

## PHYSICAL FUNCTION AND SOCIAL ACTION: IMPLICATIONS FOR SOCIAL CONNECTEDNESS

### ABSTRACT

Although older adults have a particular need for social ties, they are more at risk of being socially isolated. Age-related declines in social connectedness are typically regarded as a function either of older adults changing preferences and values or of their reluctant, but voluntary, abandonment of social roles. Both explanations assume that older adults are physically and mentally capable of executing the social acts that allow one to sustain social relationships. I draw on medical sociology, social gerontology, sociology of the body, and health studies research – which notes considerable health declines in later life – to cast doubt on this assumption. I then use three nationally representative datasets to reveal numerous effects of health declines on older adults' social connectedness. Functional impairments lead to loss of non-kin ties, reduced reciprocation in social exchanges, less brokering between contacts, decreased knowledge of network structure, and lack of involvement in voluntary associations. The body can thus be viewed as a tool-kit by which individuals can accomplish social connectedness, secure advantageous positions in networks, and reap the benefits of social ties. I discuss the relevance of this argument for research on social exchange, social support and social capital, social networks, and political sociology.

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