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**Edited by
Annamaria Di Fabio, Edoardo Lozza, Giuseppe Scaratti**



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Abstract 3535

EXPLORING PREDICTORS OF SUBJECTIVE WELL-BEING TRAJECTORIES AMONG OLDER EUROPEAN ADULTS

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Introduction. Population ageing, observed in numerous developed countries, has highlighted an important aspect – the social security and healthcare systems now have to be responsible not only for a longer life, but also promote well-being during these extended life years. Though well-being, life satisfaction and subjective quality of life have been extensively researched, longitudinal approach allowing for a more reliable identification of well-being determinants is still lacking.

Purpose of this study is to identify well-being trajectories among older European adults and to explore biopsychosocial predictors of said trajectories.

Method. The data for this analysis was drawn from the Survey of Health, Ageing and Retirement in Europe (SHARE). A total of 15 880 respondents aged 65 and older (mean age – 72.7, 57.6% – female) that participated in 3 data collections (wave 7, 8 and 9) were included. The well-being of respondents was assessed using two measures: 1) life satisfaction measured using a scale ranging from 0 (not at all satisfied) to 10 (completely satisfied); 2) subjective quality of life was measured with a twelve-item Control, autonomy, self-realisation and pleasure scale (CASP-12).

Results of growth mixture modelling approach showed that similar trajectory patterns were identified for both well-being measures, however proportions were different within the classes, with CASP-12 identifying more respondents in a stable-low trajectory. Preliminary multinomial logistic regression analysis indicated that presence of frailty symptoms and limitations with activities of daily living were associated with less favourable well-being trajectories, while having a partner and social participation predicted more favourable outcomes. Personality traits and cognitive functioning were significant predictors of well-being trajectories, but reported use of anxiolytic and antidepressant medication was not significant.

Conclusions. Obtained results not only help identify risk groups, but also can provide guidelines for developing interventions facilitating well-being in later life.