

Effects of Intergenerational Social Mobility on General Health, Oral Health and Physical Function among Older Adults in England

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Abstract : Background: Socioeconomic position (SEP) influences adult health. People who experienced material disadvantages in childhood or adulthood tend to have higher adult disease levels than their peers from more advantaged backgrounds. Even so, life is a dynamic process and contains a series of transitions that could lead people through different socioeconomic paths. Research on social mobility takes this into account by adopting a trajectory approach, thereby providing a long-term view of the effect of SEP on health. Aim: The aim of this research examines the effects of intergenerational social mobility on adult general health, oral health and functioning in a population aged 50 and over in England. Methods: This study is based on the secondary analysis of data from the English Longitudinal Study of Ageing (ELSA). Using cross-sectional data, nine social trajectories were created based on parental and adult occupational socio-economic position. Regression models were used to estimate the associations between social trajectories and the following outcomes: adult self-rated health, self-rated oral health, oral health related quality of life, total tooth loss and grip strength; while controlling for socio-economic background and health related behaviours. Results: Associations with adult SEP were generally stronger than with childhood SEP, suggesting a stronger influence of proximal rather than distal SEP on health and oral health. Compared to the stable high group, being in the low SEP groups in childhood and adulthood was associated with poorer health and oral health for all examined outcome measures. For adult self-rated health and edentulousness, graded associations with social mobility trajectories were observed. Conclusion: Intergenerational social mobility was associated with self-rated health and total tooth loss. Compared to only those who remained in a low SEP group over time reported worse self-rated oral health and oral health related quality of life, and had lower grip strength measurements. Potential limitations in relation to data quality will be discussed.

Keywords : social determinants of oral health, social mobility, socioeconomic position and oral health, older adults oral health

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