

Parallel Session: Loneliness and Health



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Loneliness and Health

Loneliness in the European Union: Policies at work
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Outline

- Loneliness and health: an important and complex relationship
- Correlates of loneliness and health: Who is at risk?
 - *Beyond common demographic and socio-economic factors: The role of individual childhood circumstances*
 - *More attention should be paid to younger individuals*
- Policy relevance and directions for future research

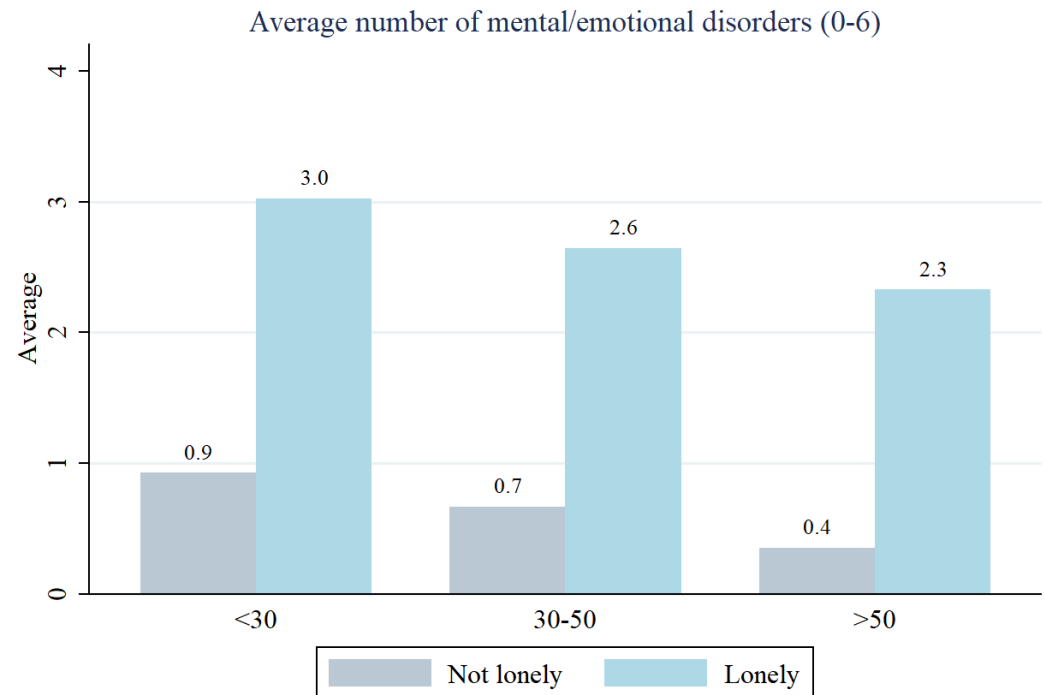
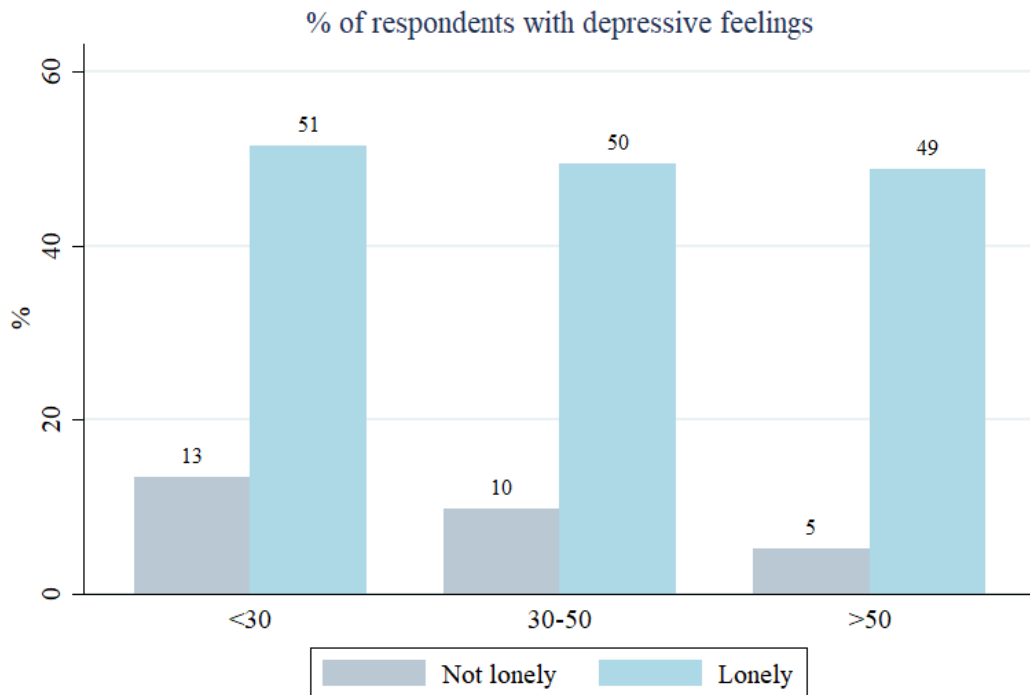
Loneliness and health: an important and complex relationship



Loneliness and health

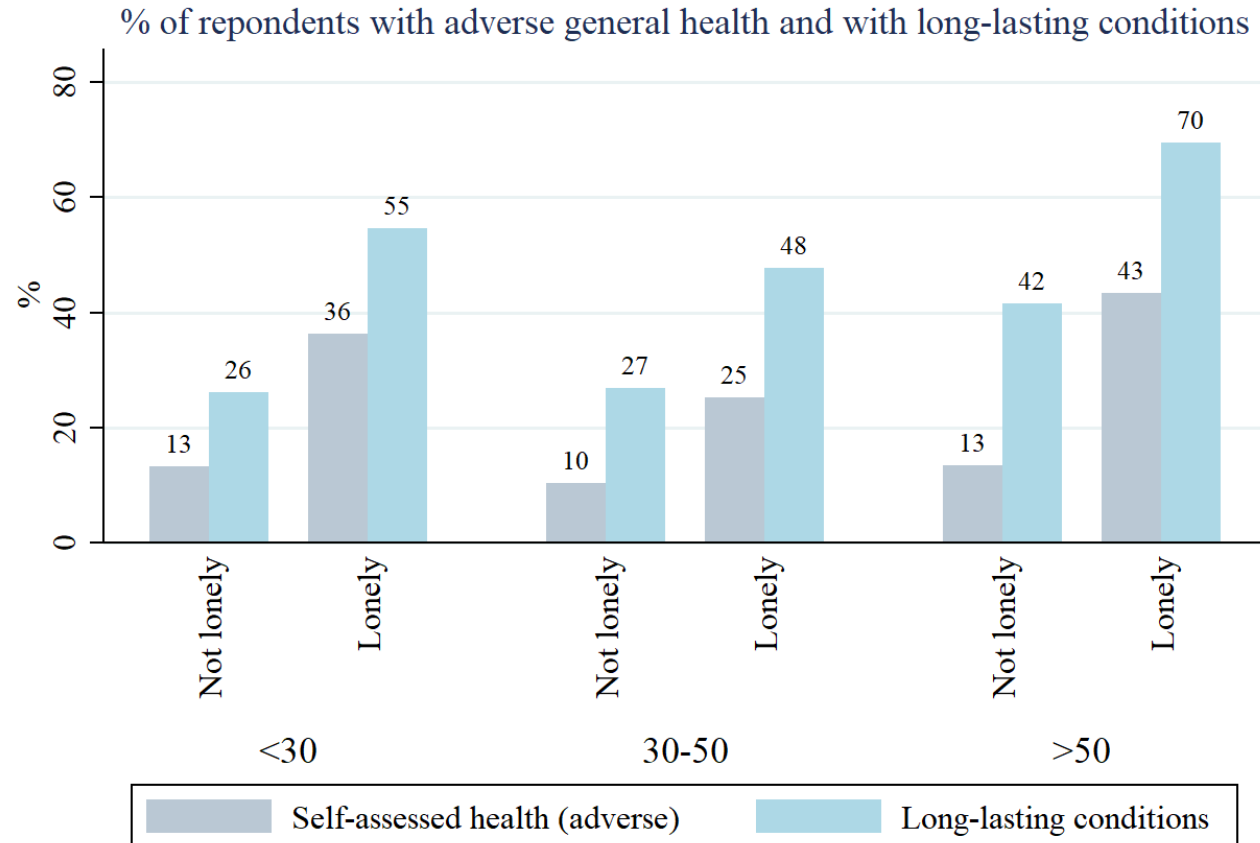
- Loneliness is widely recognized as being a serious *public health* and *economic issue*,
- Literature documents a significant *association* between loneliness and several mental and physical health issues,
- The relationship between loneliness and health is complex, both from an empirical and conceptual point of view,
- **Need for:** better understanding of the drivers of loneliness; loneliness does not affect only older individuals,
- **EU-LS:** additional insights into drivers (adverse childhood experiences) + attention to younger populations.

Lonelier individuals are less healthy: mental well-being



- Individuals feeling lonely most of the time (13% in total) are more affected by mental health issues,
- The prevalence of mental disorders is considerable among younger individuals,
- The average number of mental/emotional disorders decreases with increasing age.

Lonelier individuals are less healthy: physical health

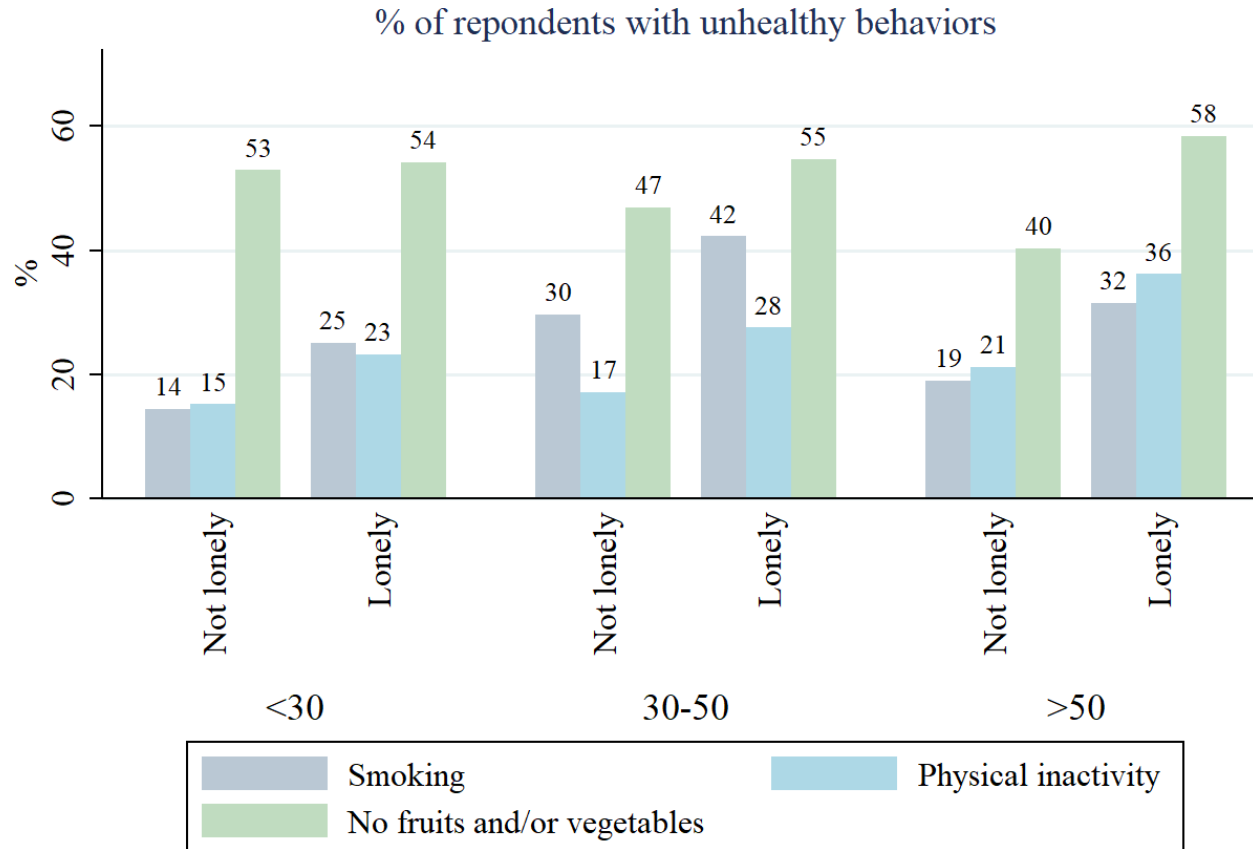


Source: EU-LS, 2022

- Self-assessed health: fairly poor or very poor (13.82% of the sample)
- Long-lasting mental or physical health problem: Yes (35.93% of the sample)

- Less pronounced but still considerably higher incidence of worse general health conditions (and unhealthy behaviors) among lonely individuals, highest among older individuals (50+).

Lonelier individuals engage more in unhealthy behavior



Source: EU-LS, 2022

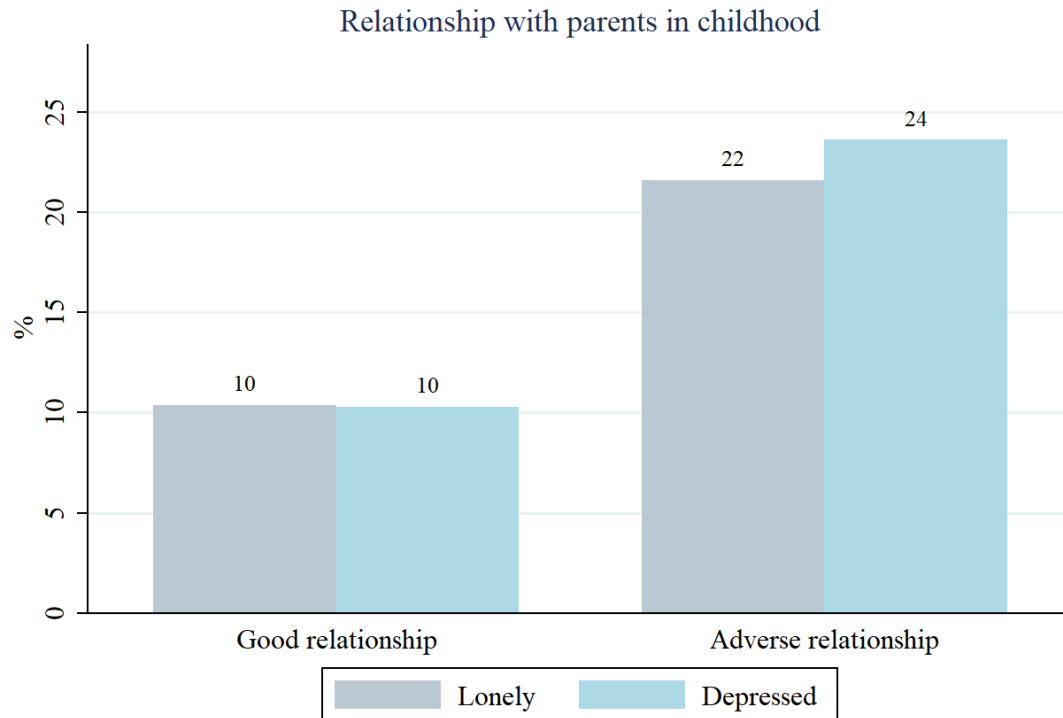
- Smoking: 10 or more cigarettes per day (20.99% of the sample)
- Physical inactivity: No physical activity during past week (17.31% of the sample)
- No fruits and/or vegetables (48.75% of the sample)

- Considerably higher incidence of unhealthy (risky) behaviors among lonely individuals (approx. 10 pp); slight increase with age.

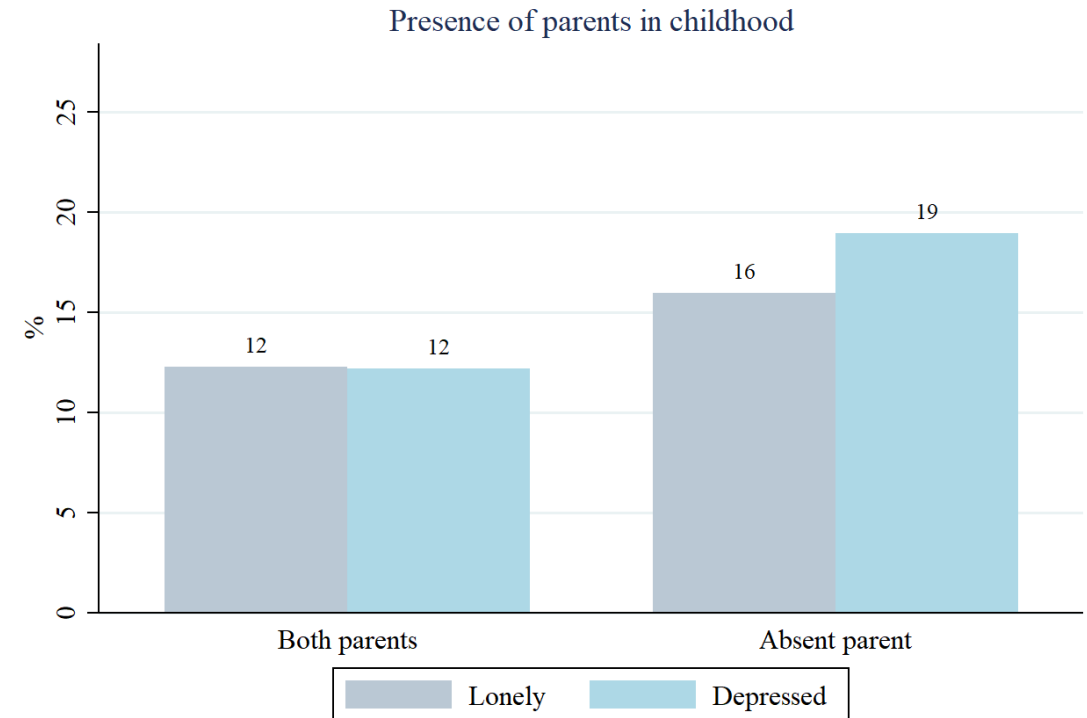
Who is at risk? The role of individual childhood conditions



Individuals with adverse childhood experiences are more lonely and less healthy



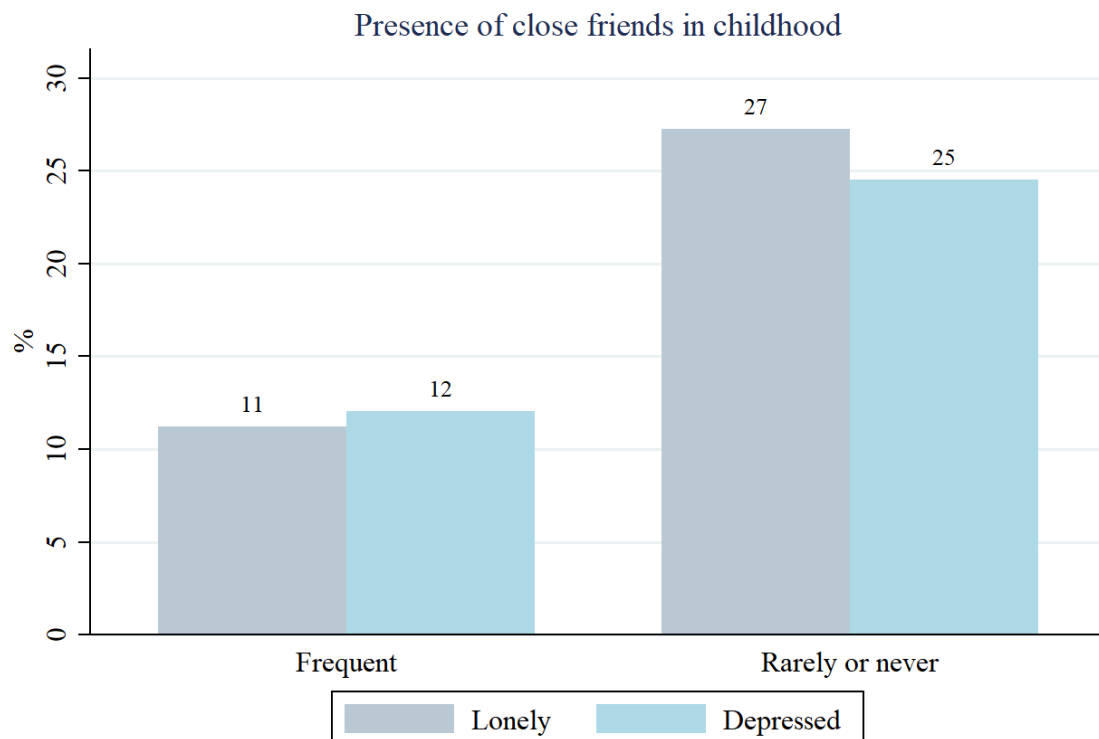
Source: EU-LS, 2022



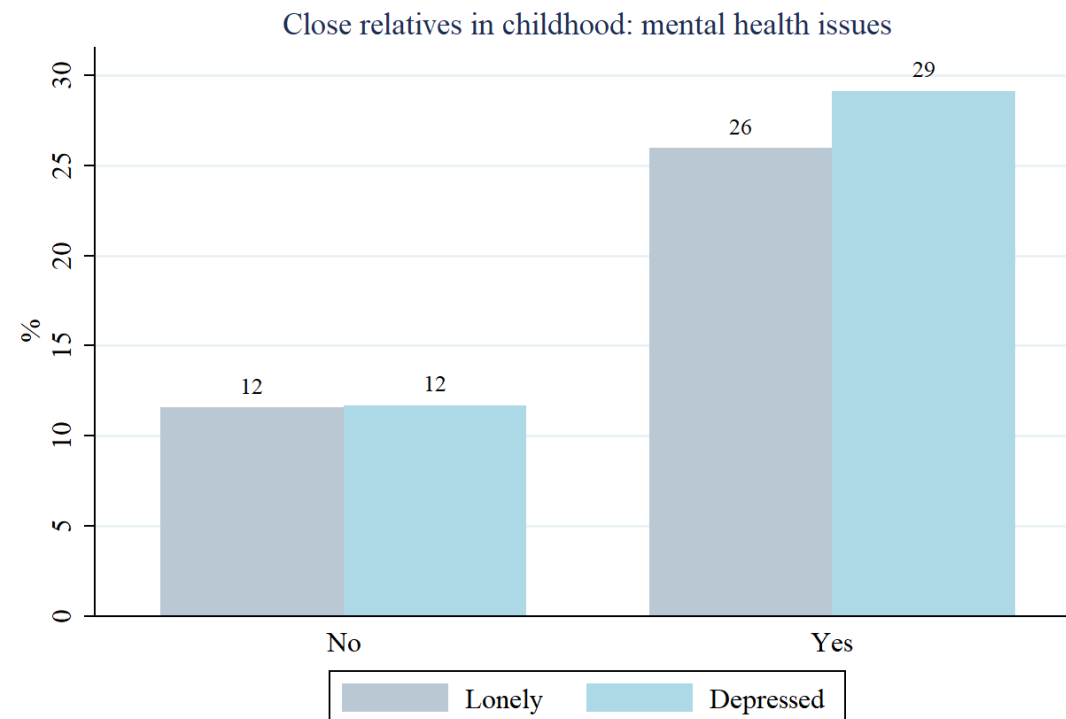
Source: EU-LS, 2022

- Individuals with worse relationship quality with parents (in childhood) are, on average, more lonely and more depressed,
- Less pronounced differences for individuals with a single parent during childhood.

Friends in childhood and relatives with mental issues



Source: EU-LS, 2022

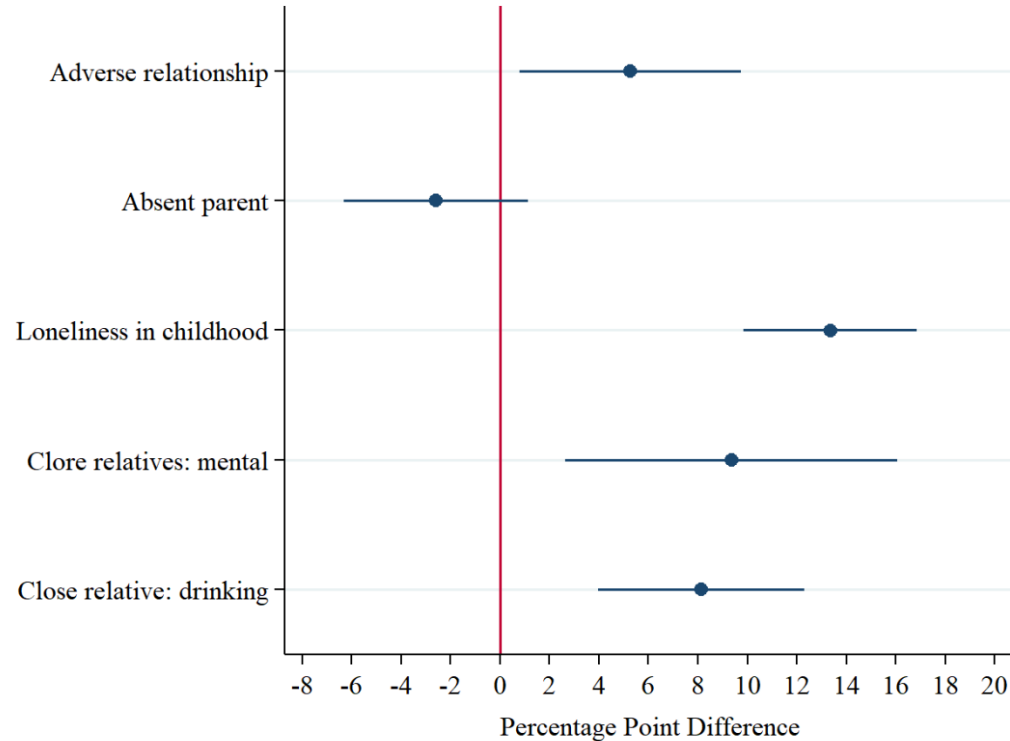


Source: EU-LS, 2022

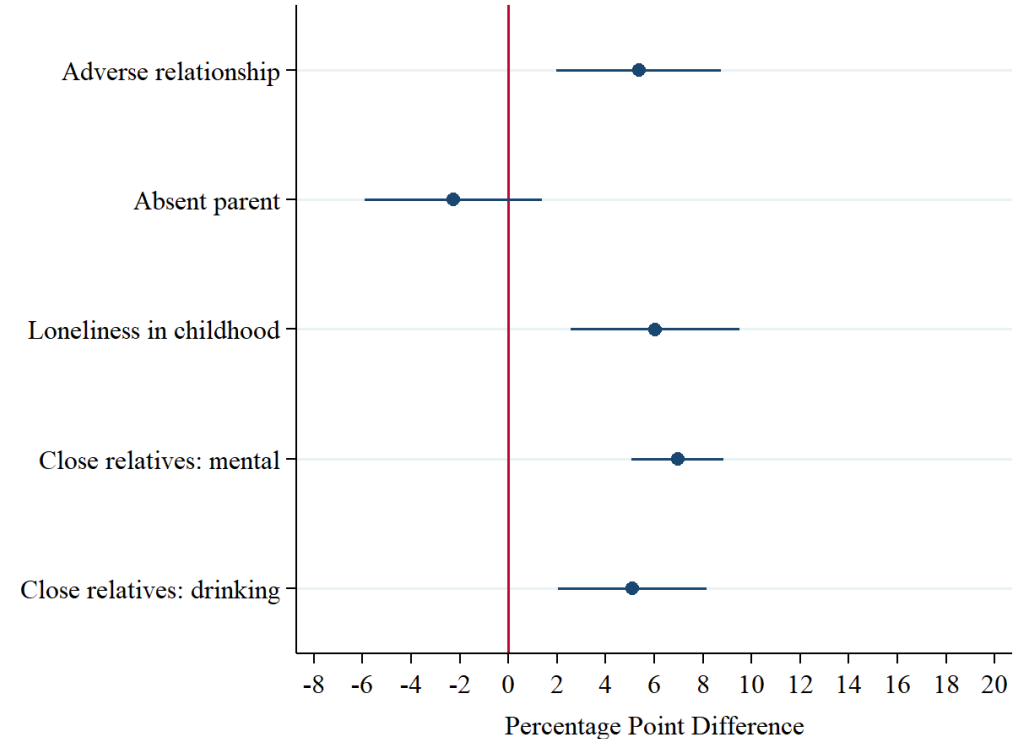
- Less close friends in childhood is associated with higher loneliness and depression later in life,
- A similar association is observed for individuals who grew up with close relatives affected by mental health issues.

How important are adverse childhood conditions for loneliness?

Younger than 30 years

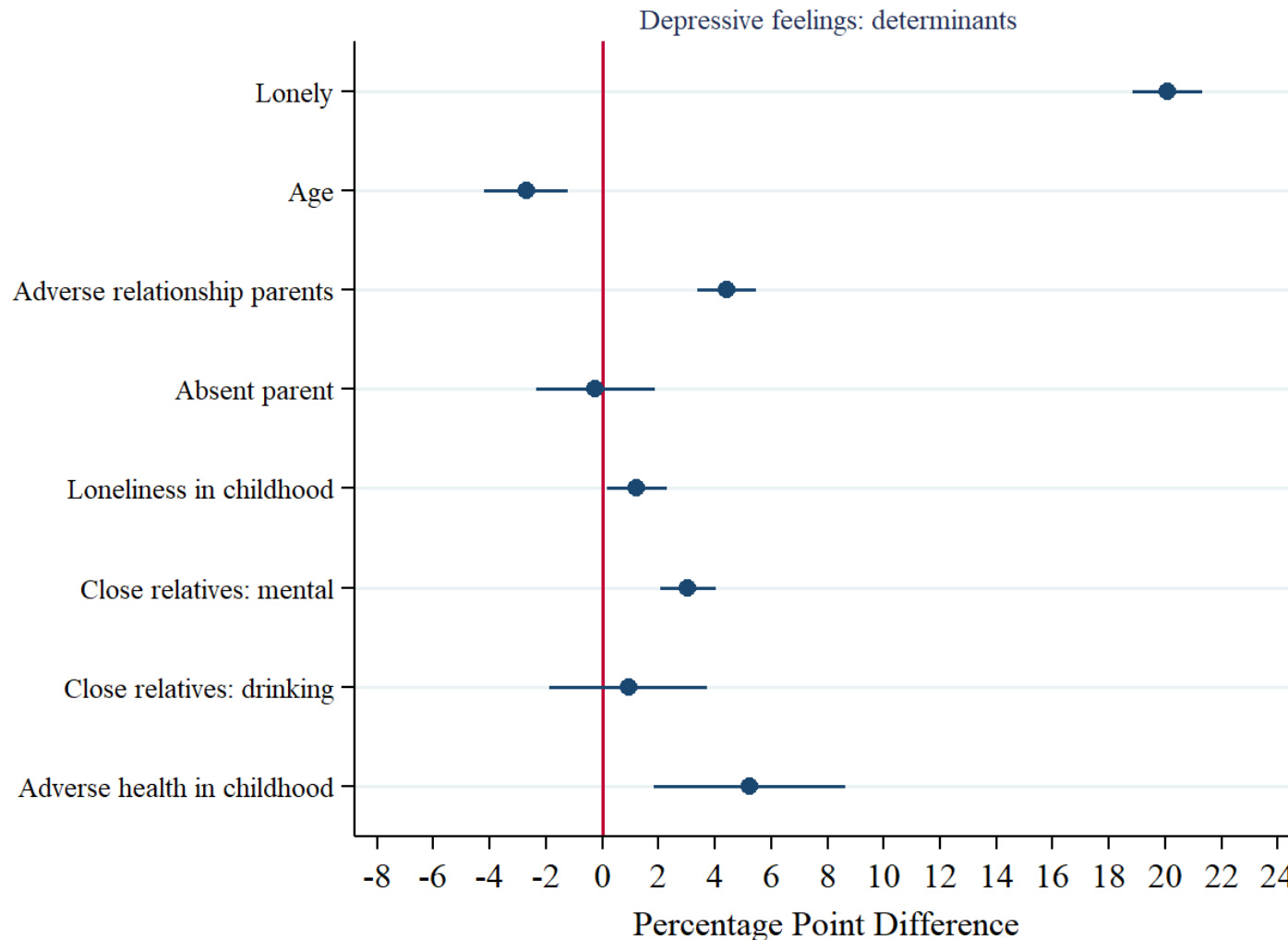


Older than 50 years



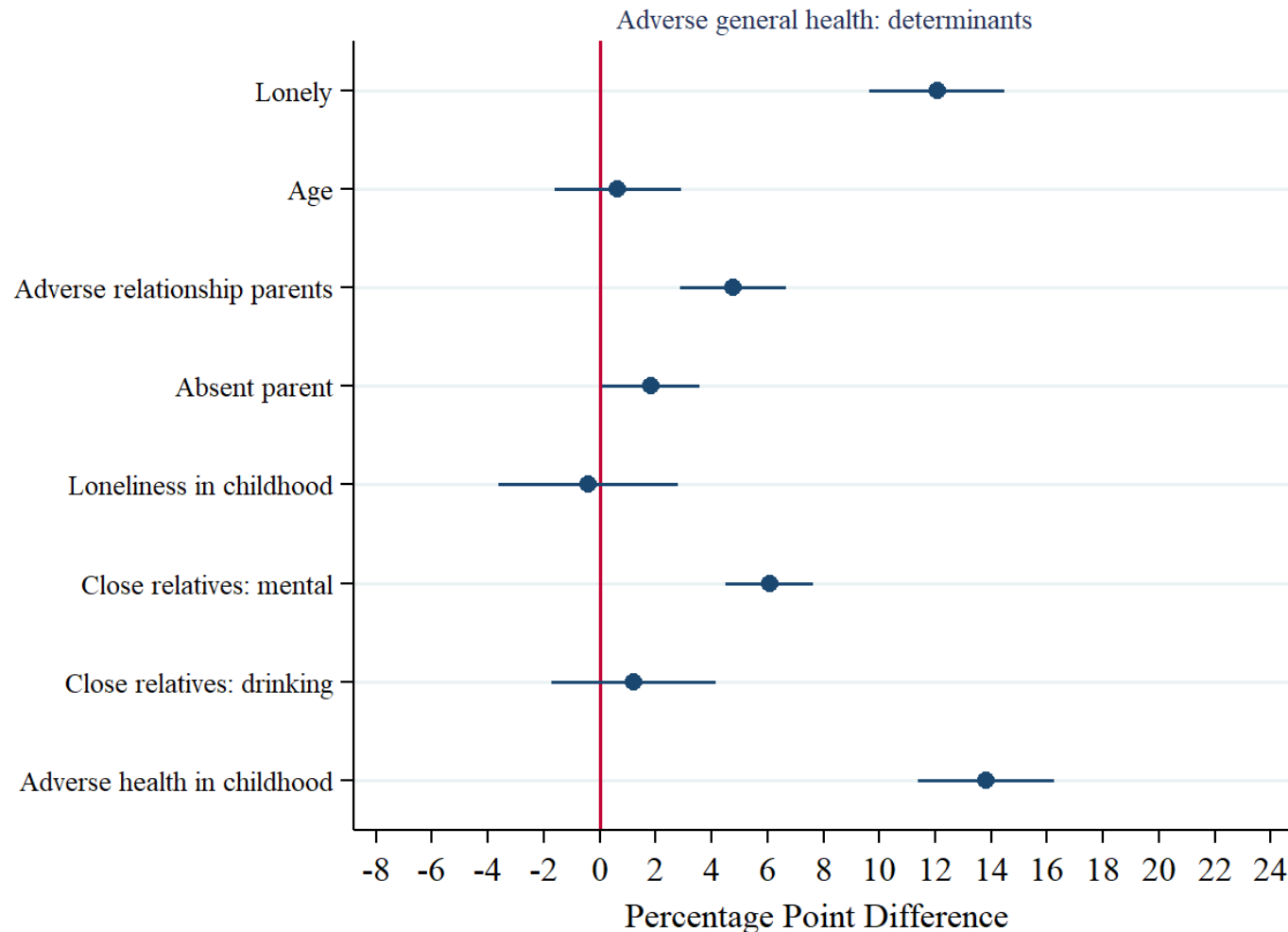
- Adverse early life conditions are **persistent**, although their “effect” is stronger at earlier life stages,
- **Interesting**: largest variation of the effect of adverse relationship with parents and close relatives with mental health issues for younger age groups.

Loneliness, childhood and depressive symptoms



- Individuals feeling lonely all or most of the time have approximately **20 percentage points** higher likelihood of experiencing depressive symptoms,
- The likelihood of depressive symptoms **declines with age**,
- Loneliness **reduces the effect of adverse childhood conditions** (still important),
- Positive association between the likelihood of depressive symptoms and **adverse childhood health**.

Loneliness, childhood and general health



- Individuals feeling lonely all or most of the time have approximately **12 percentage points** higher likelihood of reporting poor overall mental and physical conditions,
- Compared to depressive symptoms, the association with **adverse health in childhood** is significantly stronger,
- In addition, lonely individuals are significantly more likely to engage in unhealthy behaviors (**10% higher for smoking, 6% for physical inactivity**).

Policy implications and future research



Policy relevant insights

- Considerable incidence of loneliness and mental/emotional disorders among younger populations,
- The incidence of mental/emotional disorders decreases with age,
- Persistent and significant effect of adverse early-life conditions on loneliness and health,
- This is an important piece of evidence that calls for the attention of policymakers,
- There is a need for a better understanding of the drivers of loneliness beyond the common demographics and socio-economic characteristics + causal effects of loneliness on health.

Thank you



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Interested in knowing more?

- Visit our [page on loneliness](#) on EU Science HUB
- Get in touch: jrc-smac-loneliness@ec.europa.eu

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