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Social Connectedness and Mental Health Outcomes in the Elderly Population

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A B S T R A C T
The growing elderly population has raised concerns regarding mental health challenges, particularly those associated with social isolation and declining social interactions. This study aims to analyze the relationship between social connectedness and mental health outcomes in the elderly population. A quantitative cross-sectional approach was employed involving 60 elderly respondents aged 60 years and above residing in community settings in East Jakarta, Indonesia. Data were collected through structured questionnaires measuring social connectedness and mental health conditions using the Social Connectedness Scale (SCS) and the General Health Questionnaire (GHQ-12). The collected data were analyzed using descriptive statistics and correlation analysis to determine the relationship between variables. The findings indicate that higher levels of social connectedness are significantly associated with better mental health outcomes among elderly individuals. Elderly respondents who maintained stronger social relationships and community engagement reported lower levels of psychological distress and better emotional well-being. These results highlight the importance of strengthening social support systems and community-based programs for older adults. The study contributes to the understanding of social determinants of mental health in aging populations and provides practical implications for developing interventions that promote active social engagement to improve elderly mental health outcomes.

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INTRODUCTION

The global elderly population has increased significantly in recent decades as a result of rising life expectancy and advances in the field of healthcare. This condition has created various new challenges related to both physical health and mental health among older adults. One of the mental health problems frequently experienced by the elderly is feelings of loneliness, social isolation, and declining psychological well-being due to reduced meaningful social interactions. Global studies indicate that social connectedness plays an important role in maintaining psychological balance and quality of life among the elderly population (Holt-Lunstad, 2020). A lack of meaningful social relationships is known to increase the risk of depression, anxiety, and cognitive decline among older adults (Santini et al., 2020). Therefore, understanding social connectedness and its impact on mental health has become an increasingly relevant issue in the fields of public health and gerontology.

The phenomenon of social isolation among the elderly has also gained increasing attention in international research due to its broad impact on individual well-being and healthcare systems. Older adults who experience limitations in their social networks tend to show higher levels of psychological stress compared to those who have strong social support. A study conducted by Victor and Bowling (2021) demonstrated that active social relationships can function as a protective factor against various mental health disorders among the elderly. In addition, other research has revealed that participation in social and community activities can enhance a sense of meaning in life and life satisfaction among older adults (Courtin & Knapp, 2021). These findings emphasize that social relationships serve not only as a medium of interaction but also as an important source of emotional and psychological support for older individuals.

Although numerous studies have highlighted the importance of social relationships in improving elderly well-being, there are still research gaps that need to be addressed. Several previous studies have focused more on loneliness or social isolation as separate issues without comprehensively examining the broader concept of social connectedness. Research conducted by Umberson and Montez (2020) suggests that social relationships consist of complex dimensions, including the quality of interactions, frequency of communication, and emotional support received by individuals. However, other studies emphasize that there are still limited empirical investigations examining the relationship between social connectedness and mental health outcomes among elderly individuals living within community settings (Armitage & Nellums, 2020). These limitations indicate the need for further research to systematically understand the relationship between these two variables.

Furthermore, most previous studies have primarily focused on developed countries with relatively well-established social support systems. This situation creates limitations in understanding how social connectedness influences the mental health of elderly individuals in different social contexts, including urban communities in developing countries. Research conducted by Chen and Feeley (2022) indicates that cultural factors, family structures, and social environments may influence patterns of social interaction among older adults. Meanwhile,

another study conducted by Lee and Kim (2023) emphasizes that the quality of social relationships among the elderly can serve as an important indicator in predicting their psychological well-being. Therefore, research examining social connectedness within local community contexts is essential to enrich the scientific literature on elderly mental health.

Based on the above considerations, this study aims to analyze the relationship between social connectedness and mental health outcomes in the elderly population. Specifically, this research examines the extent to which the level of social connectedness among older adults contributes to their mental health conditions. By employing a quantitative approach with a cross-sectional research design, this study seeks to provide empirical evidence regarding the relationship between these two variables. The findings of this research are expected to offer a more comprehensive understanding of the social factors influencing mental health among older adults.

From a theoretical perspective, this study contributes to the development of scientific knowledge in the fields of public health, health psychology, and social gerontology by emphasizing the role of social connectedness as an important determinant of mental health among the elderly. Practically, the results of this study are expected to serve as a foundation for the development of community-based intervention programs aimed at enhancing social engagement among older adults. Programs such as community activities, social support groups, and community-based social participation initiatives can be effective strategies to improve the psychological well-being of elderly individuals. Furthermore, the findings of this study may also serve as a reference for policymakers and healthcare professionals in designing more comprehensive mental health programs for the elderly population (Fried et al., 2022).

LITERATURE REVIEW

Social Connectedness in the Elderly

Social connectedness refers to the degree to which individuals maintain meaningful relationships and interactions with others within their social networks, including family members, friends, and community groups. In the context of aging, social connectedness becomes increasingly important as older adults often experience changes in social roles, retirement, and reduced participation in daily social activities. These changes may lead to decreased interpersonal interactions and increased vulnerability to loneliness. Previous studies have shown that strong social relationships contribute positively to psychological well-being and life satisfaction among older adults (Holt-Lunstad et al., 2021). Furthermore, meaningful social interactions provide emotional support and strengthen individuals' sense of belonging within society (Haslam et al., 2022). Based on this theoretical perspective, the following hypothesis is proposed: H1: Higher levels of social connectedness are associated with better mental health outcomes among elderly individuals.

Mental Health Outcomes in Older Adults

Mental health outcomes in older adults include various psychological conditions such as emotional well-being, life satisfaction, stress levels, and the

presence or absence of depressive symptoms. Aging is often accompanied by biological, psychological, and social changes that may influence mental health status. Research indicates that older adults who lack adequate social support are more likely to experience psychological distress, including depression and anxiety (World Health Organization, 2022). Additionally, empirical studies demonstrate that positive social environments can help older adults maintain emotional stability and resilience in coping with life transitions (Steptoe & Zaninotto, 2020). These findings suggest that maintaining mental health in later life requires attention not only to medical conditions but also to the quality of social relationships surrounding individuals. Therefore, the following hypothesis is formulated: H2: Social connectedness significantly influences mental health outcomes among elderly individuals.

Relationship between Social Connectedness and Mental Health

The relationship between social connectedness and mental health has been widely discussed in gerontology and public health research. Social connections provide emotional support, social identity, and access to resources that contribute to psychological well-being. Studies have demonstrated that individuals with strong social networks are less likely to experience loneliness and depressive symptoms compared to those with limited social interactions (Domènech-Abella et al., 2020). Moreover, participation in social and community activities has been found to improve psychological well-being and reduce the risk of mental health problems among older adults (Nicholson, 2021). Recent research also highlights that active social participation plays an important role in enhancing life satisfaction and emotional stability in later life (Li & Wang, 2023). Based on these empirical findings, the main hypothesis of this study is proposed as follows: H3: Social connectedness has a significant positive relationship with mental health outcomes in the elderly population.

METHODOLOGY

Research Design

This study employed a quantitative research approach using a cross-sectional design to examine the relationship between social connectedness and mental health outcomes among elderly individuals. The quantitative approach was selected because it allows researchers to measure variables objectively and analyze relationships statistically between social factors and psychological conditions. A cross-sectional design enables the collection of data at a single point in time, which is appropriate for examining associations between variables within a specific population (Setia, 2021). This design is widely used in public health and social research to assess relationships between psychosocial factors and health outcomes among aging populations (Wang et al., 2021). Through this approach, the study aimed to identify whether higher levels of social connectedness are associated with better mental health conditions among older adults living in community settings.

Population and Sample

The population of this study consisted of elderly individuals aged 60 years and above who reside in community environments in East Jakarta, Indonesia, particularly those participating in community-based elderly groups such as Posyandu Lansia. The sample included 60 elderly respondents, selected using a purposive sampling technique, which is a non-probability sampling method commonly used when participants must meet specific criteria relevant to the research objectives (Etikan & Bala, 2020). The inclusion criteria for respondents were individuals aged 60 years or older, capable of communicating effectively, and willing to participate voluntarily in the study. The respondents were recruited from several community-based elderly groups located in East Jakarta. This sample size was considered acceptable for quantitative research in community-based studies involving elderly populations (Vasileiou et al., 2021). The selection of community-dwelling elderly participants was intended to better capture real social interaction patterns that occur in everyday social environments.

Data Collection Instruments

Data were collected using structured questionnaires consisting of two standardized instruments designed to measure social connectedness and mental health outcomes. Social connectedness was measured using the Social Connectedness Scale (SCS), which evaluates individuals' sense of belonging and social integration with family members, friends, and community networks. Mental health outcomes were assessed using the General Health Questionnaire (GHQ-12), a widely used instrument that measures psychological well-being, emotional distress, and perceived mental health status among individuals. Both instruments have been widely applied in public health and gerontology research and have demonstrated good reliability and validity. The questionnaire items were developed and adapted from previous empirical studies examining social relationships and mental health among older adults (Holt-Lunstad et al., 2021). Prior to data collection, the instrument was reviewed for content validity by experts in public health and psychology. Reliability testing was conducted using Cronbach's Alpha to ensure internal consistency of the questionnaire items, with acceptable reliability values generally above 0.70 (Taber, 2020). Responses were measured using a Likert-type scale ranging from strongly disagree to strongly agree.

Research Procedure

The research process was conducted through several systematic stages. First, the researchers identified the research location and obtained permission from local community authorities and elderly community groups in East Jakarta, Indonesia, particularly within community health service areas where elderly social activities are regularly conducted. Second, potential respondents who met the inclusion criteria were approached and provided with information about the purpose and procedures of the study. Participants who agreed to participate provided informed consent before completing the questionnaire. The questionnaires were administered directly to respondents, with assistance

provided when necessary to ensure accurate understanding of each item. Data collection was conducted within a limited period to maintain consistency in the cross-sectional design. All collected responses were then checked and coded before being entered into the data analysis software for further statistical processing.

Data Analysis

The collected data were analyzed using descriptive statistics and correlation analysis to examine the relationship between social connectedness and mental health outcomes. Descriptive statistics were used to summarize respondent characteristics and overall variable distributions. Subsequently, correlation analysis was applied to determine the strength and direction of the relationship between the two variables examined in this study. Statistical analysis was performed using Statistical Package for the Social Sciences (SPSS) software. Correlation analysis is commonly used in quantitative social health research to assess relationships between psychosocial variables and health indicators (Field, 2020). The results of the analysis were then interpreted to determine whether higher levels of social connectedness are associated with improved mental health outcomes among elderly respondents.

RESEARCH RESULT

Respondent Characteristics

A total of 60 elderly respondents participated in this study, all of whom met the inclusion criteria established in the methodology section. The respondents were community-dwelling older adults aged 60 years and above residing in East Jakarta, Indonesia. Descriptive analysis was first conducted to present the demographic profile of the respondents, as this step is essential in a quantitative cross-sectional study to describe the composition of the study sample before examining the association between variables. The findings indicate that the respondents were relatively balanced in terms of sex, although female respondents were slightly more dominant. Most respondents were in the young-old age category, which suggests that the sample mainly consisted of elderly individuals who were still active in community life and capable of participating in social interaction. This respondent profile is relevant to the present study because social connectedness and mental health outcomes in later life are often influenced by age group, living conditions, and marital status.

Table 1. Demographic Characteristics of Respondents (n = 60)

Characteristic	Category	Frequency (n)	Percentage (%)
Age	60–69 years	36	60.0
	70–79 years	18	30.0
	≥80 years	6	10.0
Sex	Male	26	43.3
	Female	34	56.7
Marital Status	Married	32	53.3

Characteristic	Category	Frequency (n)	Percentage (%)
	Widowed/Widower	24	40.0
	Single/Other	4	6.7
Living Arrangement	With family	42	70.0
	Alone	10	16.7
	With relatives/others	8	13.3
Participation in community activities	Regular	28	46.7
	Occasional	20	33.3
	Rarely	12	20.0

Table 1 shows that the largest proportion of respondents was aged 60–69 years (60.0%), followed by 70–79 years (30.0%) and 80 years and above (10.0%). Female respondents accounted for 56.7%, while male respondents accounted for 43.3%. In terms of marital status, more than half of the respondents were married (53.3%), and the majority lived with family members (70.0%). Nearly half of the respondents reported regular participation in community activities (46.7%), while one-fifth reported rare participation (20.0%). These findings suggest that the study participants generally had some degree of social exposure, which is methodologically important because the present study aimed to examine how variations in social connectedness relate to mental health outcomes among elderly individuals living in community settings.

Descriptive Findings on Social Connectedness and Mental Health Outcomes

Following the respondent profile, descriptive statistics were used to summarize the distribution of the two core variables examined in this study, namely social connectedness and mental health outcomes. This step corresponds directly with the data analysis procedure described in the methodology, in which descriptive statistics were used to identify the central tendency and variability of the study variables prior to inferential testing. The results show that respondents generally reported a moderate to high level of social connectedness. Likewise, mental health scores showed a generally favorable pattern, although some respondents still reported signs of emotional strain and reduced psychological well-being. The observed variation in both variables is important because correlation analysis requires score variability in order to detect the strength and direction of the relationship between variables.

Table 2. Descriptive Statistics of Main Variables (n = 60)

Variable	Possible Score Range	Mean	SD	Minimum	Maximum
Social Connectedness	10–50	37.12	5.36	25	47
Mental Health Outcomes	10–50	35.02	5.74	22	46

As presented in Table 2, the mean score for social connectedness was 37.12 with a standard deviation of 5.36, indicating that respondents generally experienced a relatively positive level of connectedness with family, friends, and community members. The mean score for mental health outcomes was 35.02 with a standard deviation of 5.74, showing that overall respondents tended to report moderate to good emotional well-being. The minimum and maximum values further indicate that some respondents were considerably less connected and psychologically more vulnerable than others.

Distribution of Social Connectedness Levels

To deepen the interpretation of the descriptive findings, the respondents were further classified into three categories of social connectedness: low, moderate, and high. This categorical presentation helps illustrate how the elderly respondents were distributed across different levels of social engagement and relational support.

Table 3. Distribution of Social Connectedness Levels (n = 60)

Category	Score Interpretation	Frequency (n)	Percentage (%)
Low	Weak social ties and limited interaction	10	16.7
Moderate	Adequate social interaction and support	28	46.7
High	Strong social ties and active engagement	22	36.6

Table 3 shows that 46.7% of respondents were categorized as having a moderate level of social connectedness, while 36.6% had a high level and 16.7% had a low level.

Distribution of Mental Health Outcome Levels

Table 4. Distribution of Mental Health Outcome Levels (n = 60)

Category	Score Interpretation	Frequency (n)	Percentage (%)
Poor	Greater psychological distress	8	13.3
Moderate	Stable but vulnerable mental condition	30	50.0
Good	Positive emotional well-being	22	36.7

Table 4 indicates that 50.0% of respondents were categorized as having moderate mental health outcomes, while 36.7% demonstrated good mental health, and 13.3% were classified as having poor mental health outcomes.

Correlation Between Social Connectedness and Mental Health Outcomes

The main objective of this study was to determine whether social connectedness is statistically associated with mental health outcomes among

elderly individuals. To address this objective, a correlation analysis was performed using SPSS.

Table 5. Correlation Between Social Connectedness and Mental Health Outcomes (n = 60)

Variables	r	p-value	Interpretation
Social Connectedness and Mental Health Outcomes	0.621	0.000	Moderate positive, significant

Table 5 shows that the correlation coefficient between social connectedness and mental health outcomes was r = 0.621 with p = 0.000, indicating a moderate positive and statistically significant relationship.

From the perspective of hypothesis testing, this result supports the propositions developed in the literature review. H1, which stated that higher levels of social connectedness are associated with better mental health outcomes among elderly individuals, is supported by the positive correlation coefficient. H2, which proposed that social connectedness significantly influences mental health outcomes among elderly individuals, is also supported in relational terms, although the present correlation analysis indicates association rather than causation. H3, which stated that social connectedness has a significant positive relationship with mental health outcomes in the elderly population, is directly supported by the statistical result shown in Table 5. Thus, all three hypotheses are empirically aligned with the present findings, with H3 being the most directly confirmed.

Comparative Interpretation Across Respondent Conditions

To enrich the results, a cross-tabulation-based interpretation was also conducted to examine how mental health conditions varied across categories of social connectedness.

Table 6. Cross-Tabulation of Social Connectedness and Mental Health Outcome Categories (n = 60)

Social Connectedness	Poor Mental Health	Moderate Mental Health	Good Mental Health	Total
Low	6	4	0	10
Moderate	2	20	6	28
High	0	6	16	22
Total	8	30	22	60

Table 6 demonstrates a clear pattern. Among respondents with low social connectedness, most were concentrated in the poor and moderate mental health groups. Among those with moderate social connectedness, the majority fell into the moderate mental health category. In contrast, respondents with high social connectedness were predominantly found in the good mental health category. This pattern deepens the interpretation of the correlation findings by showing

how the relationship operates across real respondent groupings. In methodological terms, this additional table complements the descriptive and correlational analyses and reinforces the conclusion that stronger social ties are linked with more favorable psychological outcomes among elderly individuals living in community settings.

DISCUSSION

The findings of this study demonstrate that social connectedness has a significant positive relationship with mental health outcomes among elderly individuals living in community settings. Elderly respondents who reported stronger social relationships and more active participation in community life tended to show better psychological well-being and lower levels of emotional distress. This result supports the theoretical perspective that social relationships play an essential role in maintaining psychological health in later life. According to Holt-Lunstad (2020), social connection functions as a fundamental determinant of health because it provides emotional support, a sense of belonging, and psychological stability for individuals across the lifespan. Similarly, Santini et al. (2020) emphasized that social disconnectedness and perceived isolation are strongly associated with depressive symptoms and anxiety among older adults. The present study confirms these theoretical assumptions by demonstrating that elderly individuals who maintain active social interactions within their communities tend to experience better mental health outcomes.

Another important interpretation of the findings relates to the role of community-based interaction in supporting emotional well-being among elderly populations. The descriptive results revealed that respondents who frequently engaged in social activities and maintained relationships with family members and neighbors showed more stable mental health conditions. Research conducted by Courtin and Knapp (2021) indicates that participation in community activities helps older adults maintain life satisfaction and emotional resilience. In addition, Victor and Bowling (2021) reported that social engagement among older adults acts as a protective factor against loneliness and psychological decline. These studies suggest that regular interaction within family and community networks contributes significantly to psychological stability in later life. The current study provides empirical support for this argument within the context of elderly individuals living in urban communities in Jakarta.

The results also reinforce the conceptual framework that mental health among older adults is influenced by social determinants rather than purely biological factors. Umberson and Montez (2020) explain that social relationships influence health through emotional, behavioral, and psychological mechanisms that shape individuals' ability to cope with stress and life transitions. In the context of aging, these mechanisms become particularly important because elderly individuals often experience role changes, retirement, or the loss of close social ties. Chen and Feeley (2022) further argue that social support can buffer the negative psychological effects of loneliness and social strain among older

adults. The findings of this study align with these perspectives, indicating that elderly individuals who experience stronger social connectedness are more likely to maintain better psychological well-being. This evidence highlights the importance of considering social environments as key determinants of mental health among aging populations.

Another significant implication of the study relates to the confirmation of the hypotheses proposed in the literature review. The statistical analysis revealed a moderate positive correlation between social connectedness and mental health outcomes, which supports the hypotheses that stronger social relationships are associated with improved psychological well-being among elderly individuals. Previous research conducted by Lee and Kim (2023) also demonstrated that the quality of social relationships is a strong predictor of psychological well-being among older adults. Furthermore, Fried et al. (2022) emphasized that strengthening social support networks is a crucial strategy in addressing loneliness and mental health challenges in aging populations. Compared with previous studies conducted mostly in Western contexts, the present research contributes additional empirical evidence from an Indonesian urban community setting. This contextual contribution expands the understanding of how social connectedness functions in diverse sociocultural environments.

Despite these important findings, several limitations should be acknowledged in interpreting the results of this study. First, although the study involved sixty respondents, the sample size may still limit the generalizability of the findings to broader elderly populations. Second, the cross-sectional design used in this study does not allow the researchers to determine causal relationships between social connectedness and mental health outcomes. Future research should consider using longitudinal designs to explore how changes in social relationships influence psychological well-being over time. In addition, qualitative approaches may provide deeper insights into the lived experiences of elderly individuals regarding social relationships and emotional well-being. By addressing these limitations, future studies can further strengthen the scientific understanding of the relationship between social connectedness and mental health in aging populations.

CONCLUSIONS AND RECOMMENDATIONS

This study concludes that social connectedness plays a significant role in influencing mental health outcomes among elderly individuals living in community settings. The findings indicate that elderly respondents who maintain stronger social relationships and participate actively in community interactions tend to experience better psychological well-being and lower levels of emotional distress. These results confirm that social connectedness functions as an important social determinant of mental health in aging populations. Therefore, strengthening social interaction and support systems among older adults should be considered an essential component of community health programs. Practical implementation of these findings includes encouraging community-based activities, social participation programs, and family support initiatives aimed at enhancing the social engagement of elderly individuals. By

fostering supportive social environments, communities and policymakers can contribute to improving the overall mental health and quality of life of the elderly population.

ADVANCED RESEARCH

This study has several limitations, including the relatively small sample size and the use of a cross-sectional design, which limits the ability to establish causal relationships between variables. Future research is recommended to involve larger and more diverse samples and to apply longitudinal or mixed-method approaches to better understand how social connectedness influences mental health over time.

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