

their social needs. Follow-up analyses will determine factors explaining for whom more contact with grandchildren might be beneficial.

P1905 Trends in Japanese research on isolation of elderly living alone

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Background: The proportion of people aged 65 and over in Japan reached a record high of 29.4% in 2025. Among the elderly, those living alone accounted for 20.5% in 2020 and have been increasing since. It is known that elderly individuals living alone experience weakened social connections, making them more prone to loneliness and isolation, and increasing their risk of illnesses such as dementia. Addressing the isolation of elderly individuals living alone is an urgent issue requiring society-wide efforts. The purpose of this study is to provide an overview of domestic Japanese research focusing on the isolation of elderly individuals living alone, thereby clarifying the current situation to examine countermeasures and support for loneliness and isolation among such individuals residing in communities in Japan.

Study Setup (Methods): To conduct the literature review, a literature search was performed using Cinii Articles and Ichushi web. Search criteria included papers published between 2014 and 2024 containing the terms "elderly," "living alone," or "single-person household," and "isolation" in the title. After screening, eligibility criteria were applied, resulting in the selection of 17 papers.

Results: Cross-sectional studies analyzed the factors contributing to isolation and categorized its types, while longitudinal studies examined the factors leading to the transition into isolation. Studies specifically targeting men accounted for approximately 30% of the total. Only one intervention study was actually conducted to prevent social isolation.

Discussion: Moving forward, it will be necessary to explore isolation prevention measures targeting elderly individuals living alone, particularly men.

P1913 Does neighbourhood cohesion protect against chronic loneliness for all older adults? A longitudinal analysis of data from UK Household Longitudinal Study

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Background: Risk factors for loneliness operate at micro, meso and macro level. Evidence about loneliness risk factors is dominated by individual level data. Evidence about meso level factors is sparse and research rarely differentiates different loneliness trajectories. We address these gaps by investigating the role of neighbourhood cohesion as a 'protective' factor against chronic loneliness and focus upon three groups of older adults under-represented in research: minority ethnic people, those who identify as lesbian, gay and bisexual (LGB) and those living with a long-standing disability.

Study Setup (Methods): We used data from 10,916 community-dwelling adults aged 50 and over who participated in four waves of the UK Household Longitudinal Study. Loneliness was measured using the three-item UCLA scale and neighbourhood cohesion by the Buckner scale. We define four loneliness trajectories: not lonely, transient (lonely once), fluctuating (two or three occasions of loneliness) and chronic (lonely at every wave).

Results: Neighbourhood cohesion was highest for respondents who identified as Bangladeshi, Pakistani and white Irish and lowest for participants with mixed ethnic backgrounds. Multinomial regression models indicate that following adjustment for key socio-demographic factors and mental

wellbeing, better neighbourhood cohesion was associated with less transient, fluctuating and chronic loneliness for the overall sample. For those ageing with disability neighbourhood cohesion was protective for fluctuating and chronic loneliness but no evidence of this was observed for ethnic minority populations or those who identified as LGB.

Discussion: These findings highlight how neighbourhood level factors are experienced differentially across different groups of older adults.

P1915 Impacts of social support and social isolation on depression and anxiety in older adults: a systematic review

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Background: Depression and anxiety in older adults are strongly reduced by social support. Age-related losses and shrinking networks increase vulnerability to isolation and loneliness, raising psychological distress. Understanding these relationships is key for prevention in aging populations.

Study Setup (Methods): A systematic search was conducted in PubMed and LILACS/BVS using MeSH terms Depression, Anxiety, Social Support and Aged, combined with boolean operator AND. Reviews, meta-analyses and studies older than five years were excluded. Eligible research examined older adults and the association between social support, isolation or loneliness and depressive or anxiety symptoms. Two reviewers independently screened studies and extracted data.

Results: Across 16 studies, low social support and social isolation were consistently associated with higher depression rates, with smaller but relevant links to anxiety. Depression prevalence in low-support groups ranged from 5% to 39%. Longitudinal and cross-sectional analyses showed that isolation increased depression risk, while social participation and family support were protective. These findings consistently underscore the protective role of social connectedness.

Discussion: Findings suggest that social disconnection is a central factor in late-life depression, with loneliness as the main mechanism. Both subjective and objective deficits heighten psychological distress, whereas supportive networks and active engagement promote resilience. These results stress the need for primary care strategies that address social needs and strengthen supportive relationships to improve mental health outcomes.

P1917 Building a community store platform and promoting community development in depopulated areas

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Background: Japan currently has the world's highest aging rate at **29.4%** (2024). The surveyed region, Village A in Okinawa, is a designated "Blue Zone" but faces an extremely high elderly rate of **41.6%** and scarce formal social resources. The traditional **Kyodo Baitan** (community store) serves as a vital life base, and its loss poses a risk of creating social isolation among older adults. The study aimed to clarify the **strengths, challenges, and functions** of the community store in the depopulated A Settlement.

Study Setup (Methods): A qualitative, inductive analysis was performed based on interviews with **six key local leaders** (including the store owner, district chief, and elderly association president) in the A Settlement, focusing on "regional strengths and the store's functions." Ethical approval was obtained from the affiliated ethics committee.

Results: Participants were aged 40–74. Key strengths identified were smooth decision-making by autonomous organizations and strong community cohesion. Challenges included population