Social Support Network Analysis of the Elderly: Gender Differences
Dr. Shradha Mathur
Postdoctoral Research Associate, Jamia Millia Islamia (A Central University), Department of Social Work, New Delhi, on joint Research Project with the School of Public Health, University of Minnesota (Twin Cities Campus), Minneapolis, Minnesota, USA

Abstract
Ageing is likely to introduce changes in the nature, direction and trends of interactions involving social support from significant others, both during and after retirement. Retirement from active employment is a period of adjustment for an elderly and is associated with transitions in social support networks. The present study is an empirical attempt to explore and understand the nature, direction and trends of social support among the elderly in their retirement years (within five years after retirement). The sample for the study constituted 40 retired elderly (males =20 and females=20) identified using snowball sampling, from Jaipur City of Rajasthan, India. The identified sample was administered short form of Social Support Questionnaire (Sarason et al 1987) and only the first part of the questionnaire assessing the number of persons available for help (SSQN) was employed for the purpose of analysis and interpretation of social support networks. Findings reveal differences in nature, direction and trends of social support networks of retired elderly males and females. After retirement, spousal support dominates the social support networks of the elderly. Elderly men perceive same gender siblings and friends as important source of social support whereas elderly women consider children and immediate family as prime support system after spouse. Social support networks of spouseless elderly women involve children, siblings and friends. The study also throws light on non conventional forms of social support (such as divinity, religion, yoga, meditation and leisure activities) which are perceived as substitutions against the conventional human support in the retired years.

Key Words: Elderly, social support, dependence, conventional and non-conventional social support, family.

I. Introduction and Review: With the increase in age, expectations from self and others undergo dramatic shift. In sync with the observation is the well acclaimed Carstensen’s Socio Emotional Selectivity Theory, suggesting that perception of time left in our lives decides the nature of goals we choose to pursue: knowledge acquisition or emotional goals.

Ageing affects men and women differently. Gender differences pertaining to financial stress, sense of control and psychological distress have been probed, revealing a more unfortunate picture in case of older women, who were reported to remain greatly exposed to financial stress, eventually leading to distress (Keith, 1993). In a sample of adults, support and strain with spouse and support from family has been found capable of predicting well-being, while strain from family has been
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Outwardly more predictive of well-being in case of women (Walen & Lachman, 2000). The importance of quality of environment is empirically shown to have contributed to life satisfaction in the elderly (Fernandez-Ballesteros, 2001). Researchers (Cohen and Syme, 1985; Cohen and Wills, 1985; Helgeson, 2003) have distinguished between and deciphered the construct of structural and functional aspects of social support. Hence, it is critically relevant to investigate the components in the social environment, i.e. the size of social network and perceived quality of relationships with others. However, as quoted by Ueno & Adams (2006), “Network size is the most basic characteristic of friendship network structure, but we still do not have a clear sense of what the typical size of networks is, or of how it varies across adult age…”.

Influence of social support on the cognitive functioning of elders revealed higher scores were associated with well developed social support, marital status and functional value of networks as manifested in the form of perceived support from friends. However, disparity between elderly males and female with respect to the real and felt positive impact of social support has been indicated. An increase in the age of women was found linked with less spousal support (Schwarzer & Gutiérrez-Doña, 2005). In addition, researchers found that female elderly were more likely to have weaker cognition (Yeh & Liu, 2003; Lei et al, 2011). Further, widows report greater death anxiety compared to spouseless male counterparts (Ghufran & Ansari, 2008). These studies reveal the vulnerable and sensitive status of elderly women signaling deteriorated cognitive competence, weaker social support and diminished psychological efficiency.

The importance of neighbors in old age has been explored. Findings indicate a negative relationship between perceived support from neighbors and limitations in functional ability (Shaw, 2005). In a similar study, (Cornwell et al 2008) indicated that age is negatively related to the size of social network while it is positively associated with interaction with neighbors, participation in religious activities and other forms of social volunteering activities. Another study found that elderly women perceive divinity/God as more pronounced source of social support compared to male counterparts while men signify favorable inclinations towards their sons compared to daughters in their overall perception of social support in old age (Narang et al 2013).

In a review analysis, researchers indicated the detrimental effects of weak social support on the physical and psychological health of individuals, thereby highlighting the role of social support networks in promoting more effective coping mechanisms (Ozbay et al 2007). Depression in widowed elderly has been empirically linked with the construct of loneliness (Golden et al, 2009). It is shown that balanced attitude towards social support (i.e. family and friends) with work and an inclination towards religion is observed in happy people (Pugno & Verme, 2012). In another study conducted on the elderly, social support was found to act as mediator, and its absence coupled with health issues in the ageing population were observed to be related with psychological distress (Boen et al 2012). In a recent study conducted on Indian sample, social support networks were found associated with and predicting positive subjective experiences in the elderly (Mathur, 2014). Hence, is critically relevant to explore and understand social support networks in older population with reference to the Indian context in an attempt to obtain intensive insights into their social interactions, emotional dependence and subjective well-being.

II. Objective of the Study: To understand and compare the nature, direction and trends of social support among retired elderly males and females using social support network analysis.

I. Method:
(1) Sample: Elderly respondents in the study were retired from service sector within five years after retirement and residing in the Jaipur City of Rajasthan (India), identified using snowball sampling.
The minimum and maximum age of the respondents was 60 and 65 years respectively. Majority of the respondents were married and living with spouse and children. The sample characteristics are presented in Table 1.

Table 1: Demographic profile of the retired elderly respondents (N=40)

<table>
<thead>
<tr>
<th>Demographic Characteristics</th>
<th>Category: Retired Elderly</th>
<th>Frequency Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Males</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Females</td>
<td>20</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>40</td>
</tr>
<tr>
<td>Educational Level</td>
<td>Matric</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Graduate</td>
<td>18</td>
</tr>
<tr>
<td></td>
<td>Post Graduate &amp; above</td>
<td>19</td>
</tr>
<tr>
<td></td>
<td>Professional degree/diploma</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>40</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Married</td>
<td>37</td>
</tr>
<tr>
<td></td>
<td>Divorced/separated</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Widow/widower</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Unmarried</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>40</td>
</tr>
<tr>
<td>Living Arrangement</td>
<td>Living with family</td>
<td>23</td>
</tr>
<tr>
<td></td>
<td>Living with spouse</td>
<td>14</td>
</tr>
<tr>
<td></td>
<td>Living with children</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Living with relatives</td>
<td>0</td>
</tr>
<tr>
<td></td>
<td>Living alone</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>40</td>
</tr>
<tr>
<td>Family Type</td>
<td>Nuclear Family</td>
<td>27</td>
</tr>
<tr>
<td></td>
<td>Joint Family</td>
<td>13</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>40</td>
</tr>
</tbody>
</table>

(2) **Instrument:** Social Support Questionnaire- Short Form (Sarason et al, 1987): It has 6 items with two parts each: the first part assesses the number of persons available which the individual feels he/she can turn to in time of need (SSQN) and the second part of each item measures the individual’s degree of satisfaction (SSQS). For the purpose of the present study, only the first part assessing the number of persons available for help (SSQN) is used for the analysis of social support network. Both the test-retest reliability and the internal reliability are highly satisfactory. The internal reliabilities for both the number and satisfaction range between .90 to .93.

During the pilot study, tool was translated into Hindi by three post graduate students and later by a Professor of Hindi, on the basis of which a final version of the Hindi scales were obtained. 18 respondents (out of which 8 respondents were 55 years and above and 10 respondents were retired from service sector), were administered the English and later the Hindi version of the questionnaire booklet and scores of the two sets were compared using Pearson correlation to obtain the coefficient of correlation. The obtained correlation between the versions SSQN (English) & SSQN (Hindi) was .984** and both the language versions of the questionnaires were found equally suitable for further administration on the final sample of respondents.
Procedure: Inclusion and Exclusion criteria: Only those respondents who were once employed in the service sector and educated matric or above, receiving pension and residing in residential or community set up were included in the study. Elderly who were disabled, institutionalized and exhibiting signs of psychopathology and earning less than Rs. 15,000 monthly were excluded. In addition, elderly re-employed or working after retirement were not considered for the study.

The frequency of dependence on each significant other was entered adjacent within bracket by summing up the number of times respondents depend on a specific individual under diverse situations of help. Support derived from significant others as well as non conventional forms of social support along with the frequency of dependence are depicted in tabular forms in table 2 and 3.

II. Results:

<table>
<thead>
<tr>
<th>Retirement Status</th>
<th>Gender</th>
<th>Living Arrangement &amp; Marital Status</th>
<th>Cumulative dependence on each significant other in social support networks (in decreasing order)</th>
</tr>
</thead>
</table>
| Retired Males (N=20) | Married and living with spouse/family in both nuclear and joint family arrangement | Significant others:  
  Spouse (71)  
  Friends (27)  
  Brother (25)  
  Son (17)  
  Daughter (15)  
  Relatives (14)  
  Nobody (10)  
  Self (4)  
  Son-in-law (1)  
  Teacher (1)  
  Non Conventional Social Support:  
  God (2)  
  Yoga/Meditation (2) |

<table>
<thead>
<tr>
<th>Retirement Status</th>
<th>Gender</th>
<th>Living Arrangement &amp; Marital Status</th>
<th>Cumulative dependence on each significant other in social support networks (in decreasing order)</th>
</tr>
</thead>
</table>
| Retired Females N=17 | Married and living with spouse/family/in both joint and nuclear living arrangement | Significant others:  
  Spouse (90)  
  Daughter (31)  
  Son (30)  
  Friends (14)  
  Sister (10)  
  Nobody (10)  
  Daughter-in-law (7)  
  Relative (7)  
  Brother (4)  
  Neighbors (3) |
III. **Discussion:** The present study aimed at exploring and understanding social support networks of the elderly in their retired years. Retired elderly in the two gender groups signify critically important findings. Table 2 and 3 indicates the social support networks of elderly males and females in their retired years with reference to the nature, direction and trends of social support as directed to particular significant others and unconventional sources.

Insights from the cumulative dependence scores of retired elderly men reveal highest dependence on spouse (Table 2). This was followed by dependence on friends/same age peer groups and same sex siblings, with whom they have grown old with time. The dependence on son and daughter were balanced in support networks. This observation challenges the stereotypical and patriarchal fabric of Indian culture and psycho-social realities which have been known to favor and promote the dominance and power of men compared to women. Unfortunately, under several situations where emotional, physical and informational support is required from significant others, elderly males have nobody to depend and seek assistance.

The support networks of elderly retired females (Table 3) reveal more diversity in their interactions and size of networks. Spouse support dominates the social networks of retired elderly women, much in frequency, intensity and depth compared to other significant support persons, both within and outside the family circumference. Needless to say, both elderly men and women in this stage and phase of life, value and regard their sons and daughters equal in their capacity to provide unconditional support. However, differences exist in the two gender groups with reference to their perception of divinity as non conventional form of social support. Women in later stages of life, attempt to find greater solace in pursuing paths of divinity by considering God as substitute for otherwise conventional support system, compared to retired elderly males. Differences also exist with reference to dependence on siblings. Elderly men seem to expect more support from same gender siblings i.e. brother and none from sister whereas elderly women manifest lesser discrepancies with reference to seeking support from siblings.
Moreover, gender differences in social support networks reveal that elderly men seek support from same age friends and peers whereas women restrict themselves in seeking support from immediate family members including spouse, children, siblings and relatives. In addition, elderly women perceive neighbors as prospective support in times of need and help whereas elderly men did not consider neighbors as support. Findings indicating the role of neighbors in the lives of elderly are compatible with previous findings (Shaw, 2005; Cornwell et al 2008). Nonetheless, on a generic level, both the groups revealed social and emotional vacuum. Under diverse situations of help, they indicated that “nobody” was available for providing them the assistance and support. Ironically, there is observed evidence of complete absence of “dependence on self” or “perception of self as potentially strong to compensate for unavailable conventional sources of social support” among the retired elderly women. Elderly men, on the other hand, considered self as important source of strength and self help against the conventional and expected social support systems, which were found to be beneficial substitutions in the replacement of dependence on significant others, in an attempt to obtain emotional calmness and salvation. It is interesting to observe the role of daughter-in-laws in the lives of retired elderly. Elderly women were observed to depend and seek support from their daughter-in-law’s during times of declining physical health in contrast to elderly males. Hesitation in depending on son-in-law was observed. Daughter-in-law, due to proximity in social interactions is considered more when help is required, particularly by aged women.

Elderly women who are separated and widowed, reflect distinct nature, direction and trends in their social support networks (Table 3). Daughters acquire special roles in adding vibrancy to their deserted nests while sons are also perceived as support system. Siblings play an important role in filling gaps and provide additional emotional nourishment and radiance. Moreover, spouseless elderly women maintain closeness with their parents, who if alive, continue to offer emotional, psychological and social support to their aged daughters. In addition, the vacuum created due to death and separation from spouse creates possibilities for elderly women to connect with friends and explore recreational and leisure activities including watching television, listening to music, stitching clothes and pursuing travel.

IV. Conclusion: The nature, direction and trends of social support undergo significant changes after retirement. Social support networks for retired elderly are dominated by spousal support, which acquires greatest prominence during this stage. Gender differences are observed in social support networks. Elderly men seek more support from same age peers and same sex siblings compared to elderly females who retain more family inclusive networks comprising mostly spouse, children, siblings and relatives. Spouseless elderly women who are separated and divorced perceive children, siblings, friends and aged parents as pivotal support.

V. Limitations: Results of the study can be generalized mainly to the elderly living with spouse and children. Hence, the study does not provide insights into the social support networks of spouseless elderly in the post retired phase of life. The study follows cross sectional design, hence, reality of social support networks of elderly respondents could be captured only at specific point of time. In addition, it is realized that aspects of social support needs to be dismantled further into physical, emotional, intellectual, cognitive components. Further, the sample size in the groups under consideration was small. However, readers may be acquainted that no statistical analysis was performed, and the purpose of the study was to derive an understanding and capture the realities and trends of social support dependence of the elderly.

VI. Implications for future research: The subject matter of psycho-gerontology requires systematic exploration of gender differences with reference to environmental difficulties, realities of
daily living and coping mechanisms, more specifically in the Indian context. It is suggested that future researchers could decipher the relevance of social support networks in contributing to an enhanced subjective well-being and positive subjective experiences among the elderly, with specific reference to the Indian population. Further, it is relevant to explore dynamics involving substitution of conventional social support with more unconventional forms as pursued in the form of meaningful activities, leisure and introspection. Family therapy and social re-organization of support networks can be undertaken at individual level for the purpose of providing gerontological counselling to in an attempt to assist ageing persons to deal with death of spouse, lifestyle changes following retirement and empty nest syndrome.

References:

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