Social Connections and Mental Health among Women Living with HIV

Healthy relationships, or social connections, are fundamental aspects of well-being. Research on social connections includes a range of constructs that encompass both perceived and actual connections to others. Loneliness, which focuses on perceptions of inadequate social connection, and social isolation, which involves a lack of, or infrequent, social ties, have been associated with substance misuse and depression. Loneliness and social isolation are associated but distinct constructs, with independent and sometimes synergistic effects on different aspects of health. Stronger social connections have been linked to better quality of life and lower mortality among women living with HIV (WLHIV). In turn, WLHIV may be at increased risk for social isolation and loneliness. Guided by theoretical frameworks of social connection and drawing on data from a highly characterized national HIV cohort study (MACS/WIHS Combined Cohort Study), we discuss background and aims of the Social Connections Study, a multilevel examination of predictors and health outcomes associated with loneliness and social isolation. Preliminary analysis among 1,737 WLHIV demonstrates modest correlations between loneliness (UCLA 3-item loneliness scale) and living alone ($r$: 0.11, $p<0.001$), and moderate correlations between loneliness and higher depression symptoms (CES-D; $r$: 0.54, $p<0.001$) and to a lesser degree, self-reported substance misuse ($r$'s range from 0.03-0.12, $p<0.001$). These analyses provide the first steps to advance a mechanistic model of relationships between social connections and mental health outcomes in WLHIV that can advance prevention science in this important area.