

Studies consistently show that subjective life satisfaction and quality of life are one of the most valued aspects of wellbeing irrespective of social status, background or nationality. No wonder then that in the last few decades there has been much research focused on identifying economic, social and health factors related to life satisfaction and quality of life. There is a growing body of evidence showing that having stable social relationships is not less important for wellbeing than healthy diet. Indeed, studies show that social integration maintained through relationships with close ones, such as friends and family members as well as generally across community, affect health-related life satisfaction, mental health, mortality and, to a great extent, quality of life, especially among elderly.

Nevertheless, studies also show a worrying trend: with age, people not only tend to narrow their social networks with older individuals exhibiting less diverse social relationships but also suggest that, compared to younger individuals, elderly are much prone to social isolation. But is this vulnerability of social isolation exhibited in late adulthood a manifestation of modernisation and high-paced life of consumer society in industrialized societies? Can we also expect narrowing of social networks among older individuals in less developed and more traditional societies? How do healthy social relationships and the resulting integration affect life satisfaction and quality of life in small-scale, traditional societies and large-scale highly industrialized societies? Are there any differences in the extent to which social relationships among people of different ages differ in different societies?

To answer these questions, I will explore how changes in social relationships differ among four different communities living in Northern Tanzania exhibiting different social structure as well as presenting different level of sedentarism and integration to market economy: (1) mobile and egalitarian hunter-gatherers Hadza, (2) semi-mobile and hierarchical pastoralists Datoga, (3) settled agriculturalists Iraqw and (4) fully integrated to market economy urban Arusha people. In addition, this study will examine how these inter-community differences in the structure of social relationships affect quality of life. To measure the strength of social relationships of the study participants proximity devices will be used to record the amount of time they spent with each other while quality of life will be measured using self-reported questionnaires. For example, I will try to find out whether older people living in hunter-gatherer societies, who consistently report to be happier compared to elderly in developed societies, have also more social contacts and face-to-face social relationships compared to developed societies.

In a nutshell, this has the potential to broaden our knowledge regarding how the evolution of social systems and modernisation affects - by changing the frequency of social contacts - the quality of life and well-being of people of different ages. By investigating the interplay between social structure and perception of quality of life as well as by showing the extent to which ethnicity influences social integration and life satisfaction, this multidisciplinary study will have considerable implications on social, ethnographic and health sciences.