide a robust stimulus for intervention programs and other forms of social work practice seeking to mitigate depressive symptoms in older adults.
Productive engagement patterns and their association with depressive	Aging & Mental Health	Síntomas depresivos, patrones de compromiso productivo	Little is known about composite patterns of productive engagement among older people. Related, the implication of these patterns for well-being remains unclear. The present study addresses these gaps. Methods: The analytical sample comprised 2037 community-dwelling Singaporeans aged 60 years and above. We included nine productive activities and employed

<p>symptomatology, loneliness, and cognitive function among older adults</p>			<p>latent class analysis to identify prevalent patterns of productive engagement. Regression analysis was then conducted to investigate the association of these patterns with depressive symptomatology, loneliness, and cognitive function. Results: Four productive engagement patterns (Low Activity, Family Support, Moderate Working-Volunteering, and Working-Family Support) were identified. Compared with Low Activity, Moderate Working-Volunteering, and Working-Family Support related to lower levels of depressive symptomatology and loneliness, respectively, and both patterns were associated with better cognitive function. Conclusion: Productive engagement patterns are differentially linked with depressive symptomatology, loneliness, and cognitive function. We interpret these findings with reference to the role perspective. We also discuss their policy implications.</p>
<p>Profiles of social engagement and their association with loneliness and self-rated health among older Korean immigrants</p>	<p>Research on Aging</p>	<p>Perfil de compromiso social, salud autopercebida</p>	<p>The purposes of this study were to (1) develop a typology of social engagement in older Korean immigrants in the United States and (2) compare the groups in the typology regarding their level of loneliness and self-rated health. Data were drawn from the Study of Older Korean Americans covering the five geographic locations ($N = 2,149$). Using eight criterion variables concerning the type and frequency of activities, latent profile analysis identified a six-group model as the most optimal with the following groups: diverse, active, moderately social, structured, sedentary, and restricted. When the restricted group was used as the reference, the groups that were more socially engaged were found to have lower levels of loneliness. Additionally, being a member of the <i>active</i> or <i>moderately social</i> group was associated with more favorable self-ratings of health. These findings hold implications for understanding the variability of social engagement and how it relates to health and well-being.</p>
<p>Gender influence on loneliness and family and nonfamily support among older adults: The confounding role of widowhood</p>	<p>Journal of Women & Aging</p>	<p>Género, apoyo familiar, apoyo no familiar, viudez</p>	<p>Based on interviews with 465 community elders in Ekiti-State, Nigeria, this study addressed the questions: (a) Do older men and women differ in self-reported loneliness, family and nonfamily support?; and (b) If so, is this relationship maintained when controlling for widowhood, age, social-engagements, extroversion, and neuroticism? Three independent models were tested using one-way MANOVA and MANCOVA. Compared to males, females reported more loneliness and less family support. However, these outcomes became nonexistent after excluding widowhood. Gender maintained significance after excluding other covariates. The study buttresses the primary importance of widowhood in the gender differences found in later-life loneliness and family supports.</p>
<p>The aging narcissus: Just a myth? Narcissism moderates the age-loneliness relationship in older age</p>	<p>Frontiers in Psychology</p>	<p>Narcisismo, edad</p>	<p>Recent research has indicated that sub-clinical narcissism may be related to positive outcomes in respect of mental and physical health, and is positively related to an extended lifespan. Research has also indicated narcissism levels may decline over the lifespan of an individual. The aims of the present study were to investigate these issues, exploring age-related differences in levels and outcomes of narcissism. Specifically, narcissism's relationship with loneliness, a deleterious but pervasive state among older-age individuals, was assessed. Methods: A total of 100 middle-aged ($M_{AGE} = 48.07$; $SD = 5.27$; 53% female) and 100 older-aged participants ($M_{AGE} = 70.89$; $SD = 5.97$; 51% female) completed the 40-item Narcissistic Personality Inventory and the UCLA Loneliness Scale, Version 3. Results: Older-age participants had significantly lower levels of narcissism, and significantly higher levels of loneliness than middle-aged participants. Age and narcissism significantly predicted self-reported loneliness levels, with narcissism moderating the</p>

			relationship between age and loneliness. Conclusion: This study supports existing work, indicating that a degree of narcissism is of benefit to psychological functioning in respect of age-related loneliness, and is found to be a protective factor in mental health
Loneliness interacts with family relationship in relation to cognitive function in Chinese older adults	International Psychogeriatrics	Relación familiar y función cognitiva	Loneliness and social networks have been extensively studied in relation to cognitive impairments, but how they interact with each other in relation to cognition is still unclear. This study aimed at exploring the interaction of loneliness and various types of social networks in relation to cognition in older adults. : Results suggested that a non-confiding relationship with family members might put lonely older adults at risk of cognitive impairment. Our study might have implications on designing psychosocial intervention for those who are vulnerable to loneliness as an early prevention of neurocognitive impairments.
Marital quality and loneliness in later life: A dyadic analysis of older married couples in Ireland	Journal of Social and Personal Relationships	Igualdad marital	Loneliness is not merely an unpleasant experience but is harmful for older adults' health and well-being as well. While marriage buffers against loneliness in later life, even married adults experience loneliness, and aspects of adults' marriages may either protect against or actually foster loneliness among spouses. The current study analyzed dyadic data from 1,114 opposite-sex married Irish couples who participated in the initial wave of The Irish Longitudinal Study on Ageing (2009–2011) in order to extend findings of two prior dyadic studies of marital quality and loneliness in the U.S. to older married couples in Ireland and to directly compare two theoretical and methodological frameworks used by these studies to explain associations between husbands' and wives' reports of marital quality and loneliness in later life. Results revealed that both spouses' perceptions of positive and negative marital quality were significantly related with husbands' and wives' loneliness and that spouses' reports of loneliness were significantly related with one another. Findings also indicated that associations between marital quality and loneliness were similar for Irish and American couples in later life. Comparison of differing modeling strategies sug
The effect of covid-19 outbreak on older adults' hopelessness, loneliness and spiritual well-being in turkey	Journal of Religion and Health	Desesperanza, bienestar espiritual	The aim of this study was to determine the hopelessness, loneliness and spiritual well-being of older adults and the relationship between these three concepts during the COVID-19 pandemic. This research used a cross-sectional, descriptive approach. Data were collected between October 13 and November 13, 2020, with 476 individuals over 65 years living in three different cities in Turkey. Data were collected using a demographic information form, Beck Hopelessness Scale (BHS), Loneliness Scale (UCLA-LS) and Spiritual Well-being Scale (FACIT-Sp). During the COVID-19 outbreak, it was found that there was a significant negative relationship between hopelessness, loneliness and spiritual well-being of older adults. In this study, it was found that during the COVID-19 pandemic, the level of hopelessness and loneliness among older adults was below the average score, and their spiritual well-being levels were moderate. Based on the findings of the present study, it is recommended that practices which increase hope, strengthen social ties and spiritual support, should be implemented for older individuals during the COVID-19 pandemic period or any other times during which social distancing is mandatory.
The roles of life satisfaction and community recreational facilities in the	Clinical Gerontologist	Satisfacción con la vida, facilidades recreativas	This study examined the mediating effect of life satisfaction and the moderating effect of the availability of community recreational facilities (CRF) in the association between loneliness and

<p>relationship between loneliness and depression in older adults</p>		<p>comunitarias, depresión y otros.</p>	<p>depression in rural older adults and urban older adults, respectively. Methods Quantitative data collected from 7547 Chinese older adults were analyzed using the SPSS macro PROCESS to test a moderated mediation model with life satisfaction as the mediator and CRF availability and residency type (rural vs. urban) as moderators. Results Loneliness negatively predicted life satisfaction, life satisfaction negatively predicted depression, and loneliness positively predicted depression. The interaction of loneliness and CRF availability had a significant effect on depression for urban older adults but not for rural older adults. The direct impact of loneliness on depression differed significantly between rural and urban older adults. Conclusions Life satisfaction mediated the association between loneliness and depression in both rural and urban older adults; CRF availability unexpectedly boosted the effect of loneliness on depression in urban older adults but not in rural older adults. Given the same level of loneliness, urban older adults were more likely to be depressed than rural older adults. Clinical Implications Psychogeriatric practitioners may embed life satisfaction into intervention programs to minimize depression among older adults. Public administrators should examine the utilization of public facilities to avoid wasted resources and counterproductive effects on older adults. Lonely urban older adults deserve special attention.</p>
<p>The link between social anxiety and intimate loneliness is stronger for older adults than for younger adults</p>	<p>Aging & Mental Health</p>	<p>Ansiedad social, edad</p>	<p>The current study focuses on the association between social anxiety (e.g. fear of social interactions or negative judgment by others) and intimate loneliness (lacking meaningful relationships, i.e. having low quantity/quality of intimate companionship) in older and younger adults. We assessed whether social anxiety, a factor which hampers intimacy, may be associated with intimate loneliness to a greater extent in older adults versus younger adults. Method: Measures of loneliness (Revised UCLA loneliness scale) and social anxiety (Leibowitz social anxiety scale) were obtained from 342 participants (220 younger adults, age = 19–40, and 122 older adults, age = 61–89). Results: Age differences were evident for non-intimate types of loneliness but not for intimate loneliness. Further, older adults were less socially anxious. Critically, the strength of the social anxiety-intimate loneliness link was more robust among older adults. Effects remained significant after controlling for demographic and computer/social media variables. Conclusions: Older adults with high levels of social anxiety displayed greater intimate loneliness relative to younger adults. On a theoretical level, the results reveal that the pruning mechanism of investing more in closer and more rewarding relationships among older adults may be challenged under high social anxiety. The results suggest that older adults with higher intimate loneliness may benefit from interventions aimed at decreasing their social anxiety.</p>
<p>Mediating role of neuroticism in the association between loneliness and cognitive function among community-dwelling older adults</p>	<p>Australasian Journal of Ageing</p>	<p>Neuroticismo, funcionamiento cognitivo</p>	<p>The main aim of this study was to examine whether neuroticism mediates the association between loneliness and cognitive function in older adults. Methods: This study involved 2322 representative community residents aged 60–92 years in Peninsular Malaysia. Cognition was measured by Mini-Mental State Examination (MMSE), loneliness was assessed by three-item loneliness scale, and neuroticism was assessed by the Short-Form Revised Eysenck Personality Questionnaire. Hierarchical multiple linear regression and Sobel tests were used for mediation analyses. Results: Both loneliness ($\beta = -0.04$, $P = 0.03$) and neuroticism ($\beta = -0.07$, $P < 0.001$) were negatively and significantly associated with cognitive function, and most importantly, neuroticism mediated the association between loneliness and cognition (from $\beta = -0.04$, $P = 0.03$</p>

			to $\beta = -0.03$, $P = 0.10$). Conclusion: Neuroticism may be the potential mechanism underlying the relationship between loneliness and cognitive function in older persons.
Two-wave dyadic analysis of marital quality and loneliness in later life: Results from the Irish Longitudinal Study on Ageing	Research on Aging	Calidad matrimonio	This study examines dyadic reports of marital quality and loneliness over a two-year period among 932 older married couples resident in Ireland. Data from the first two waves of The Irish Longitudinal Study on Ageing (2009–2013) were analyzed to determine whether husbands' and wives' marital quality and loneliness at baseline predicted both spouses' loneliness 2 years later. Two-wave lagged models tested the cognitive perspective on loneliness, the induction hypothesis, and actor–partner interdependence. Results indicated that perceptions of negative marital quality at baseline were related with greater loneliness 2 years later, supporting the cognitive perspective. Further, both spouses' reports of loneliness at baseline were related with loneliness 2 years later, supporting the induction hypothesis. Partners' reports of marital quality were not related with future loneliness, failing to support actor–partner interdependence. I discuss the implications of these findings for theory, practice, and future research concerning intimate relationships and loneliness in later life.
Social network size, loneliness, physical functioning and depressive symptoms among older adults: Examining reciprocal associations in four waves of the Longitudinal Aging Study Amsterdam (LASA)	International Journal of Geriatric Psychiatry	Tamaño red social, funcionamiento físico, síntomas depresivos	Previous research indicates that social isolation, loneliness, physical dysfunction and depressive symptoms are interrelated factors, little is known about the potential pathways among them. The aim of the study is to analyse simultaneously reciprocal relationships that could exist between the four factors to clarify potential mediation effects. Methods: Within a large representative sample of older people in the Longitudinal Aging Study Amsterdam (LASA), participants aged 75 and over were followed up over a period of 11 years (four waves). We tested cross-lagged and autoregressive longitudinal associations of social network size, loneliness, physical functioning and depressive symptoms using structural equation modelling (SEM). Results: Several statistically significant cross-lagged associations were found: decreasing physical functioning (Coef. = -0.03 ; $p < 0.05$), as well as social network size (Coef. = -0.02 ; $p < 0.05$), predicted higher levels of loneliness, which predicted an increase in depressive symptoms (Coef. = 0.17 ; $p < 0.05$) and further reduction of social network (Coef. = -0.20 ; $p < 0.05$). Decreasing physical functioning also predicted an increase in depressive symptoms (Coef. = -0.08 ; $p < 0.05$). All autoregressive associations were statistically significant. Conclusion: Interventions focused on promoting social activities among older adults after negative life events, such as loss of social contacts or declining physical function, may alleviate feelings of loneliness and act as mental health protector.
Gender differences in the associations between forms of social engagements and loneliness in a sample of nigerian older adults: A cross-sectional survey	Psychological Studies	Género, formas de compromiso social,	Little is known about the forms of social engagements that specifically influence loneliness in older men and women subsamples. Accordingly, we examined the gender differences in the associations between forms of social engagement and loneliness among 406 Nigerian older adults (257 females) with mean age 76.69 ± 8.27 years. Binary logistic regressions were used in testing assumptions. Results showed that not all forms of social engagements predicted lower loneliness risks in men and women. After adjusting for relevant covariates, visitation to children and participation in traditional ceremonies predicted lower risks of loneliness in women. However, attendance at traditional ceremonies predicted high risk of loneliness in men. These results suggest that gender differences should be considered when implementing programs aimed at lowering loneliness risks among older adults through social engagements. Future

			research may further investigate gender differences in the association between social engagements and loneliness in other societies and cultures.
Changes in prevalence of loneliness over time in institutional settings, and associated factors.	Archives of Gerontology and Geriatrics	Sentirse depresivo/a	The aim of this study was to examine changes in the prevalence of loneliness over time from 2011 to 2017 in long-term care facilities; and its related factors. Material and methods Repeated cross-sectional studies exploring loneliness and its associated factors among residents in long-term care facilities were conducted in Helsinki, Finland in 2011 (N = 4966) and 2017 (N = 3767). Residents in temporary respite care or with severe cognitive impairment, and those unable or refusing to respond to the loneliness item were excluded. The total number of participants in this analysis was 1563 in 2011, and 1367 in 2017. In both samples, we used the same loneliness measurement by asking “Do you suffer from loneliness?” (never/sometimes/often or always). When comparing the samples in order to reduce the effect of confounding between them, we used propensity score matching. A multivariable logistic regression model explored the relationship between various characteristics and loneliness. Results Loneliness showed no change in prevalence over time: propensity score-adjusted loneliness was 36% in 2011 and 2017. In the multivariate logistic regression model, feeling depressed was the only independent characteristic associated with loneliness. Of the respondents who did not feel depressed, 24% suffered from loneliness at least sometimes. Among the respondents who felt depressed, the respective figure was 55%. Conclusion Loneliness is common in institutional settings. It remained stable, and not decreased over time. Because loneliness impairs the well-being, quality of life and health of residents, it needs to be addressed. Screening loneliness and developing interventions to alleviate it, is essential.
Neighborhood Social Cohesion Associates with Loneliness Differently among Older People According to Subjective Social Status	The Journal of Nutrition, Health and Aging	Cohesión social del barrio, estatus social subjetivo	1,037 participants with a mean age of 83 years were included in the study, of whom 72%, 83%, and 64% were classified as at risk of overall loneliness, emotional loneliness, and social loneliness, respectively. Those who were classified as at risk of overall loneliness reported lower subjective social status and had lower levels of neighborhood social cohesion. Linear regression models showed that higher levels of neighborhood social cohesion were associated with lower levels of overall and social loneliness. Stratified analyses showed that the associations between neighborhood social cohesion and loneliness vary across subjective social status groups. Among those with low/middle social status ranking, higher levels of neighborhood social cohesion were associated with lower overall (low-ranking B=-0.111, p=0.001; middle-ranking B=-0.057, p=0.026) and social (low-ranking B=-0.093, p<0.001; middle-ranking B=-0.073, p<0.001) loneliness scores. Among those with high ranking, higher levels of neighborhood social cohesion were associated with lower overall (B=-0.099, p=0.041) and emotional (B=-0.056, p=0.017) loneliness scores, but the associations became insignificant when controlling for maximum lifetime income. Neighborhood social cohesion may operate differently in different social ranking groups. Interventions to alleviate feelings of loneliness should be subjective social status specific.
The Association between Social Participation and Loneliness of the Chinese Older Adults over Time—The Mediating Effect of Social Support	International Journal of Environmental Research and Public Health	Participación social, apoyo social (papel mediador)	Based on activity theory, this paper employed data from the 2013, 2015, and 2018 waves of the China Health and Retirement Longitudinal Survey, and adopted Hierarchical Linear Modeling and longitudinal mediation analysis to explore the temporal variation characteristics of loneliness and the influence of social participation on loneliness in Chinese Older Adults, as well as the mechanism of them. The study found that loneliness among older adults overall was at a

			<p>moderate level from 2013 to 2018 and increased over time, which may be related to decreasing social participation from year to year. Decreased social participation was associated with increased loneliness over time ($\beta = -0.060, p < 0.001$) and lower social support ($\beta = 0.109, p < 0.001$), which was associated with more loneliness ($\beta = -0.098, p < 0.001$). In addition, social support played a significant mediating role in the realization of social participation in alleviating loneliness. Social participation can not only directly reduce loneliness, but also reduce loneliness by increasing social support.</p>
<p>Depressive Symptoms and Loneliness Among Black and White Older Adults: The Moderating Effects of Race</p>	<p>Innovation in aging</p>	<p>Síntomas depresivos, etnia (variable moderadora)</p>	<p>The results of this study demonstrate that even though black older adults have higher prevalence rates of loneliness and depressive symptoms compared to white older adults, the link between loneliness and depressive symptoms is stronger for white older adults in comparison to black older adults; therefore, loneliness may have greater importance for mitigating depressive symptoms among white older adults in comparison to black older adults. Nevertheless, the association between loneliness and depressive symptoms is still significant, and addressing loneliness can also mitigate depressive symptoms among black older adults.</p>
<p>Marital quality and loneliness in later life</p>	<p>Journal of Social and Personal Relationships</p>	<p>Calidad de la relación matrimonial</p>	<p>Loneliness is not merely an unpleasant experience but is harmful for older adults' health and well-being as well. While marriage buffers against loneliness in later life, even married adults experience loneliness, and aspects of adults' marriages may either protect against or actually foster loneliness among spouses. The current study analyzed dyadic data from 1,114 opposite-sex married Irish couples who participated in the initial wave of The Irish Longitudinal Study on Ageing (2009-2011) in order to extend findings of two prior dyadic studies of marital quality and loneliness in the U.S. to older married couples in Ireland and to directly compare two theoretical and methodological frameworks used by these studies to explain associations between husbands' and wives' reports of marital quality and loneliness in later life. Results revealed that both spouses' perceptions of positive and negative marital quality were significantly related with husbands' and wives' loneliness and that spouses' reports of loneliness were significantly related with one another. Findings also indicated that associations between marital quality and loneliness were similar for Irish and American couples in later life. Comparison of differing modeling strategies suggested that emotional contagion may serve as a pathway for dyadic partner effects</p>
<p>Well-Being and Loneliness in Swiss Older Adults During the COVID-19 Pandemic: The Role of Social Relationships</p>	<p>The Gerontologist</p>	<p>Bienestar, relaciones sociales, pandemia COVID</p>	<p>The current coronavirus disease 2019 (COVID-19) pandemic and social distancing measures are an extreme stressor that might result in negative emotional experiences and feelings of loneliness. However, it is possible that social relationships might have a protective effect. In the present study, we examine how the COVID-19 pandemic affected older adults' well-being and loneliness, and the role of structural and functional characteristics of social relationships. Research Design and Methods We use data from 99 older adults in Switzerland who participated (a) in a 3-week microlongitudinal study on social relationships and well-being in 2019 and (b) in a weekly online survey during 4 weeks of the COVID-19 lockdown. Results Our findings show that the global pandemic had substantial adverse effects on older adults' emotional well-being and loneliness. In addition, aspects of social relationships were related to loneliness both before and during the pandemic. Only one functional feature of social relationships (satisfaction with communication during the pandemic) buffered adverse effects of the major stressful event.</p>

			Discussion and Implications Although the social distancing measures during COVID-19 presented a major stressor for older adults' well-being and loneliness, being able to maintain social communication to a satisfactory level during that time reduced this effect. Therefore, enabling older adults to stay in touch with their social circle based on their personal preferences might reduce the impact that any future lockdown might have on their well-being.
Loneliness as a mediator in the relationship between social engagement and depressive symptoms: Age differences among community-dwelling Korean adults	Health and Social Care in the community	Compromiso social, síntomas depresivos	The purpose of this study was to examine whether loneliness mediates the relationship between social engagement and depressive symptoms and to determine how age moderates the mediation effect. Data for this study came from the survey with community-dwelling adults aged 18 and older in South Korea, from March to April 2017. The total of 1,017 respondents were drawn from three age groups (18–44, 45–64, or 65 and older). The mediating effect of loneliness was tested between each of three social engagement-related variables (family network, friend network, and perceived community support) and depressive symptoms. The results showed age differences in mediation: the effect was most pronounced in the relationship of family network with loneliness for the older group, whereas the size of friend network significantly predicted loneliness for younger adults. Both younger and older groups felt less lonely when they had a higher level of perceived community support; the middle age group remained uninfluenced by the mediation effects. Our findings confirm that loneliness is one of the mechanisms by which social engagement exerts its effect on depressive symptoms. As the Korean society embraces its growing proportions of older adults, the results of the study provide implications for adaptive strategies for changing social engagement need and mental health associated with ageing.
Negative old-age life events and well-being in later life: the moderating and mediating role of loneliness	International Psychogeriatrics	Soledad como factor moderador de bienestar y eventos negativos en la vida de mayores	Although older adults often experience negative life events or loss experiences, they rarely experience large decreases in their quality of life or well-being. Emotionally satisfying relationships in older adults may serve as a protective factor that reduces the impact of negative events in decreasing well-being. The availability of these close social contacts is essential, and their potential for alleviating feelings of loneliness after negative events could have an important role in promoting well-being. The aim of this study was to test the hypothetical moderation and mediation effects of social and emotional loneliness on the occurrence of negative old-age life events and well-being in later life. Results indicated that a low degree of (social) loneliness is a protective, moderating factor and (emotional) loneliness is a mediating factor on the effects of negative life events on well-being in later life. Findings highlight the importance of emotionally and socially satisfying social contacts in order to maintain positive subjective well-being in later life when negative life events may occur.
Sources and directions of social support and life satisfaction among solitary Chinese older adults in Hong Kong: the mediating role of sense of loneliness	Clinical Interventions in Aging	Apoyo social y satisfacción vital	Based on survey data collected from 151 community-dwelling solitary Chinese older adults in Hong Kong, the present study used path analysis to examine the mediating role of sense of loneliness in the relationship between different sources and directions of social support and life satisfaction. The results showed that sense of loneliness mediated the effects of support from families, friends, and support for others on life satisfaction. In addition, a formal source of social support was not associated with life satisfaction among solitary older adults, although those with a more secure financial status had greater overall life satisfaction. These findings highlight the importance of enhancing awareness among social and health care service providers about the

			negative effects of insufficient social support on older adults' sense of loneliness and life satisfaction. Family and friendship networks should be expanded for solitary older adults.
Diferencias en función de la edad y la autopercepción del envejecimiento en ansiedad, tristeza, soledad y sintomatología comórbida ansioso-depresiva durante el confinamiento por la COVID-19	Revista Española de Geriatría y Gerontología	Edad, autopercepción del envejecimiento, ansiedad, tristeza, etc.	To analyze differences by age group in anxiety, depression, loneliness and comorbid anxiety and depression in young people, middle aged adults and older adults during the lock-down period at home due to the COVID-19 pandemic, and to explore the association between negative self-perceptions of aging and psychological symptoms controlling by age group. Method: Participants are 1501 people (age range 18 to 88 years). Anxiety, sadness, loneliness and self-perceptions of aging were assessed. The sample was divided according to the age group and quartiles (lower, intermediate levels, and higher) of anxiety, sadness, loneliness and self-perceptions of aging. Results: Older adults reported lower levels of anxiety and sadness than middle aged adults, and middle aged adults reported lower levels than younger participants. Middle aged adults reported the lowest loneliness, followed by older adults and younger participants. For each age group, those with more negative self-perceptions of aging reported higher anxiety, sadness and loneliness. More comorbid anxiety and sadness was found in younger adults and less in older adults; more depressed participants in the middle aged group, and more older adults and less younger participants were found in the group with the lowest levels of anxiety and sadness. For all the age groups, participants with high levels of comorbid anxiety and sadness are those who report the highest scores in negative self-perceptions of aging. Conclusions: Older adults reported lower psychological anxiety, sadness and loneliness than the other age groups. Having negative self-perceptions of aging damage psychological health irrespective of the chronological age.
A longitudinal study of the impact of social network size and loneliness on cognitive performance in depressed older adults.	Aging & Mental Health	Tamaño red social, funcionamiento cognitivo, depresión	To examine the association of social network size and loneliness with cognitive performance and -decline in depressed older adults. Method: A sample of 378 older adults [70.7 (7.4) years] with a Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition diagnosis of current depressive disorder were recruited from primary care and specialized mental health care. Cognitive performance was assessed at baseline and 2 years follow-up with the Stroop colored-word test, a modified version of the Auditory Verbal Learning Task and the Digit Span subtest from the Wechsler Adult Intelligence Scale, encompassing four cognitive domains; processing speed, interference control, memory, and working memory. Social network size was assessed with the Close Person Inventory and loneliness with the de Jong Gierveld Loneliness Scale at baseline. Results: After adjusting for baseline working memory performance, loneliness was associated with impaired working memory after 2 years [B = -0.08 (-0.17 to 0.00)]. This association was no longer significant after adjusting for age, sex, education level, physical activity, alcohol use and depressive symptom severity [B = -0.07 (-0.16 to 0.03)]. A backward elimination procedure revealed education level to be the only covariable to explain this association. Loneliness was not associated with impairments or decline in other cognitive domains. Social network size was not associated with cognitive impairments or decline. Conclusion: Social network size and loneliness do not predict cognitive decline in depressed older adults.

<p>Social relationship adversities throughout the lifecourse and risk of loneliness in later life</p>	<p>Ageing & Society</p>	<p>Experiencias adversas en relaciones sociales a lo largo de la vida</p>	<p>Understanding how social experiences throughout life shape later loneliness levels may help to identify how to alleviate loneliness at later lifestages. This study investigates the association between social relationship adversities throughout the lifecourse and loneliness in later life. Using prospective data from the Medical Research Council National Survey of Health and Development (N = 2,453), we conducted multivariable analyses to investigate independent, cumulative and moderated effects between the number of social relationship adversities experienced in childhood, mid-adulthood and later adulthood and the feeling of loneliness at age 68. We examined interactions between social relationship adversities and current quantity and quality aspects of social relationships. We found evidence of a step-dose response where greater exposure to social relationship adversities experienced at three earlier lifestages predicted higher loneliness levels in later life with more recent social relationship adversities more strongly related to loneliness. The results also demonstrated support for exacerbation and amelioration of earlier adverse social relationship experiences by current social isolation and relationship quality, respectively. This study suggests that social relationship adversities experienced throughout the lifecourse continue to influence loneliness levels much later in life. A key finding is that adverse social relationship experiences in earlier life may explain why otherwise socially similar individuals differ in their levels of loneliness. Implications for policy and research are discussed.</p>
<p>Age Trajectories of Perceptual Speed and Loneliness: Separating Between-Person and Within-Person Associations</p>	<p>The journals of gerontology. Series B, Psychological sciences and social sciences</p>	<p>Velocidad perceptiva</p>	<p>Objectives: We aimed at examining between-person and within-person associations across age trajectories of perceptual speed and loneliness in old age. Method: We applied multilevel models to 4 waves of data collected over 6 years from 1,491 participants of the Berlin Aging Study II (60–88 years at baseline, 50% women) to disentangle between-person and within-person associations across age trajectories of perceptual speed and both emotional and social loneliness. Sex and education were considered as relevant individual characteristics and included as covariates in the model. Results: Analyses revealed that on average perceptual speed exhibited moderate within-person age-related declines, whereas facets of loneliness were rather stable. Perceptual speed did not predict age trajectories of emotional or social loneliness, at either the between- or within-person level. In contrast, loneliness discriminated individuals at the between-person level, such that those feeling emotionally or socially more lonely showed lower cognitive performance than those feeling emotionally or socially less lonely. Predictive effects of social loneliness were stronger for relatively young people (i.e., in their mid to late 60s) than for relatively older participants (i.e., in their 80s). In addition, predictive effects of social loneliness for perceptual speed at the within-person level were modest and deviated in direction and size from between-person social loneliness effects among those in their mid- to late 60s, whereas they did not among those in their 80s. Discussion: We conclude that loneliness may serve as a precursor for basic cognitive functioning in old age and suggest routes for further inquiry.</p>
<p>Social Isolation and Loneliness during COVID-19 Lockdown: Associations with Depressive Symptoms in the German Old-Age Population</p>	<p>International Journal of Environmental Research and Public Health</p>	<p>Aislamiento social, síntomas depresivos, COVID</p>	<p>Lockdowns during the COVID-19 pandemic increase the risk of social isolation and loneliness, which may affect mental wellbeing. Therefore, we aimed to investigate associations between social isolation and loneliness with depressive symptoms in the German old-age population during the first COVID-19 lockdown. A representative sample of randomly selected individuals at least 65 years old (n = 1005) participated in a computer-assisted standardized telephone</p>

			<p>interview in April 2020. Sociodemographic data, aspects of the personal life situation, attitudes towards COVID-19 and standardized screening measures on loneliness (UCLA 3-item loneliness scale), depression (Brief Symptom Inventory/BSI-18), and resilience (Brief Resilience Scale/BRS) were assessed. Associations were inspected using multivariate regression models. Being lonely, but not isolated ($\beta = 0.276$; $p < 0.001$) and being both isolated and lonely ($\beta = 0.136$; $p < 0.001$) were associated with higher depressive symptoms. Being isolated, but not lonely was not associated with depressive symptoms. Thus, the subjective emotional evaluation, i.e., feeling lonely, of the social situation during lockdown seems more relevant than the objective state, i.e., being isolated. Normal ($\beta = -0.203$; $p < 0.001$) and high resilience ($\beta = -0.308$; $p < 0.001$) were associated with lower depressive symptoms across groups. Therefore, strengthening coping skills may be a support strategy during lockdowns, especially for lonely older individuals.</p>
<p>Regional tau pathology and loneliness in cognitively normal older adults</p>	<p>Translational psychiatry</p>	<p>Patología tau</p>	<p>Loneliness is a perception of social and emotional isolation that increases in prevalence among older adults during the eighth decade of life. Loneliness has been associated with higher brain amyloid-β deposition, a biologic marker of Alzheimer's disease, in cognitively normal older adults, suggesting a link with preclinical Alzheimer's disease pathophysiology. This study examined whether greater loneliness was associated with tau pathology, the other defining feature of Alzheimer's disease, in 117 cognitively normal older adults. Using flortaucipir positron emission tomography, we measured tau pathology in the entorhinal cortex, a region of initial accumulation in aging adults with or without elevated amyloid-β, and in the inferior temporal cortex, a region of early accumulation typically associated with elevated amyloid-β and memory impairment. Loneliness was measured by self-report using the 3-item UCLA-loneliness scale. We found that higher tau pathology in the right entorhinal cortex was associated with greater loneliness, controlling for age, sex, and apolipoprotein E $\epsilon 4$, the Alzheimer's disease genetic risk marker. This association remained significant after further adjustment for socioeconomic status, social network, depression and anxiety scores, and memory performance. There was no association of inferior temporal cortical or left entorhinal tau pathology with loneliness. Exploratory whole-brain surface maps supported these findings and identified additional clusters correlating loneliness and tau in the right fusiform gyrus. These results provide further support for loneliness as a socioemotional symptom in preclinical Alzheimer's disease.</p>
<p>Intergenerational relationships and depressive symptoms among older adults in urban China: The roles of loneliness and insomnia symptoms</p>	<p>Health & social care in the community</p>	<p>Relaciones intergeneracionales, síntomas depresivos, insomnio</p>	<p>The prevalence of depressive symptoms in older Chinese adults has increased recently. Intergenerational relationships play an important role in the mental health conditions of older adults, especially in Chinese culture. Therefore, this study aims to unravel the complex connection between intergenerational relationships and depression, and to explore the potential mediating roles of loneliness and nighttime insomnia symptoms within that connection. A cross-sectional household survey was conducted in China with 2038 participants aged 65 years or above. Variables were measured using the Center for Epidemiologic Studies Short Depression Scale, the Intergenerational Relationship Quality Scale for Aging Chinese Parents (IRQS-AP), three nighttime insomnia symptoms extracted from the Insomnia Severity Index and the De Jong Gierveld Six-Item Loneliness Scale. The IRQS-AP includes four subdimensions: consensual-normative solidarity, structural-associational solidarity, affectual closeness and intergenerational conflicts. Path analyses were performed in Mplus to investigate regression coefficients and</p>

			<p>mediating effects. Results showed that three general intergenerational relationships (consensual-normative solidarity, affectual closeness and intergenerational conflicts) were significantly correlated with all mental health outcomes, including their symptoms of loneliness, insomnia and depression. A serial mediation model suggested that loneliness mediated the connection between those constructs of intergenerational relationships and depression, with an independent path to insomnia symptoms via loneliness. The proposed mediators fully mediated the effects of affectual closeness on depression. Nighttime insomnia symptoms alone mediated only the relationship between intergenerational conflicts and depression independently from paths involving depression. Removal of sleep item from CES-D did not affect the results of paths. Our findings highlight the importance of intergenerational relationships for mental health, especially for the mediating effects of loneliness and nighttime insomnia symptoms on the relationship between intergenerational relationships and depression. Effective mental health services for older adults can address their feelings of loneliness and sleep problems, especially for those who have a poor relationship with their adult children.</p>
<p>Loneliness in the older adult marriage</p>	<p>Journal of Social and Personal Relationships</p>	<p>Matrimonio</p>	<p>Marriage protects against loneliness, but not all marriages are equally protective. While marriage is a highly interdependent relationship, loneliness in marital dyads has received very little research attention. Unlike most studies proposing that positive and negative marital qualities independently affect loneliness at the individual level, we used a contextual approach to characterize each partner's ratings of the marriage as supportive (high support, low strain), ambivalent (high support, high strain), indifferent (low support, low strain), or aversive (low support, high strain) and examined how these qualities associate with own and partner's loneliness. Using couple data from the Wave II National Social Life, Health and Aging Project ($N = 953$ couples), we found that more than half of the older adults live in an ambivalent, indifferent, or aversive marriage. Actor-partner interdependence models showed that positive and negative marital qualities synergistically predict couple loneliness. Spouses in aversive marriages are lonelier than their supportively married counterparts (actor effect), and that marital aversion increases the loneliness of their partners (partner effect). In addition, wives (but not husbands) in indifferent marriages are lonelier than their supportively married counterparts. These effects of poor marital quality on loneliness were not ameliorated by good relationships with friends and relatives. Results highlight the prominent role of the marriage relationship for imbuing a sense of connectedness among older adults and underscore the need for additional research to identify strategies to help older adults optimize their marital relationship.</p>
<p>The Association Between Loneliness and Psychiatric Symptomatology in Older Psychiatric Outpatients</p>	<p>Journal of Geriatric Psychiatry and Neurology</p>	<p>Sintomatología psiquiátrica en pacientes psiquiátricos y soledad</p>	<p>Loneliness is highly prevalent in older psychiatric outpatients, with men and women equally affected. Loneliness should be assessed in all older psychiatric patients, especially when they show high scores on symptom checklists or have a restricted social network.</p>
<p>Social contact and inequalities in depressive symptoms and loneliness among older adults: A mediation</p>	<p>SSM- Population Health</p>	<p>Contacto social, síntomas depresivos</p>	<p>Weekly in-person social contact was associated on average with reduced odds of loneliness, but associations with remote social contact were weak. Lower education raised odds of depressive symptoms and loneliness, but differences were attenuated with infrequent in-person contact. Respondents living alone experienced more depressive symptoms and loneliness than those</p>

analysis of the English Longitudinal Study of Ageing			living with a partner, and less wealth was associated with more depressive symptoms. With universal infrequent in-person contact, these differences narrowed among those aged under 65 but widened among those aged 65+. Universal weekly remote contact had relatively little impact on inequalities.
The Changing Relationship Between Partnership Status and Loneliness: Effects Related to Aging and Historical Time	The journals of gerontology. Series B, Psychological sciences and social sciences	Cambios relaciones de pareja	With advancing age, partnership status became less predictive of loneliness and the satisfaction with being single increased. Among later born cohorts, the association between partnership status and loneliness was less strong than among earlier born cohorts. Later born single people were more satisfied with being single than their earlier born counterparts. There was no indication for an aging-related or historical decrease in partnership satisfaction. The motivational and cognitive factors acted as statistically significant predictors of loneliness, while the affective factor was not presented as a significant factor.
Hopelessness as a predictor of loneliness in older adults	Revista Española de Geriatría y Gerontología	Desesperanza, pérdida de motivación, expectativas negativas	Loneliness is a phenomenon of great concern in the field of gerontology due to its high incidence and impact. The results indicate that hopelessness, specifically loss of motivation and negative expectations about the future, are critical issues for the development of feelings of loneliness in older adults. Thus, it is relevant to pay attention to these variables in order to apply loneliness prevention programs.
Social Network Characteristics Predict Loneliness in Older Adults	Gerontology	Características de la red social	This study found that the proximal (subjective number of connections) and distal (brokerage and embeddedness) aspects of social networks additively explained the frequency of loneliness. Moreover, the loss of late-life social roles (marital and working status) was related to an increase in loneliness, where the distal characteristic of social networks mediated this relationship
A study of loneliness and mental health among old age people in Haridwar	IAHRW International Journal of Social Sciences Review; Haryana	Salud mental	In the present research an attempt was made to study the relationship between loneliness and mental health among old aged people. For this study purposive sampling technique was used to collect the sample of 80 old age people in the age range of 65 to 75 years (40 were from old age home & 40 were living with family) from district Haridwar. UCLA Loneliness Scale and Mithila Mental Health Status Inventory (MMHSI) scales were used to collect data. Mean and standard deviation of loneliness of people living in old age home (42.33, 8.51) and people living with their family is (34.10, 6.81) and t-value is 4.78 which is significant at 0.01 level. This shows significant difference in the level of loneliness of old age people living with their family and old age home. Mean and standard deviation of mental health of people living in old age home (156.95, 17.61) and people living with their family is (106.25, 11.00) and t-value is 15.45 which is significant at 0.01 level. This shows significant difference in the level of mental health of old age people living with their family and old age home. The level of loneliness is high in the old age people living in old age home and ashramas. The level of mental health is also low in the old age people living in old age home as well as in ashramas in Haridwar.
Loneliness and its concomitants among older adults during the COVID-19 pandemic	International Psychogeriatrics	Visión del envejecimiento, interacciones cara a cara, malestar psicológico, actividades de compromiso	this study aimed to identify older adults who feel lonely during the pandemic. [...]positive VoA – potentially reinforcing psychosocial resources (Schwartz et al., 2020) – are underexplored. [...]while psychological distress is a known correlate of loneliness (Palgi et al., 2020), less is known about common features during self-isolation, such as interaction via available means (phone, video, and face-to-face) or engagement in daily activities. Adding to prior works (Losada-Baltar et al., 2020), it appears that negative VoA have a particularly harmful effect, whereas positive VoA may be less significant, with regard to loneliness. [...]few face-to-face interactions

			and an absence of regular activities were related to high loneliness; findings that join those linking absence of activities with distress (Fullana et al., 2020).
Volunteering and loneliness in older adults: A parallel mediation model	Aging & Mental Health	Voluntariado	This study aimed to examine the relationship between participation in volunteer work and loneliness among older adults, and to explore the mediating role of perceived control and perceived social self-efficacy in this association. Method: This study was developed as a secondary data analysis using the data sampled from the 2016 Health and Retirement Study in USA. The sample comprised 9,944 individuals aged between 65 and 107 years (mean = 75.94, SD = 7.70; 59.4% females). Using a multi-item survey questionnaire, frequent participation in volunteer youth work and charity work, loneliness, perceived control, and social self-efficacy were assessed. To examine the mediating effects of perceived control and social self-efficacy on the association between volunteer work and loneliness, the bootstrapping technique was performed. Results: Two forms of volunteer works, namely, volunteer youth work and charity work, significantly predicted perceived control, social self-efficacy, and lower levels of loneliness. Perceived control and social self-efficacy appeared to significantly mediate the relationship between volunteer activities and loneliness. Conclusion: The study's findings put forward a need to develop policy provisions that facilitate supporting systems and organizations for life-long education and recruitment of older volunteers. Community-based organizations should create and promote volunteer opportunities in older adults, thereby alleviating later-life loneliness
Loneliness, Depressive Symptoms, and Cognitive Functioning Among U.S. Chinese Older Adults	Gerontology and geriatric medicine	Funcionamiento cognitivo, síntomas depresivos, ser inmigrante	Objective: Loneliness has been associated with cognitive functioning in the general older adult population. Previous studies further indicate that loneliness has a strong association with depressive symptoms and the two constructs can reinforce each other to diminish well-being. However, such relationships have not been examined in U.S. Chinese older adults. This study attempts to bridge this knowledge gap. Method: Data were drawn from a population-based study of 3,159 U.S. Chinese older adults in the Greater Chicago area. Stepwise multivariate regression analyses were conducted to examine the relationship between loneliness, depressive symptoms, and global cognitive functioning. Results: Loneliness was associated with poor global cognitive functioning in U.S. Chinese older adults, though the relationship became nonsignificant after adjustment for depressive symptoms. The interaction term between loneliness and cognitive functioning was statistically significant ($p < .01$). The findings further highlight the importance of age, education, number of children, number of people in household, and length of residence in the U.S. in cognitive functioning among U.S. Chinese older adults. Discussion: The study findings indicate that loneliness and depressive symptoms act together to influence cognitive functioning in U.S. Chinese older adults. Research and clinical implications of the findings are discussed.
The Relationships Among Structural Social Support, Functional Social Support, and Loneliness in Older Adults: Analysis of Regional Differences Based on a Multigroup Structural Equation Model	Frontiers in Psychology	Apoyo social estructural, apoyo social funcional,	Objective: This study investigated the relationship between structural social support and loneliness and explored whether functional social support had an intermediate role therein. It also employed a multigroup structural equation model to compare mediation models among older adults living in cities, towns, and rural areas. Methods: Using a self-made demographics questionnaire, the structural-functional social support scale, and the 3-item UCLA loneliness scale, this study collected information from 1,325 older adults identified via convenient sampling. Results: The results showed that as: (1) compared with older adults living in towns, older urban,

			and rural adults had higher structural social support and experienced less loneliness, while older adults' functional social support showed no difference among the three regions (2) An analysis of the models of regional differences indicated that functional social support served as a full mediator in the relationship between structural social support and loneliness in urban older adults, and a partial mediator for older adults living in towns and rural areas. Conclusion: The relationship between structural social support and loneliness is mediated by functional social support, and this mediation model varies between older adults in cities and towns/rural areas. This study helps us understand possible mechanisms through which structural social support impacts loneliness. It suggests that nursing strategies for older adults should be adjusted according to the region and direct greater focus on the function (or quality) of the social support network and older adults living in towns.
Loneliness and Anxiety About Aging in Adult Day Care Centers and Continuing Care Retirement Communities	Innovation in aging	Ansiedad, centros de día, residencias	The present study compares how 2 settings: adult day care centers (ADCCs) and continuing care retirement communities (CCRCs) fare with regard to loneliness and anxiety about aging. Loneliness is a highly prevalent and distressing subjective experience of inadequate social relations, which has negative effects on health and well-being. Anxiety about aging is defined as worries brought up by imagining the negative consequences and losses associated with old age. The study also examines whether anxiety about aging accounts for differences in loneliness between the 2 settings. This study took place in Israel, where ADCCs are funded by the National Insurance Institute of Israel and CCRCs tend to be funded by private income and wealth. Despite notable differences between the settings, a common goal of both is to reduce loneliness among older adults. Compared with CCRC residents, older adults in ADCCs reported higher levels of loneliness (Mean [SD] = 1.46 [0.60], Mean [SD] = 1.78 [0.80], respectively, $t [df] = -5.10 [448]$, $p < .001$) and higher levels of anxiety about aging (Mean [SD] = 2.96 [0.88], Mean [SD] = 3.27 [0.99], respectively, $t [df] = -3.42 [440]$, $p < .001$). Anxiety about aging partially accounted for the differences between the 2 settings in levels of loneliness ($B = 0.03$, 95% confidence interval [CI]: 0.0037-0.0651). Although it is not possible to determine causality from this cross-sectional design, it is possible that CCRCs provide a better social outlet for older adults than ADCCs.
The Association Between Post-Traumatic Stress and Depressive Symptoms Among Older Puerto Ricans in Boston: How Does Loneliness Matter?	Journal of Aging and Health	Síntomas depresivos, síntomas de estrés postraumático	Post-traumatic stress was significantly associated with higher levels of depression. The association between post-traumatic stress and depression was stronger for those experiencing a higher degree of loneliness.
The impact of perceived social support, loneliness, and physical activity on quality of life in South Korean older adults	Journal of Sport and Health Science	Apoyo social percibido, soledad, calidad de vida	The SEM results of the current study support the proposed model that explained the interrelationships among perceived social support, loneliness, PA, and QoL among active older adults in South Korea. These findings suggest the importance of incorporating social support mechanisms for PA interventions in order to enhance QoL. The findings of this study can help create more effective health and physical education programs for the older generations in South Korea to enhance their QoL.
Who is really at risk? The contribution of death anxiety in suicide risk and	Deaths Studies	Ansiedad hacia la muerte, riesgo de	Isolation and quarantine imposed during the COVID-19 pandemic increased the age-related risk for depression and suicide. However, not all older adults endure the same distress levels. We

Loneliness among older adults during the COVID-19 pandemic		suicidio, soledad, COVID	aimed to identify those at higher risk of depression, perceived loneliness, and suicide, comparing self-reports of depression, loneliness, suicide risk, and death anxiety among 277 participants in three age groups recruited through social media. Older adults reported fewer depression symptoms and lower distress levels but greater suicide risk. Death anxiety was found predictive of depression and suicidality, offering an important criterion for assessing who is really at risk among the non-homogeneous group of older adults.
Intergenerational Emotional Cohesion and Psychological Well-Being of Older Adults in Rural China: A Moderated Mediation Model of Loneliness and Friendship Ties	The Journals of Gerontology: Series B	Cohesión emocional intergeneracional, bienestar psicológico, amistad	Although researchers have linked intergenerational emotional cohesion (IEC) to psychological well-being (PWB) among older adults, the mechanisms and conditions under which IEC is related to PWB—particularly in rural areas—are less well understood. This study analyzed data from rural China to examine whether loneliness mediated the relationship between IEC and PWB, and whether friendship ties moderated the strength of the direct and indirect relationships between IEC and PWB. The results revealed that IEC was negatively related to loneliness, which in turn was associated with depressive symptoms and life satisfaction. Furthermore, this indirect pathway linking IEC and depressive symptoms (but not life satisfaction) was positively conditioned on the size of friendship ties.
Environmental Influences on Life Satisfaction and Depressive Symptoms Among Older Adults with Multimorbidity: Path Analysis Through Loneliness in the Canadian Longitudinal Study on Aging	The Gerontologist	Satisfacción con la vida, síntomas depresivos	Data supported a priori pathways from environment to mental well-being through sociobehavioral attributes and loneliness. If these pathways from neighborhood cohesion to life satisfaction reflect causal effects, community-based age-friendly interventions should focus on enhancing neighborhood cohesion to mitigate loneliness among multimorbid older adults for their mental well-being.
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	Diabetes, hipertensión, trastorno de ansiedad generalizada, abuso	More than half (55.4%) of the participants experienced loneliness as per the three item UCLA LS. When the total scores of UCLA scale were used to evaluate the severity of loneliness, half of the study participants had either moderate (N = 39; 13.2%), moderately high (N = 52; 17.6%) and high (N = 55; 18.6%) level of loneliness. Higher proportion of patients experiencing loneliness had anxiety and reported abuse. Significant predictors of loneliness included presence of diabetes mellitus or hypertension, generalized anxiety disorder and abuse. Older adults living with non-communicable diseases are at a higher risk for loneliness. Mutual help groups kind of models can be developed to help in "re-peopling" elderly. Primary health centres should help in improving the overall health and morale amongst the elderly by stamping down their apprehensions and anxieties.
Importance of loneliness in behavioral and psychological symptoms of dementia	Geriatric Psychiatry	Síntomas depresivos, psicosis	The revised UCLA loneliness scale score was not significantly associated with age, years of education, mini-mental state examination (MMSE) score, gender, living status, visual impairment, hearing impairment, and marital status. However, this score was a significant predictor of NPI delusion and hallucination subscale scores and Geriatric Depression Scale-15 score. The MMSE score was a significant predictor of NPI anxiety and apathy subscale scores. Loneliness is a risk factor for BPSD, especially for depressive symptoms and psychosis. Paying attention to loneliness in patients with dementia will help medical staff to intervene in psychiatric symptoms of these patients at an early stage.

<p>Comparison of Psychosocial Variables Associated With Loneliness in Centenarian vs Elderly Populations in New Zealand</p>	<p>JAMA Network Open</p>	<p>Depresión, apoyo familiar, condiciones de vida</p>	<p>Centenarians are a unique group to study as a model of successful aging. The sample of centenarians in this study appeared to be less lonely than other groups studied internationally. The study identified multiple psychosocial variables that were associated with the risk of loneliness, including living arrangements, family support, and depression. Knowing these variables may help our society address risk factors for loneliness in older people.</p>
<p>Social participation and loneliness among older adults in Yazd, Iran</p>	<p>Health and Social Care in the community</p>	<p>Participación social</p>	<p>Social participation among older people is associated with more practice of physical activities, improvement of cognitive skills and less feeling of loneliness. The primary purpose of this cross-sectional study was to examine the social participation and sense of loneliness among older adults in Yazd, an Iranian city that is known for its traditional values and religious people. The non-probability sample consisted of 200 elderly people. Data collection tool was a questionnaire, which was completed by a trained interviewer through face-to-face interview. The mean scores of social participation and loneliness feeling among participants were 17.29 ± 5.62 (8–40) and 38.02 ± 7.91 (16–80), respectively. From the participants, 79.8% had not participated in educational cultural and activities. Mostly reported barriers to social participation included transportation-related issues (57%), diseases and health problems (43.5%) and personal or family responsibility (36%). The best predictors of loneliness were demographic characteristics, followed by the total number of diseases/problems and the total number of barriers to social participation. Social participation itself was not a statistically significant predictor of loneliness. Theoretical and practical implications were discussed.</p>
<p>The mediating role of hardiness in the relationship between perceived loneliness and depressive symptoms among older</p>	<p>Aging and Mental Health</p>	<p>Dureza/resistencia (hardiness), soledad percibida, síntomas depresivos</p>	<p>Older people with higher level of perceived loneliness reported less hardiness. Lower levels of hardiness, in turn, correlated with increased self-reported depressive symptoms. The potential benefits of hardiness for promoting mental health of older people was discussed.</p>
<p>Death Anxiety and Loneliness among Older Adults: Role of Parental Self-Efficacy</p>	<p>International Journal of Environmental Research and Public Health</p>	<p>Ansiedad ante la muerte, autoeficacia parental</p>	<p>Death anxiety and loneliness are major issues for older people. The present study aimed to broaden the understanding of factors that are linked with increased loneliness in old age by examining the association between death anxiety and loneliness, and the role of an unexplored variable among older adults, namely, parental self-efficacy. A convenience sample of 362 Israeli parents over the age of 65 was recruited through means of social media. Participants completed self-reported questionnaires, which included background characteristics, death anxiety, parental self-efficacy, and loneliness measures. The findings showed that death anxiety was positively associated with loneliness among older adults. The findings also confirmed that parental self-efficacy moderated this association in this population. We concluded that the combination of death anxiety and low parental self-efficacy identified a group of older adults that are at higher risk of developing increased loneliness levels. Mental health professionals should consider intergenerational relationships as a fundamental component of older adults' daily lives, focusing on parental self-efficacy in old age, as this appears to be a resilience resource</p>
<p>Influence of Attachment Anxiety on the Relationship between Loneliness and</p>	<p>Healthcare</p>	<p>Depresión, tipo de apego</p>	<p>Background: Attachment styles influence an individual's ability to maintain relationships throughout their lifespan. Insecure attachment has been associated with many aspects of mental health. The study aimed to explore the influence of attachment on loneliness and depression among old-age residents in long-term care facilities. Methods: A survey was conducted among</p>

<p>Depression among Long-Term Care Residents</p>			<p>residents from long term care facilities (LTC) in Thailand during the COVID-19 pandemic; 221 older people participated in the study. The mean aged was 73.60 ± 7.45 years old, and 57.5% female. All participants completed the Geriatric Depression Scale, the six-item revised version of the University of California Los Angeles Loneliness Scale, and the Revised Experience of Close Relationships questionnaire to measure depressive symptoms, loneliness, and attachment style. Hierarchical multiple regression analysis was performed to find the predictors for depressive symptoms. Results: In all, 40.7% of residents in LTC facilities experienced depression. Male sex, education, loneliness, and attachment anxiety predicted the increased level of depressive symptoms. Conclusion: Loneliness was confirmed to be significantly associated with depressive symptoms, and attachment anxiety was found to be a strong predicting factor of depressive symptoms. Intervention and research regarding reducing loneliness and attachment anxiety should be promoted in LTC settings.</p>
<p>Age-Related Differences of Rumination on the Loneliness-Depression Relationship: Evidence From a Population-Representative Cohort</p>	<p>Innovation in aging</p>	<p>Rumiación, edad, síntomas depresivos</p>	<p>Loneliness and rumination were positively associated with depressive symptoms, and they significantly interacted in predicting cognitive-affective symptoms. Further analysis of age showed that the interaction was significant only in middle-aged adults and older adults. Both rumination and age interacted with loneliness, respectively, in predicting cognitive-affective symptoms.</p>
<p>Loneliness and Depression among Older People Living in a Community of Nepal</p>	<p>Journal of Nepal Health Research Council</p>	<p>Depresión</p>	<p>Older people felt loneliness either at a moderate level (38.7%) or at a severe level (16.9%). While people with (49.2%) and without depression (50.80%) were in nearly equal proportion. Age, education level, marital status, living arrangement, childlessness, perceived health status, sleep quality, and sleeping hour, and perceived economic satisfaction showed statistically significant association with both dependent variables. While the presence of disease condition was associated with the level of loneliness, the level of depression showed significant statistical association with perceived stress. Further, loneliness and depression seemed to be positively correlated. Older people experiencing loneliness and depression is quite noteworthy and emphasis should be given towards implementation of research approaches to unleash this aspect of older people.</p>
<p>Loneliness in older people from Spain and Mexico: a comparative analysis</p>	<p>Acta colombiana de psicología</p>	<p>Ansiedad, depresión, factores sociodemográficos y culturales</p>	<p>Se ha encontrado evidencia de que la soledad incrementa la probabilidad de presentar problemas de ansiedad y depresión en personas mayores, razón por la cual se hace importante el estudio de las consecuencias negativas de este fenómeno sobre la salud mental y física de estas personas. El objetivo de este trabajo fue analizar la influencia de la soledad en la vejez y en la forma de convivencia de los adultos mayores, así como determinar si existen diferencias en función del grupo cultural analizado (España y México). Para esto, se utilizó un diseño cuantitativo con alcances comparativos, en el que participaron 691 adultos mayores (hombres = 40.2 %, mujeres = 59.8 %) de 60 o más años ($M = 71.49$, $DE = 7.41$), residentes de España (42.7 %) o México (57.3 %), seleccionados por medio de un muestreo por conveniencia. Para el análisis, por medio de la aplicación de un apartado sobre datos sociodemográficos y la escala ESTE de soledad que mide los déficits existentes en el soporte del sujeto a nivel familiar, conyugal y social, así como los sentimientos resultantes de tales déficits, se procesaron pruebas de hipótesis con el coeficiente χ^2, el coeficiente de contingencia y la prueba t para muestras independientes con un nivel de $p \leq .050$. Los resultados demostraron que las diferencias culturales según el país</p>

			de pertenencia tienen peso sobre la prevalencia de situaciones de soledad en el adulto mayor; que en ambas submuestras las características demográficas hacen diferencia en la caracterización de la soledad; y que hay evidencia de una relación entre los factores sociodemográficos de las personas mayores y la aparición de la soledad. El estudio subraya la importancia del entorno cultural y de las características demográficas sobre la soledad, elementos que se deben tener en cuenta como factores de riesgo para el desarrollo de soledad en las personas mayores.
Risk factors for loneliness among older people in a Nordic regional context - a longitudinal study	Ageing & Society	Viudez, mala salud percibida, depresión	The aim of this study was to examine the prevalence of loneliness among older people and to identify risk factors for loneliness in a Nordic regional context over a six-year period. Longitudinal data from the Gerontological Regional Database (GERDA) study of 4,269 older adults living in northern Sweden and western Finland, aged 65, 70, 75 and 80 at baseline in 2010, were analysed. Logistic regressions were used to analyse socio-demographic, social and health-related risk factors at baseline and changes in these for experiences of loneliness at follow-up. The results showed that most older adults (85%) did not experience loneliness at baseline or at follow-up in our study region. However, 3 per cent of the sample reported loneliness in both study years, indicating enduring and chronic loneliness. Analyses revealed that being widowed and becoming a widow/er as well as poor self-rated health at baseline and the onset of depression were risk factors for loneliness. Finally, the risk of loneliness was higher in older people living in Sweden. Further work is needed to explore changes and stability in loneliness as well as to increase our understanding of between-country differences in loneliness.
Loneliness, Social Support, and Adjustment to Aging in Older Portuguese Gay Men	Sexuality Research and Social Policy	Apoyo social, orientación sexual, nivel educativo	Overall, high levels of loneliness were found, particularly among those with lower education levels. Low levels of family support, friends support and connectedness to the LGBT community were all significant predictors of loneliness in the regression analyses, but adjustment to aging was not. These findings add to the international literature on the correlates of loneliness among older sexual minorities. Such findings may inform the development of psychosocial interventions and promote healthcare engagement among older sexual minorities, which are important steps toward reducing health disparities that affect this population.
Leisure activity and cognitive function among Chinese old adults: The multiple mediation effect of anxiety and loneliness	Journal of Affective Disorders	Actividades de ocio, funcionamiento cognitivo	The study suggests that leisure activity can improve cognitive function through decreasing anxiety and loneliness among the Chinese elderly. Diversified interventions aimed at increasing leisure activity participation in older adults would be beneficial for their mental health and cognitive function.
The relationship between perceived loneliness and depression in the elderly and influencing factors	Perspectives in Psychiatric Care	Depresión	A positive relationship was found between depression and loneliness. Loneliness, applying to a family health center/hospitalization, educational level, social loneliness, and age were found to be the predictors of depression. Depression, applying to a family health center/hospitalization, and marital status were found to be the predictors of loneliness.
Loneliness and Health Outcomes Among Malaysian Older Adults	Makara Journal of Health Research	Depresión, enfermedades crónicas	Results revealed that 32.6% of the respondents had social loneliness, 39.9% had emotional loneliness, and 9.2% had family loneliness. Bivariate analyses showed that social and emotional loneliness are significantly related to depression. Moreover, emotional and social loneliness were significantly associated with chronic illness. The results of the multiple logistic regression indicated that depression was a significant predictor of social loneliness (OR = 2.5, 95% CI: 1.1–

			5.7; $p = 0.03$) and that chronic illness (OR = 0.4, 95% CI: 0.2–0.8; $p = 0.02$) remained a significant predictor of family loneliness.
Intolerance of Uncertainty and Loneliness in Older Adults During the COVID-19 Pandemic	Frontiers in Psychiatry	Intolerancia a la incertidumbre, COVID, vivir solo	During the quarantine, attention was promptly drawn upon the risks related with older people's loneliness. Studies identifying factors that may contribute to loneliness during a public health emergency facilitate the implementation of supportive interventions. Preparedness to address and manage older people's loneliness may limit this deleterious emotional response during the pandemic, as well as at the post-COVID-19 phase.
Loneliness in Old Age, the Related Factors, and Its Association with Demographics and Districts of Residence	International Journal of Environmental Research and Public Health	Actividades instrumentales de la vida diaria, salud autopercebida	Loneliness among older people has now become a serious public health issue. There have been few previous studies conducted among Chinese populations on the correlations between loneliness, self-rated health, and instrumental activities of daily living (IADL), and their association with demographic characteristics. In this study, data were collected using quota sampling through survey interviews. Older people living in representative districts were recruited. Of the participants, 60.1% rated their health as average and 58.1% showed a high level of loneliness. IADL and self-rated health (SRH) were found to be moderately positively correlated, with $r = 0.357$, $p < 0.001$. A low negative correlation was found between the level of loneliness and IADL, with $r = -0.276$; and SRH, with $r = -0.288$, $p < 0.05$. Ordinal Regression results showed that subjects with higher IADL scores (OR: 0.64, 95% CI: 0.39–1.05) were less lonely, while those with a less desirable economic status (OR: 3.34, 95% CI: 1.40–7.96) and living in the central business district were more likely to have a higher loneliness score (OR: 21.33, 95% CI: 4.81–95.41). It is essential to screen for loneliness, and interventions should be focused on improving social connections and support for older people to overcome their feelings of loneliness.
Factors Associated with Loneliness in Rural Older Adults during the COVID-19 Pandemic: Focusing on Connection with Others	Healthcare	Sexo, situación económica, vínculos en el barrio, percepción independiente de uno mismo, percepción interdependiente de uno mismo, comunicación por teléfono	The spread of COVID-19 is considered to have strengthened people's awareness of others. Additionally, the COVID-19 pandemic has reduced connection with others among older adults and increased loneliness. This study aimed to investigate the factors affecting loneliness among older adults in rural areas during the COVID-19 pandemic by focusing on the connection with others. The target group included 932 rural Japanese adults, aged 65–74 years. An anonymous, self-administered questionnaire survey was conducted. Valid responses were obtained from 405 participants (valid response rate: 43.5%). A multiple regression analysis was performed using the forced entry method with loneliness as the dependent variable. The independent variables were those showing significant associations with loneliness based on the univariate analysis. Sex (beta = -0.139), economic situation (beta = -0.103), neighborhood ties (beta = -0.260), independent view of self (beta = -0.213), interdependent view of self (beta = 0.171), and communication through phone (beta = -0.128) were significantly associated with loneliness. Connection with others and subjective views of the relationship between self and others were associated with loneliness in situations where one was more aware of the behavior of oneself and others in an infectious disease pandemic.
The mediating role of self-acceptance in the relationship between loneliness and subjective well-being among the	Medicine	Autoaceptación, bienestar	The purpose of this study was to investigate the mediating effects of self-acceptance on loneliness and subjective well-being (SWB) among elderly subjects living in Chinese nursing homes. This cross-sectional study was conducted between October 2019 and March 2020. A total of 415 elderly participants aged 60 to 97 years (mean 81.12 +/- 8.90 years) from 3 medical and nursing homes in Fuyang city, Anhui province, were selected using a convenience sampling

<p>elderly in nursing home A cross-sectional study</p>			<p>method. Data were collected using a general information questionnaire, the Memorial University of Newfoundland Scale of Happiness, the self-acceptance scale, and the UCLA Loneliness scale. Correlations, regressions, and structural equation models were used for the analyses. Multiple linear regression analysis was performed to confirm the factors influencing the SWB. Bootstrapping was performed to confirm the mediation effect. The loneliness of elderly subjects in nursing homes was significantly correlated with self-acceptance and SWB ($r = -0.338$, $P = -0.383$, $P < .01$), and self-acceptance was significantly correlated with SWB ($r = 0.401$, $P < .01$). Multiple linear regression revealed that the relationship with children, loneliness, residence time in nursing homes, income, marital status, self-acceptance, original residence, and frequency of children's visits were the main factors affecting SWB. Bootstrapping showed that the mediating role of self-acceptance was statistically significant. The SWB of elderly individuals living in Chinese nursing homes was moderate. Low-income people, subjects from rural areas, and those newly admitted to nursing homes should be emphasized in interventions, and appropriate measures should be taken to harmonize the relationships between elderly residents and their children. Self-acceptance partially mediated the relationship between loneliness and SWB. Consequently, self-acceptance should be the focus of improving the SWB of elderly nursing home residents.</p>
<p>The Study of Relationship Between Loneliness and Suicidal Ideation Among Elderly Living Alone: Focusing Moderating Effects of Perceived Social Support and Structural Social Support</p>	<p>Korea Academy of Care Management</p>	<p>Ideación suicida, apoyo social percibido, apoyo social estructural</p>	<p>This study's purpose was to examine the impact of loneliness, and two types of social support (functional and structural) on the suicidal ideation among elderly living alone. About 254 research participants were recruited from Seoul City and other cities in Gyeonggi-do and finished the questionnaires of loneliness, perceived social support, structural social support, and the suicidal ideation. Data were entered into multiple regression analyses. The finding of this research study indicates that loneliness was an important predictor for suicidal ideation. Thus, increased loneliness was associated with a high level of the suicidal ideation. This research study result showed a moderating effect of functional social support. However, structural social support did not moderate relationship between loneliness and suicidal ideation. This research study would provide implications for social work practices.</p>
<p>Subjective Social Status as a Predictor of Loneliness: The Moderating Effect of the Type of Long-Term Care Setting</p>	<p>Research on Aging</p>	<p>Estatus social subjetivo</p>	<p>Much has been written about the important role that subjective social status plays in older adults' well-being and subjective health. Less is known, however, about the potential role played by subjective social status in people's sense of loneliness. In the present study, the author examined the role of subjective social status as a predictor of loneliness in adult day care centers (ADCCs) and continuing care retirement communities (CCRCs) over a 1-year period. The main analyses consist of data from 245 respondents (141 ADCC participants and 104 CCRC residents) who completed the interviews in Waves 1 and 2. A significant interaction between subjective social status and type of long-term care setting was found. Higher levels of subjective social status were associated with lower levels of loneliness in CCRCs, but no such association was evident in ADCCs. These findings are interpreted in view of the characteristics of the CCRC as a total institution versus the ADCC as a setting that provides support for only several hours per day, several days per week.</p>

<p>Staying connected in old age: associations between bonding social capital, loneliness and well-being and the value of digital media</p>	<p>Aging and Mental Health</p>	<p>Bonding social capital, bienestar, redes sociales</p>	<p>Objectives We examined associations between age, bonding social capital (BSC), loneliness and psychological, social and emotional well-being in old age. As in theory digital media can support both preservation of and access to someone's social capital, we also explored associations between the use of WhatsApp, social network sites (SNS) and Internet applications and respectively BSC and loneliness. Method In this cross-sectional study a sample of 349 older adults (range = 70y-93y; Mean(SD)=74.8y(4.9y); 59.6% male) filled out a questionnaire including the bonding social capital subscale of the personal social capital scale for elderly (PSCSE), validated scales measuring social, emotional, and psychological well-being and loneliness, the SNS intensity scale and items measuring frequencies of Whatsapp use and use of various Internet functions. Also relevant demographic and other covariates were included. Results Regression analyses including relevant covariates confirmed our hypotheses, finding negative associations between BSC and both age and loneliness, and positive associations between BSC and psychological, social and emotional well-being. WhatsApp and Internet use were both found positively associated with BSC, whilst a negative association between WhatsApp use and loneliness was found. SNS use was not associated with BSC nor with loneliness. Conclusion Our findings indicate BSC as an important factor in positive aging and illustrate a widening gap between the need for socio-emotional resources versus their availability. With regard to digital media, we conclude that its value in old age should be sought in providing access to one's bonding social capital rather than adding to it by expanding the number of social relations.</p>
<p>PREDICTORS OF LONELINESS AMONG OLDER ADULTS IN SOUTH-EASTERN NIGERIA Implications for Social Workers</p>	<p>Europea Journal of Mental Health</p>	<p>Número de hijos, salud, apoyo social</p>	<p>Old-age loneliness is a crucial public health issue with mortality consequences as well as other negative health conditions and lifestyles including depression, substance abuse, sedentary lifestyles, and suicide ideation. This study investigated the predictors of loneliness among older adults in Nigeria's southeast in order to articulate some interventions that will plummet the issue. A structured questionnaire (N = 516), in-depth interviews (N = 8), and focus group discussion (N = 16) were used to collect data from respondents aged 60 years or older. The quantitative data sets were subjected to chi-square and binary regression analysis, while a thematic analysis was adopted for the qualitative data. The study's findings show that some demographic factors such as the number of children ($p < .002$), health status ($p < .023$), and social support ($p < .014$), among others, were statistically significant in predicting loneliness among older adults. The study, therefore, recommends the consideration of community-based services to enable elderly adults to buffer the experience of loneliness. Social workers should also influence the various organs responsible for social policies to formulate and promote policies that address the well-being of older adults.</p>
<p>Depression, Perceived Loneliness and Partial Functional Impairment among Older Adults</p>	<p>Journal of Clinical and Diagnostic Research</p>	<p>Depresión, discapacidad funcional parcial</p>	<p>The prevalence of depression was 40.16%. A 23 (3.8%) subjects perceived low degree of loneliness, and 6 (1%) subjects perceived moderately high degree of loneliness. It was also found that 20(3.3%) subjects required minimum help and 1(0.2%) subject was completely dependent on their activities of daily living. There was modest negative correlation between loneliness and partial functional impairment ($r=-0.018$) but, no significant correlation was found between depression and perceived loneliness.</p>
<p>Loneliness, social dislocation and invisibility experienced by older men</p>	<p>Ageing & Society</p>	<p>Hombres, identidad sexual</p>	<p>Across literature on loneliness and ageing, little attention is given to the intersection of ageing, sexuality and masculinities, and how this shapes the social connections of older men. We report</p>

<p>who are single or living alone: accounting for differences across sexual identity and social context</p>			<p>findings from a qualitative study of older men's experiences of loneliness and social participation, focusing on perspectives from two groups who are single and/or living alone: men identifying as (a) heterosexual and (b) gay (not bisexual). We present findings generated from semi-structured interviews with 72 men residing in England (65–95 years). We discuss three prominent themes: (a) loneliness, loss and social dislocation; (b) diverging life-events that trigger loneliness; and (c) variations in visibility and exclusion across social settings. Embedded within men's descriptions of loneliness is a running theme of social dislocation that speaks to a wider sense of social separation and estrangement. Unique to gay men's accounts are the ways in which experiences of loneliness and social isolation are compounded by living in heteronormative social environments and their encounters with ageism in gay social settings. Older men's accounts convey anxieties about visibility and anticipated exclusion across social settings shared with other men that vary according to sexual identity and context. We discuss how sexuality and being single and/or living alone impact on older men's social participation as we seek to move beyond a heterocentric understanding of loneliness</p>
<p>Posttraumatic stress disorder, complex PTSD and subtypes of loneliness among older adults</p>	<p>Journal of Clinical Psychology</p>	<p>Estrés postraumático</p>	<p>Research examining the relationship between loneliness and Complex Posttraumatic Stress Disorder (CPTSD) is scarce, particularly among older adults. CPTSD includes the core symptoms of PTSD along with additional symptoms reflecting “disturbances in self-organisation” (DSO). This study examined the cross-sectional relationships between loneliness (emotional and social loneliness) and CPTSD symptoms (i.e., PTSD and DSO symptoms) in older adults. Methods: Structural equation modelling was used to examine these relationships in a nationally representative sample of US adults aged 60–70 years (n = 456). Results: Controlling for covariates, emotional loneliness was associated with PTSD ($\beta = 0.31$) and DSO ($\beta = 0.57$) symptoms whereas social loneliness was only associated with DSO symptoms ($\beta = 0.25$). The model explained 35.0% of the variance in PTSD symptoms and 71.3% in DSO symptoms. Conclusion: These findings have important implications for treating and understanding PTSD/CPTSD and their correlates among older adults.</p>
<p>Social Support, Isolation, Loneliness, and Health Among Older Adults in the PRISM Randomized Controlled Trial</p>	<p>Frontiers in Psychology</p>	<p>Apoyo social, aislamiento, salud</p>	<p>Social isolation and loneliness are serious public health issues given the association with negative physical, mental; and cognitive health outcomes and increased risk for mortality. Due to changes in life circumstances many aging adults are socially isolated and experience loneliness. We examined the relationships among four correlated but distinct constructs: social network size, social support, social isolation, and loneliness as they relate to indices of health and wellbeing among diverse subpopulations of older adults. Guided by WHO's International Classification of Functioning, Disability and Health (ICF) we also examined factors that predict loneliness and social isolation. Methods: Analyses of baseline data from sample of older adults who participated in an intervention trial that examined the beneficial effects of a software system designed to support access to resources and information, and social connectivity. Participants included 300 individuals aged 65–98, who lived alone, were primarily of lower socio-economic status and ethnically diverse. Participants completed a demographics questionnaire, self-report measures of health, depression, social network size, social support, and loneliness. Results: Loneliness was strongly associated with depression and self-ratings of health. In turn, greater social isolation and less social support were associated with greater loneliness. Social</p>

			isolation was associated with depression and lower self-ratings of health. The association between social isolation and health was mediated by loneliness. Individuals in the older cohorts (80+) reported less social support. With respect to loneliness, having a smaller social network, more functional limitations, and limitations in engaging meaningful activities was associated with higher levels of loneliness and greater social isolation. Conclusion: The findings underscore the importance of social connectivity to wellbeing for older adults and suggest that those in the older cohorts, who have a small social network, and with greater physical and functional impairments may be particularly vulnerable to being socially isolated and lonely. The findings provide guidance for future interventions. In this regard, we discuss how Information and Communication Technologies (ICTs) may be used to promote social connectivity and engagement. Strategies to make the usability and availability of these applications for aging adults are highlighted.
Loneliness and activity engagement among rural homebound older adults With and without self-reported depression	American Journal of Occupational Therapy	Depresión, compromiso con actividades, contexto rural	Rural homebound older adults are a vulnerable population at risk for depression, loneliness, and limited participation, but studies that examine these factors in this population are scarce. Objective: To describe the degree of depression, loneliness, and activity engagement among rural homebound older adults and determine differences in loneliness and activity engagement between those with and those without self-reported depression. Design: Cross-sectional survey. Setting: Two rural counties in south central Indiana. Participants: Homebound adults ages 60 yr and older who received nutritional or companionship services from a local Area Agency on Aging. Outcomes and Measures: Depression was measured with an item on the self-report questionnaire and the Geriatric Depression Scale-15. Loneliness was measured with an item on the self-report questionnaire and the UCLA Loneliness Scale. Activity engagement was measured with the Engagement in Meaningful Activities Survey and the Meaningful Activity Participation Assessment. Results: Ninety-one participants returned surveys, of which 78 were analyzed. Regarding depression, 40% of participants reported having it, but results for the Geriatric Depression Scale-15 showed that 63% were in the indicative or suggestive range for depression. Participants in general reported moderate loneliness and low to moderate engagement in meaningful activities. Those with self-reported depression had significantly higher loneliness and lower activity engagement, particularly in self-care, leisure, and socializing activities. Conclusions and Relevance: A high proportion of this sample of rural homebound older adults had depression. Those who did tended to have a higher degree of loneliness and lower engagement in meaningful activities. What This Article Adds: Depression was associated with greater loneliness and lower activity engagement in rural homebound older adults. Occupational therapy practitioners serving rural homebound older adults with depression should consider providing interventions to address loneliness and facilitate activity engagement.
The Phenomenon of Loneliness in Old Age	Psychology in Russia: State of the Art	Actitudes hacia la soledad, bienestar psicológico	The issue of solitude is fragmentary in gerontological investigations, and is generally interpreted as loneliness: a negative experience of lack of relationships with other people. Ageing people have many variants of loneliness, often connected with their own prejudices or satisfaction with their social contacts. In loneliness, opportunities and rights to the sovereignty of one's life space can be preserved. Objective. To study loneliness as a fact of life, a multi-dimensional phenomenon, including the feeling of loneliness itself, lack of communication, and ability to be

			<p>alone. We suppose that senior adults with different levels of psychological well-being are specific in this acceptance of loneliness and ability to find resources in this situation. Design. The participants comprised 129 residents of Kamchatka Region aged 60–82. In the first stage, using C. Ryff’s “Psychological Well-Being Scale” with midvalues cluster analysis, the respondents were divided into groups with different levels of psychological well-being. In the second stage, the data of the “Differential Questionnaire on Experiencing Loneliness” and “Subjective Perception of One’s Own Life” questionnaire were used for correlation analysis of interrelations between psychological well-being and the “positive loneliness” subscale, revealing the participants’ ability to find resources in loneliness. Results. The research shows that experiencing loneliness in the gerontological cohort is non-homogeneous; it is interconnected with personal attitudes towards positive loneliness, with psychological well-being. It changes the activities of the elderly and the extent of experiencing loneliness. Conclusion. There is cultural mitigation of loneliness in gerontological cohorts and also in their shift from a negative mindset towards an existential one</p>
<p>Loneliness, age at immigration, family relationships, and depression among older immigrants: A moderated relationship</p>	<p>Journal of Social and Personal Relationships</p>	<p>Edad, inmigración, depresión, relaciones familiares</p>	<p>Guided by a convoy model of social relations, this study explores the complex relationships between loneliness, age at immigration, familial relationships, and depressive symptoms among older immigrants. This study used 2010 Health and Retirement Study data from a sample of 575 immigrants (52% female, age range 65–99 years). Ordinary least squares regression models were estimated. The findings indicate that for older immigrants who came to the United States at age 45 or older, loneliness was significantly positively associated with depressive symptoms. Further, perceived negative strain and hours spent helping family moderated this relationship such that the effect of loneliness on depressive symptoms was stronger among respondents who perceived more negative family strain and spent fewer hours helping family. Familial relationships are crucial for the psychological well-being of older immigrants because they can be a source of either stress or support. The results have implications for how research and practices can support the immigrant families.</p>
<p>Loneliness and Off-Topic Verbosity Among Young Adults and Older Adults</p>	<p>Psychological Reports</p>	<p>¿Irse por las ramas?</p>	<p>Off-topic verbosity (OTV) refers to prolonged speech that derails from the initial conversational topic by including more loosely associated speech and becoming increasingly more unfocused and distant from the initial topic. Previous research has suggested that, among older adults, loneliness may be associated with greater OTV. The purpose of this study was to investigate the nature of the relationship between loneliness and OTV among young adults (n = 62) and older adults (n = 80). Methods: Participants completed a measure of loneliness and provided speech samples, which were transcribed and rated for OTV. Results: Results indicated some relationship between loneliness and tangentiality of speech, particularly among older adults. Discussion: Overall, loneliness may be associated with greater OTV in older adults, which could further explain the connection between increased loneliness and worse health outcomes in older adulthood.</p>
<p>'Big Five' personality characteristics are associated with loneliness but not with social network size in older adults, irrespective of depression</p>	<p>International Psychogeriatrics</p>	<p>Cinco grandes (personalidad)</p>	<p>Loneliness and social isolation have negative health consequences and are associated with depression. Personality characteristics are important when studying persons at risk for loneliness and social isolation. The objective of this study was to clarify the association between personality factors, loneliness and social network, taking into account diagnosis of depression, partner status and gender. Design: Cross-sectional data of an ongoing prospective cohort study, the Netherlands</p>

			<p>Study of Depression in Older Persons (NESDO), were used. Setting and participants: 474 participants were recruited from mental health care institutions and general practitioners in five different regions in the Netherlands. Measurements: NEO-Five Factor Inventory (NEO-FFI) personality factors and loneliness and social network were measured as well as possible confounders. Multinomial logistic regression analyses were performed to analyse the associations between NEO-FFI factors and loneliness and social network. Interaction terms were investigated for depression, partner status and gender. Results: Higher neuroticism and lower extraversion in women and lower agreeableness in both men and women were associated with loneliness but not with social network size irrespective of the presence of depression. In the non-depressed group only, lower openness was associated with loneliness. Interaction terms with partner status were not significant. Conclusions: Personality factors are associated with loneliness especially in women. In men lower agreeableness contributes to higher loneliness. In non-depressed men and women, lower openness is associated with loneliness.</p>
<p>Loneliness and depression in the elderly: the role of social network</p>	<p>Social Psychiatry and Psychiatric Epidemiology</p>	<p>Depresión, red social</p>	<p>Loneliness and depression are associated, in particular in older adults. Less is known about the role of social networks in this relationship. The present study analyzes the influence of social networks in the relationship between loneliness and depression in the older adult population in Spain. Methods: A population-representative sample of 3535 adults aged 50 years and over from Spain was analyzed. Loneliness was assessed by means of the three-item UCLA Loneliness Scale. Social network characteristics were measured using the Berkman-Syme Social Network Index. Major depression in the previous 12 months was assessed with the Composite International Diagnostic Interview (CIDI). Logistic regression models were used to analyze the survey data. Results: Feelings of loneliness were more prevalent in women, those who were younger (50–65), single, separated, divorced or widowed, living in a rural setting, with a lower frequency of social interactions and smaller social network, and with major depression. Among people feeling lonely, those with depression were more frequently married and had a small social network. Among those not feeling lonely, depression was associated with being previously married. In depressed people, feelings of loneliness were associated with having a small social network; while among those without depression, feelings of loneliness were associated with being married. Conclusion: The type and size of social networks have a role in the relationship between loneliness and depression. Increasing social interaction may be more beneficial than strategies based on improving maladaptive social cognition in loneliness to reduce the prevalence of depression among Spanish older adults.</p>
<p>Perceived loneliness and general cognitive status in community-dwelling older adults: the moderating influence of depression</p>	<p>Aging, Neuropsychology, and Cognition</p>	<p>Estado cognitivo general, depresión</p>	<p>The relationship between depression, loneliness, and cognitive functioning among the elderly is not well understood in the literature. In the present study, we tested the moderating influence of depressive symptoms on loneliness and cognitive functioning. We recruited 100 community-dwelling older adults in Hong Kong. Demographic information, perceived loneliness, depressed mood, and general cognitive status were assessed. Results indicated that married participants reported lower levels of perceived loneliness ($t(96) = 2.26, p = .03$). We found a significant moderating effect of depressive symptoms on the relationship between perceived loneliness and general cognitive status ($B = -.05, p = .002$). Perceived loneliness correlated negatively with general cognitive status only in participants with higher levels of depressed mood ($B = -.16,$</p>

			p =.01). Together, these findings suggest that perceived loneliness combined with depressed mood is related to poorer general cognitive status in older adults. The implications of these findings are discussed
The influence of social support on loneliness and depression among older elderly people in China: Coping styles as mediators	Journal of Community Psychology	Apoyo social, depresión	This study examines the direct effect of social support and the mediating effects of coping styles on loneliness and depression of older elderly people in China using data from the 2014 China Longitudinal Aging Social Survey. Our sample includes 905 males and 741 females aged 75 years and over. The mean age of the sample is 79.71 (standard deviation = 4.01). We use structural equation modeling to show that social support is significantly negatively associated with the incidence of loneliness and depression among older elderly people. Higher levels of social support are also significantly negatively associated with the use of negative coping styles and consequently predict fewer symptoms of loneliness and depression. A higher level of social support is significantly positively associated with positive coping styles and consequently predicts fewer depressive symptoms. However, positive coping styles are not significantly associated with loneliness. These findings emphasize the importance of social networks in resilience and have significant implications for gerontological social work practice in China.
Social isolation, social support, and loneliness and their relationship with cognitive health and dementia	Geriatric Psychiatry	Salud cognitiva, demencia, aislamiento social, apoyo social	Most participants self-reported good social health (92%) with very few socially isolated (2%), with low social support (2%) or lonely (5%). Among women, social isolation and low social support were consistently associated with lower cognitive function (e.g., social support and cognition $\beta = -1.17, p < 0.001$). No consistent longitudinal associations were observed between baseline social health and cognitive decline (over median 3.1 years) or incident dementia (over median 4.4 years; social isolation: HR = 1.00, $p = 0.99$; low social support: HR = 1.79, $p = 0.11$; loneliness: HR = 0.72, $p = 0.34$ among women and men). Our study provides evidence that social isolation and a low social support are associated with worse cognitive function in women, but not men. Social health did not predict incident cognitive decline or dementia, but we lacked power to stratify dementia analyses by gender.
Emotional and Social Loneliness as Predictors of Suicidal Ideation in Different Age Groups	Community Mental Health Journal	Ideación suicida	Loneliness and suicidal ideation (SI) are relevant issues. This study aimed to examine the prevalence of death ideation (DI) and SI in the general population across four age groups and to determine the extent to which emotional and social loneliness are associated with SI. Data were collected via an online panel in Slovenia in February 2019 on a representative sample of 991 participants (50.5% men) aged 18 years and over. Participants completed a series of questionnaires on loneliness, suicidality, stress, and well-being. DI, SI, and previous suicide attempts were most common among younger participants. In each age group, several factors appeared as important predictors of SI, with emotional loneliness being a significant factor in all groups. Given the role of emotional loneliness in SI, prevention programs should address loneliness and its correlates across age groups.
Loneliness in older adult mental health services during the COVID-19 pandemic and before: Associations with disability, functioning and pharmacotherapy	International Journal of Geriatric Psychiatry	Autolesiones no accidentales, ánimo depresivo, síntomas psicóticos, problemas relacionales, problemas	1991 referrals were identified, 56.9% of whom were female, with a mean age of 77.9 years. Only 26.9% occurred during the 2020 lockdown, but with a higher prevalence of loneliness (22.0 vs. 17.7%, $p = 0.028$). In the whole sample, loneliness was associated with non-accidental self-injury (Odds ratio [OR]: 1.65), depressed mood (OR: 1.73), psychotic symptoms (OR: 1.65), relationship problems (OR: 1.49), problems with daytime activities (OR: 1.36), and antidepressant use (OR:

		con actividades diarias, uso de antidepresivos, problemas de consumo de alcohol o drogas	2.11). During lockdown, loneliness was associated with non-accidental self-injury (OR: 2.52), problem drinking or drug-taking (OR 2.33), and antidepressant use (OR 2.10).
Correlates of emotional and social loneliness among community dwelling older adults in Rotterdam, the Netherlands	Aging and Mental Health	Género, apoyo social emocional, calidad de vida, capital social del barrio, compañía, apoyo instrumental	Emotional loneliness was reported by 60% and social loneliness by 47% of the sample. Women were more emotionally lonely than men, while men reported more social loneliness than women. Emotional social support and quality of life were strongest in predicting emotional loneliness and social capital in the neighbourhood, companionship and instrumental support were strongest predictors for social loneliness. Demographic variables predicted variability in emotional loneliness.
Loneliness, Not Social Support, Is Associated with Cognitive Decline and Dementia Across Two Longitudinal Population-Based Cohorts	Journal of Alzheimer's Disease	Deterioro cognitivo y demencia	Background: Poor social health is likely associated with cognitive decline and risk of dementia; however, studies show inconsistent results. Additionally, few studies separate social health components or control for mental health. Objective: To investigate whether loneliness and social support are independently associated with cognitive decline and risk of dementia, and whether depressive symptoms confound the association. Methods: We included 4,514 participants from the population-based Rotterdam Study (RS; aged 71±7SD years) followed up to 14 years (median 10.8, interquartile range 7.4–11.6), and 2,112 participants from the Swedish National Study on Aging and Care in Kungsholmen (SNAC-K; aged 72±10SD years) followed up to 10 years (mean 5.9±1.6SD). At baseline, participants were free of major depression and scored on the Mini-Mental State Examination (MMSE) ≥26 for RS and ≥25 for SNAC-K. We investigated loneliness, perceived social support, and structural social support (specifically marital status and number of children). In both cohorts, dementia was diagnosed and cognitive function was repeatedly assessed with MMSE and a global cognitive factor (g-factor). Results: Loneliness was prospectively associated with a decline in the MMSE in both cohorts. Consistently, persons who were lonely had an increased risk of developing dementia (RS: HR 1.34, 95%CI 1.08–1.67; SNAC-K: HR 2.16, 95%CI 1.12–4.17). Adjustment for depressive symptoms and exclusion of the first 5 years of follow-up did not alter results. Neither perceived or structural social support was associated with cognitive decline or dementia risk. Conclusion: Loneliness, not social support, predicted cognitive decline and incident dementia independently of depressive symptoms.
Loneliness, social dislocation and invisibility experienced by older men who are single or living alone: accounting for differences across sexual identity and social context	Ageing & Society	Orientación sexual, soltería, vivir solo	Across literature on loneliness and ageing, little attention is given to the intersection of ageing, sexuality and masculinities, and how this shapes the social connections of older men. We report findings from a qualitative study of older men's experiences of loneliness and social participation, focusing on perspectives from two groups who are single and/or living alone: men identifying as (a) heterosexual and (b) gay (not bisexual). We present findings generated from semi-structured interviews with 72 men residing in England (65–95 years). We discuss three prominent themes: (a) loneliness, loss and social dislocation; (b) diverging life-events that trigger loneliness; and (c) variations in visibility and exclusion across social settings. Embedded within men's descriptions of loneliness is a running theme of social dislocation that speaks to a wider sense of social separation and estrangement. Unique to gay men's accounts are the ways in which experiences of loneliness and social isolation are compounded by living in heteronormative social

			environments and their encounters with ageism in gay social settings. Older men's accounts convey anxieties about visibility and anticipated exclusion across social settings shared with other men that vary according to sexual identity and context. We discuss how sexuality and being single and/or living alone impact on older men's social participation as we seek to move beyond a heterocentric understanding of loneliness.
Exploring the relationship between loneliness and social cognition in older age	Social Psychology	Cognición social	Understanding others is a key component of successful social interactions, and declines in social abilities during later life can lead to social isolation and loneliness. We investigated the relationship between different sub-components of social cognition and loneliness in a large sample of older adults. We tested perspective-taking and mentalizing skills, alongside self-reported loneliness and social functioning. Results revealed a significant effect of loneliness on older adults' ability to resist egocentric interference when taking others' perspectives. However, this effect was eliminated when age was added to models, which suggests that egocentric tendencies increase with age, and people experience increasing levels of loneliness and feelings of social isolation with increasing age. Mentalizing and interference from others' perspectives were not influenced by loneliness or age.
Loneliness in the elderly and associated factors	REFACS (Revista Familia, Ciclos de Vida e Saúde no Contexto Social)	Síntomas de depresión, autoevaluación de la salud, práctica de actividades placenteras y de bienestar	This is a quantitative, cross-sectional study of a descriptive and correlational type. Data collection took place between August of 2017 and April of 2019, in the city of Uberaba, MG, Brazil. It aimed to analyse the frequency of loneliness in the elderly and relationships between loneliness with the practice of pleasurable activities, depression, subjective well-being and self-rated health. Instruments for assessing loneliness, pleasurable activities, subjective well-being and depression were applied, in addition to a sociodemographic questionnaire in non-institutionalized elderly people without cognitive impairment. 156 elderly people aged between 60 and 88 years were surveyed (M = 69.72; SD = 6.77), 83.3% being female and 16.7% male. A total of 10.9% had moderate to severe loneliness. Significant relationships were found between loneliness and the other constructs: the higher the level of loneliness, the more symptoms of depression, the worse the self-rated health and the lesser the practice of pleasurable activities and well-being. The results point to probable risk and protective factors for loneliness in the elderly, and therefore have relevant implications for planning interventions and public policies aimed at improving the mental health of this public.
Posttraumatic stress disorder, complex PTSD and subtypes of loneliness among older adults	Journal of Clinical Psychology	Soledad emocional con Trastorno Estrés Postraumático y Disturbances in self-organisation (DSO). Soledad social asociada con DSO.	Controlling for covariates, emotional loneliness was associated with PTSD ($\beta = 0.31$) and DSO ($\beta = 0.57$) symptoms whereas social loneliness was only associated with DSO symptoms ($\beta = 0.25$). The model explained 35.0% of the variance in PTSD symptoms and 71.3% in DSO symptoms.
The Effect of COVID-19 Outbreak on Older Adults' Hopelessness, Loneliness and Spiritual Well-Being in Turkey	Journal of Religion and Health	Bienestar espiritual	The aim of this study was to determine the hopelessness, loneliness and spiritual well-being of older adults and the relationship between these three concepts during the COVID-19 pandemic. This research used a cross-sectional, descriptive approach. Data were collected between October 13 and November 13, 2020, with 476 individuals over 65 years living in three different cities in

			Turkey. Data were collected using a demographic information form, Beck Hopelessness Scale (BHS), Loneliness Scale (UCLA-LS) and Spiritual Well-being Scale (FACIT-Sp). During the COVID-19 outbreak, it was found that there was a significant negative relationship between hopelessness, loneliness and spiritual well-being of older adults. In this study, it was found that during the COVID-19 pandemic, the level of hopelessness and loneliness among older adults was below the average score, and their spiritual well-being levels were moderate. Based on the findings of the present study, it is recommended that practices which increase hope, strengthen social ties and spiritual support, should be implemented for older individuals during the COVID-19 pandemic period or any other times during which social distancing is mandatory.
Older people's dialogue about loneliness and social support a cross-cultural qualitative study conducted in Spain and South Africa	International Journal of Social Psychology	Apoyo social	El objetivo de este estudio es explorar y profundizar nuestros conocimientos a partir del diálogo y las percepciones subjetivas de adultos mayores sobre la soledad y el apoyo social desde una perspectiva transcultural. Se organizaron un total de seis grupos focales en centros comunitarios con 43 personas mayores, en dos contextos culturales distintos: el español y el sudafricano. Se analizaron datos sobre dos áreas temáticas clave, la soledad y el apoyo social, aplicando métodos de análisis temático. Los resultados en torno a la soledad revelaron el acuerdo de las participantes de ambos países sobre la idea de la soledad como un sentimiento subjetivo y como una experiencia negativa. Al mismo tiempo, la soledad buscada surgió en las discusiones como una experiencia deseada y placentera. Por lo que respecta al apoyo social, se consideró que este constituye el factor de riesgo más frecuente para la experiencia de la soledad. Se observaron diferencias entre ambos países respecto a las principales fuentes de apoyo social. Los participantes españoles identificaron la familia como principal fuente de apoyo, mientras que los sudafricanos indicaron la comunidad como principal fuente de apoyo social. En conclusión, estos aspectos culturales y las percepciones de apoyo social en el desarrollo de programas y estrategias dirigidas a aliviar la soledad podrían facilitar el incremento de la efectividad de este tipo de intervenciones y, por tanto, conllevar resultados más positivos.
The relationship among aging in place, loneliness, and life satisfaction in the elderly in Turkey	Perspectives in Psychiatric Care	apoyo social percibido, competencia física, apoyo social disponible/alcanzable	In our study, when we examined the subscales of the APS scale, we found that the perceived social support, physical competence, and achievable social support of the elderly were at a high level. These high levels led to increased life satisfaction and decreased loneliness.
Long-Term Conditions in Older People are Linked with Loneliness, but a Sense of Coherence Buffers the Adverse Effects on Quality of Life: A Cross-Sectional Study	Journal of Multidisciplinary Healthcare	Vivir solo (efecto mitigado por sentido de coherencia)	ANOVA demonstrated that age, gender, long-term conditions or disability (LTC-D), living alone, >20 hours unpaid care for others per week, SoC, and loneliness, were associated with lower quality of life ($p < 0.01$). There were strong correlations ($p > 0.01$), between age and LTC-D, living alone, and poor SoC. Living alone was correlated with emotional and social loneliness; but those with higher SoC were less likely to experience loneliness. In an adjusted generalised linear model, significant associations with a lower quality of life were observed from: LTC-D, emotional loneliness and social loneliness ($B = -0.44, -0.30, \text{ and } -0.39$, respectively, all $p < 0.001$). The only interaction with SoC that was statistically significant (at $p < 0.05$) was LTC-D. A stronger sense of coherence buffered the negative effects of long-term condition/disability on quality of life.
Age-Related Differences of Rumination on the Loneliness-Depression	Innovation in aging	Rumiación, síntomas depresivos	Loneliness and rumination were positively associated with depressive symptoms, and they significantly interacted in predicting cognitive-affective symptoms. Further analysis of age

Relationship: Evidence From a Population-Representative Cohort			<p>showed that the interaction was significant only in middle-aged adults and older adults. Both rumination and age interacted with loneliness, respectively, in predicting cognitive-affective symptoms.</p>
Loneliness in Elderly Patients with Mild Cognitive Impairment: A Pilot Study	Dementia and Neurocognitive Disorders	Deterioro cognitivo leve, síntomas depresivos	<p>Although loneliness was not associated with cognitive or functional performance, it was correlated with depression in elderly patients. For elderly patients with MCI, depressive symptoms were reported more frequently in individuals with a high degree of loneliness ($p < 0.05$).</p>