

# **Pay attention to your social capital! It determines your health: an analysis based on SHARE survey**

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## **Abstract**

Social capital is considered one of the indicators that influence individual and collective health. Nevertheless, there is no unanimity on a concrete definition, and there is a lack of recent evidence for European countries about its definition and its causal effect on health. Thus, we aim to explore how social capital (bonding and bridging) is associated with self-assessed health among elder Europeans. We used the 4th, 6th, and 8th waves of the Survey of Health, Ageing and Retirement in Europe (SHARE) and included 13 countries. We estimated a scale for each type of social capital with the Principal Component Analysis and conducted several logistic regressions and tests to control for reverse causality controlling for personal and socioeconomic characteristics.

We found that high levels of bridging social capital reduced the odds of reporting poor health (OR: 0.793; 95%CI [0.771-0.816]) more than bonding social capital (OR: 0.907; 95%CI [0.880-0.934]), and these results are consistent across all estimated models. Additionally, we found reverse causality between self-assessed health and bridging social capital, suggesting that older adults' health is not only benefited from the socialization process inherent to these activities, but also from the physical and mental capacity of participating in such activities. There is remarkable consistency in direction of the relevant role of social capital (both bonding and bridging) in determining health across European older adults. Our analysis can be considered in order to disentangle policy intervention measures to increase social activities and their quality to promote older adults' health.