Social support network: changes throughout the life cycle

Redes sociais de apoio: mudanças ao longo do ciclo de

vida

La Red de Apoyo Social: Cambios a lo largo del ciclo

Claudia J. Arias

ABSTRACT: The social support network is very important in old age. Extensive empirical evidence shows its relationship to the biopsychosocial being in this stage of life. However, it has been shown that the social support network suffers severe disruptions in old age that can affect its functionality and its ability to respond to assistance needs. In this article, based on several research findings, we will analyze the social support bonds available in old age and the changes in the social support network that occur in a lifespan. Several studies show that in old age bond losses may occur. However, we will show that old people maintain and optimize relationships that have been established in earlier stages of their lives and new bonds are added to the network. The general conclusion is that the coexistence of gains and losses in old age proposed in the lifespan theory is also present in the social support network. In addition, we noted that this social support network is very dynamic and it shows variations in both its structure and its functionality as well as in its bonds' attributes.

Keywords: Social support network; Old age; Lifespan; Affective bonds addition.

RESUMEN: La red de apoyo social es de gran importancia en la vejez. Amplias evidencias empíricas muestran su relación con el bienestar biopsicosocial en esta etapa de la vida. Sin embargo, se ha considerado que la red de apoyo social sufre severas disrupciones en la vejez que pueden afectar su funcionalidad y sus posibilidades de respuesta frente a necesidades de ayuda. En este artículo se efectúa un análisis de la disponibilidad de vínculos de apoyo en la vejez, y de los cambios que se producen en la red de apoyo social a lo largo del curso vital basándonos en diversos hallazgos de investigación. El recorrido por diversos estudios muestra que en la vejez se producen numerosas pérdidas de vínculos. Sin embargo, se mantienen y optimizan relaciones que han sido establecidas en etapas anteriores de sus vidas y además se generan nuevos vínculos que son incorporados a las redes. Se concluye que la coexistencia de pérdidas y de ganancias en la vejez propuesta por la teoría del curso vital también está presente en la red de apoyo social. Además, la misma posee un gran dinamismo, mostrando variaciones tanto en su estructura como en su funcionalidad y en los atributos de los vínculos que la componen.

Palabras clave: Red de apoyo social; Vejez; Curso vital; Pérdidas; Incorporación de vínculos.

RESUMO: A rede social de apoio é muito importante na velhice. Evidência empírica extensa mostra sua relação com o ser biopsicossocial nesta fase da vida. No entanto, demonstrou-se que a rede de apoio social sofre perturbações graves na velhice que podem afetar a sua funcionalidade e sua capacidade para responder às necessidades de assistência. Neste artigo, com base em vários resultados da investigação, vamos analisar os vínculos sociais de apoio disponíveis na velhice e as mudanças na rede de apoio social que ocorrem em um tempo de vida. Vários estudos mostram que na velhice podem ocorrer perdas de títulos. No entanto, vamos mostrar que as pessoas idosas mantêm e otimizam as relações que foram estabelecidas no fases anteriores de suas vidas e novos títulos são adicionados à rede. A conclusão geral é que a coexistência de ganhos e perdas na velhice proposto na teoria expectativa de vida também está presente na rede de apoio social. Além disso, notou-se que esta rede de apoio social é muito dinâmica e mostra variações, tanto em sua estrutura e em sua funcionalidade, bem como nos atributos dos seus títulos.

Palavras-chave: Rede de apoio social; Velhice; LifeSpan; Affective bonds addition.

Introduction

Nowadays, older people have an active life in different ways. Recent studies have contradicted and questioned many negative social representations about aging. While this stage of life has generally been associated with deterioration, deficits, depression and passivity, several studies have shown that older adults have high levels of satisfaction, well-being and happiness in life (Arias, & Soliverez, 2009a; 2009b; Carstensen, & Charles, 1998; Lacey, Smith, & Ubel, 2006; Wood, Kisley, & Burrows, 2007), enjoy their sexuality (Arias, & Polizzi, 2011), and have multiple resources and personal strengths (Arias, Castañeiras, & Posada, 2009). In turn, compared to younger age groups, seniors have higher levels of wisdom (Ardelt, 2003; Baltes, & Baltes, 1990) and better emotion regulation (Arias, & Iacub, 2013; Birditt, Fingerman, & Almeida, 2005; Carstensen, Pasupathi, Nesselroade, & Mayer, 2000, Charles, & Carstensen, 2007; Márquez González, Fernández de Trocóniz, Montorio Cerrato, & Losada Baltar, 2008). These and other results which explored the positive aspects in the elderly have not only shown old people's varied available resources, but also their potential to adapt to changes, their active coping in situations of loss, and the overcoming of difficulties.

However, specifically with regard to the availability of social support bonds, there are still numerous assumptions underpinning - in a generalized way - that older people have limited social interaction and bonds that give them inadequate social support. These assumptions have been held in the Disengagement Theory, which states that older adults slowly withdraw from their roles, losing their personal relationships and decreasing interaction. The Deficit Paradigm has also stated that situations of social isolation and feelings of loneliness may occur due to the repeated loss of family and friends – mainly because of death-and the difficulty for incorporating new bonds and initiating new activities.

Following this paradigm, social area development would follow the traditional inverted U form, so that the ties and relationships would increase in childhood, adolescence and youth, to stabilize at midlife, start decreasing at this life stage and then, in a sustainable way, continue until advanced old age. Consequently, there would be stages with unique and progressive gains and others with unique and progressive losses. At present, this set of assumptions is being widely questioned by theoretical reformulations and new empirical evidence.

In this article, based on various research findings, we analyze old age's available social support bonds, and the social support network changes in a lifespan.

The social support network

The social support network is made up of a set of family and non-family relationships, which provide, effectively or potentially, one or several types of aid including company, emotional support, practical assistance, economic and cognitive guidance or advice (Sluzki, 1996).

This network can be assessed with respect to its structural characteristics, its functionality and its bonds attributes. Following Sluzki (1996), structural features include the "network size" (number of people who make it up), the "density" (degree of interaction between members) and the "distribution" (location of the relationships in the quadrants and circles network map), among others. Regarding its functions, the "social company," "emotional support", the "cognitive guidance and advice", "economic assistance" and "practical help" are mentioned. Finally, among the bonds attributes we may consider its "multidimensionality", "privacy", "frequency of contact" and "story". Both its evaluation and its mapping are key tools for the comprehensive assessment of the elderly, as it provides information about the bonds that constitute the person's available resources, the types of absent relationships, the aspects to be strengthened and the bonds that need to be included or activated (Arias, 2009).

The social support network has a close relationship with well-being and emotional states in old age (Aguerre, & Bouffard, 2008; Arias, 2015; Clemente, Tartaglini, & Stefani, 2008; Cheng, Li, Leung, & Chan, 2011; Fauth, Gerstorf, Ram, & Malmberg, 2012; Hill, Payne, Jackson, Stine-Morrow, & Roberts, 2013; Huxhold, Fiori, & Windsor, 2013; Phillips, Sui, Yeh, & Cheng, 2008; Prince-Paul, 2008; Vivaldi, & Barra, 2012). In the absence of social ties, situations of extreme social isolation, feelings of loneliness and different pathologies can occur (Hawkley, Thisted, Masi, & Cacioppo, 2010; Jaremka, *et al.*, 2013; Rürup, Deeg, Poppelaars, Kerkhof, & Onwuteaka-Philipsen, 2011).

There is broad consensus about the impact social networks have on physical and mental health (Stephens, Alpass, Towers, & Stevenson, 2011), functional status of older adults (Cornwell, & Laumann, 2013) and the development of daily life activities (Mendes de Leon, Glass, Beckett, Seeman, Evans, & Berkman, 1999). An adequate social network decreases the time of hospitalization and health recovery (Sutherland, & Murphy, 1995; Di Iorio, *et al.*, 1999), and the risk of re-hospitalization after discharge (Giuli, Spazzafumo, Sirolla, Abbatecola, Lattanzio, & Postacchini, 2012).

For all these reasons, multiple work programs and gerontological practices are designed <u>considering</u> the strengthening of social supports for older people (Arias, 2008, 2013). Working from this approach allows seniors' empowerment, understood as a process that implies review and questioning of certain cultural codes, which in effect produce ideological and social changes in order to facilitate autonomy and social integration improvement as well as an increase in the quality of life (Iacub, & Arias, 2011).

While, as stated above, research findings widely show the importance of the social support network in old age and its implications for the well-being and overall health, there are still widespread beliefs about its limitations and deficits in this stage of life.

Changes in social support network

Social networks have open systems characteristics, since they are in a dynamic process of permanent construction and reconstruction (Dabas, 1993); thereof, they are both modified structurally and functionally in time. A prototypical example is the affective bonds loss, and the subsequent incorporation of new relationships -which may change in attributes-and the level of intimacy and frequency of contact. While these changes occur in a lifespan, certain stages have been considered only for their gains, such as childhood and adolescence, crystallizing an old age view as the exclusive time of losses.

Events associated with the loss of affective bonds -such as the death of friends and/or family, the loss of a partner, retirement, entering a long-term stay home, migration and other difficulties in maintaining active bonds- are closely linked to the deterioration of the network in old age, and are considered as almost inevitable (Sluzki, 1996).

To advance in the understanding of the changes that occur in the social support network and the social resource availability in old age, we may stop to analyze the loss of bonds at this life stage.

The loss of affective bonds

Several studies have shown that in old age bond losses are part of the support network. Conway, Magai, Jones, Fiori, and Gillespie (2013), in a longitudinal study that explored the dynamics of changes in the social networks of older adults, found that the latter were reduced in old age. When searching the reasons for affective bond loss, they found three categories of answers: death, illness/hospitalization and loss of contact.

Studies in Argentina (Arias, & Polizzi, 2010; Elgart, 2009) in which adults 65 and older were interviewed in order to explore both the loss of relationships and the reasons for them, as well as the incorporation of bonds as from age 60, showed similar categories to those listed above. Most of adults 65 and older (over 90%) reported having lost a relationship in the last 5 years.

The reason most frequently mentioned was the death of family and/or friends. Although the loss of a spouse was mainly mentioned, parents and children's death were also referred to. Loss of bonds due to death was found in both network members who belonged to the same generation (spouse, siblings, in-laws, cousins, friends) and/or to a previous one (parents, uncles, in-laws), in both cases it was something expected in old age. Later generations losses (children, grandchildren, nieces, daughters or sons-in-law) that are not attributable to age appeared less frequently than the others and were mainly due to illness or accidents.

The second reason for loss of ties mentioned in about half of cases was voluntarily disassociation of old people with past relationships. The aforementioned causes were conflict situations, lack of reciprocity in the relationship and the poor ties.

The loss of ties due to migration and retirement was less frequently mentioned. In these cases, they were not very close and hardly meaningful relationships. Similarly, when entering a nursing home the peripheral bonds are lost while the central ones remain (Arias, 2004).

Finally, another study found that a few older adults mentioned health problems as a cause of bond loss. In all cases, serious disease limited the possibility of continuing the relationship (Elgart, 2009).

The first bereavement reason reported is the death of people in the social support network as well as same generation ties can be explained from the Convoy Theory (Kahn, & Antonucci, 1980); these reasons coincide with those in the Theory of Socioemotional Selectivity (Carstensen, 1992) which will be developed later in this article.

However, despite the losses in older adults social support networks, recent studies have not confirmed their lack of value as a general fact at this stage of life. The findings show networks that reduce their size, are irregularly distributed, homogenized and lose functionality; but these networks can also have medium and high functional structural levels (Arias, 2004; 2009; Polizzi, & Arias, 2014) as well as give satisfaction with the available support (Acrich, 2012).

In Spain, with different data collection techniques, extensive networks in older adults were found. When applying the "My relationships" instrument (Fernandez Ballesteros, 2004), which identifies the significant people in three levels of intimacy, an average of 5.4 very close relationships, 7.0 for moderately close and 12.5 for those who are not so close to the person was found (Fernández Ballesteros, Reig Ferrer, & Zamarrón Casinello, 2009). Several studies conducted in Argentina have also shown similar results. Studies conducted in Mar del Plata, Argentina, showed that older people's networks had an average of more than 10 members and that their functionality and its overall adequacy levels were predominantly medium and high (Arias, 2004; Arias, & Polizzi, 2010).

Faced with these findings we might ask ourselves, why despite suffering bond loss, both central and peripheral, do most of the elderly continue having sufficient social support networks?

Several authors have remarked the need to include in the analysis not only features such as the size-structure but also functional aspects, highlighting that while relationships are lost in old age, in most cases these are peripheral and not central. In fact, the available amount of closeness and emotional support is relatively stable in a life course – even in advanced old age (Antonucci, 2001, Cornwell, Schumm, Laumann, & Graber, 2009; Due, Holstein, Lund, Modvig, & Avlund, 1999; Wrzus, Hänel, Wagner, & Neyer, 2013).

Theories of Socioemotional Selectivity (Carstensen, 1992) and Social Convoy (Kahn, & Antonucci, 1980) predict similar changes in the social network in a lifetime. Both agree that even if the size tends to decrease, the number of close relationships and the emotional support available is relatively stable in a life course – even in advanced old age. However, these theories attribute these changes to different reasons.

The Convoy Theory (Kahn & Antonucci, 1980) states that people develop and neglect a variety of roles throughout their lives, and each of these roles is accompanied by a specific set of relationships. There are certain patterns that are consistent with certain events in the life course. For example in old age, widowhood or retirement implies the shrinking of the network; however, this convoy is part of a dynamic network that can be modified over time and lead to very different variables at this stage of life.

The theory of socioemotional selectivity (Carstensen, 1992) interprets the decrease in the social network relationships in old age as the result of a deliberate choice of the elderly, and not as the consequence of multiple losses.

This theory holds that the understanding of one's own finitude results in the transformation of the goals that guide behavior. Instead of planning to obtain future well-being, older adults focus on the present and one of the privileged sources to achieve that is by having close relationships. Therefore, older adults assume a pro-active role in their social relationships and intentionally and strategically select bonds that they find interesting to keep (Carstensen, 2006; Carstensen, Isaacowitz, & Charles, 1999). Thus, bond loss can be compensated with emotional support gains and contact with the closest ties. Thus, not only is the network modified in size but also in its composition.

In a meta-theoretical work that analyzes the findings of different cultural contexts, Antonucci (2001) shows those social relationships are stable in a lifetime -even in advanced old age. Also, a study conducted in the United States on a representative nationwide sample of over 3.000 cases distributed in three age groups (57-64, 65 to 74, and 75 to 85 years old), compared the amount of people that seniors could trust and talk to about important issues. The averages obtained were 3.5 for the youngest group and 3.4 for the oldest group, with no significant differences despite an age difference of almost 30 years between them. In addition, the authors concluded that older adults were socially well connected (Cornwell, Schumm, Laumann, & Graber, 2009).

These findings agree with the above-mentioned theories, which show that the number of closer and trustworthy relationship is stable. This would answer, in part, our question on why, despite the loss of relationships, many of the seniors have sufficient networks. Within the kind of losses, only the ones related to death or serious illness of a social support network member can be considered as an effective loss of support. Instead, old people's intentional selection to exclude a member from the network can be considered to some extent, a gain.

Next, we will try to answer this question by analyzing other types of network gains that occur in old age.

The incorporation of new ties

The social support network situation in old age has not only been seen as conflictive due to bereavement, but also as a difficult time both to maintain the existing ties active and to incorporate new relationships (Sluzki, 1996). There have been recent studies focused on exploring changes in the social support network in old age, which found that older adults incorporate bonds during this life stage.

In the aforementioned study conducted in Argentina, it was observed that seniors' social support networks were appropriate and had a wide dynamism. Data analysis showed that while bond loss in old age was very frequent, in many cases the new relationships numerically compensated the first ones in keeping the same size (Arias, & Polizzi, 2010). Approximately, in one third of the cases the number of lost relationships was equal to the ones incorporated. The same ratio occurred for cases in which losses had exceeded the gains. However, it is clear that the fact of maintaining the number of social network member does not imply in any way that there has been no major changes in its composition.

The bonds most frequently included were friends, spouses and grandchildren. Indeed, grandchildren, in most cases constitute a typical aging gain. On the other hand, participation in different community activities promotes the formation of new relationships. Moving and migrations also appeared as opportunities to establish new ties with neighbors and friends. While migrations have been considered a reason for bond loss, new technologies nowadays offer an opportunity for keeping in touch despite the distance. In fact, many older people use email, online social networks, chat, web cameras and cell phones to communicate and relate to others. A clear positive attitude to change is shown in the use of different resources that enable old people to maintain active ties, even despite geographical distances, or difficulties to move. The contact form is modified but it does not determine the bond loss of close people or with those considered important. Ultimately, old people end relationships with those who do not occupy a central place in the social support network.

Cornwell and Laumann (2013) in a research which explored the tendency of older adults to create new ties, pointed out that the vast majority of respondents, 81.8%, had added at least one new tie to its network during the five years in which the study was carried out, and more than half (59,4%) had established new trustworthy relationships. From their findings, the authors pose that while bond loss reduces the sense of control and the skills to cope with stress, by expanding the social support network in old age great health benefits are obtained, improving self-esteem and the sense of belonging. In general, a new spouse or the establishment of a strong friendship bond significantly improves mood and well-being (Arias, 2004).

However, it should be noted that the need for new affective bonds could be different for each person, which corresponds to previous available resources. In a study, van Tilburg (1998) concludes that people who have large networks, frequent contacts, and sufficient emotional support have no need to keep the entire network. However, those whose networks are small may try to increase them to improve their chances of receiving support.

In recent decades, the fact that older people have more free time, plus the possibility of enjoying a healthier aging, enable them to do activities that were relegated in their past as well as to increase their social interaction.

Feld, Suitor, and Hoegh (2007) suggest that the network properties change over time according to people's circumstances including their motivation and involvement in different activities. Regarding the activities, the elderly's life frequently goes beyond the limits of home and family context. Currently, there are a large number of seniors that get involved in different recreational, social, cultural, political, educational and artistic activities, among others. In fact, they have significantly changed their lifestyle participating more actively in the community and in the diverse programs offered nowadays. Engaging in this type of activities generate well-being (Fernandez-Ballesteros, *et al.*, 2013) and greater self-worth (Solé, Triadó, Villar, Riera, & Chamorro, 2005), while enabling the exchange with others and establishing new relationships (Dottori, & Arias, 2013; Montoro-Rodriguez, & Pinazo, 2005).

In Argentina, seniors' active and sustained participation have helped in the creation and consolidation of their own organizations. In addition, they have responded positively to national universities, government agencies and community programs, in an offer that is increasingly broad and diversified.

Beyond the explicit and specific objectives of each of these programs, some additional achievements that enable the empowerment of older people as individuals and as a social group are the establishment of new relationships, group formation, project creation, problem solving, self-esteem strengthening and potential development (Iacub, & Arias, 2011).

Non-family-ties inclusion becomes of great importance as it increases the available support and helps the network to have a varied composition without limiting it to only family ties. Cornwell, and Laumann (2013) held that maintaining certain ties even the weak ones, such as neighbors and mates - is beneficial for the elderly as they help to maintain their independence and to establish contact with non-family ties. By having many ties within the social support network seniors have available support sources to satisfy the different needs in a dynamic way, in which each bring specific support to the network according to their potential and position (Arias, & Polizzi, 2012). Salinas, Manrique, & Red Tellez (2008) state that the availability of social support is more solid when the bonds are varied and not limited only to family or friends, but include both sources.

If these conditions of active participation in various community spaces generalize and deepen further, to develop new relationships in old age becomes an expected life event and consistent with this stage of life.

Some authors, in addition to network gains produced by the addition of new ties, have found changes within the network. Conway, Magai, Jones, Fiori, and Gillespie (2013) observed that while some peripheral relationships are lost, others become closer and central. In fact, from the selection process, the movements in the network can go both ways - either away from or towards a central position. The findings presented here show that the renewal of the network is frequent in old age.

Inter-individual differences

When reviewing the partial responses to the raised question, we may think that the social support network, in spite of suffering loss of relationships in old age, in many cases remains sufficient because: 1) part of the ties are lost intentionally by a process of selection, and in fact would not constitute a personality loss; 2) most of the central relationships are maintained; 3) new ties are incorporated; and 4) some relationships that were previously peripheral become closer and central. However, the individual component is still to be included to complete the answer.

The inter-individual variability

While social networks show consistent patterns of change over a lifespan (Antonucci, Akiyama, & Takahashi (2004), many research findings have shown the existence of a wide inter-individual variability both as regards social support ties availability in old age, as to the changes that occur in it in a life course.

Regarding the first point, in a study conducted in Mar del Plata, Argentina, the social support networks of 105 older adults in three home types (single, family and nursing homes) were thoroughly evaluated. We noticed that the social networks varied widely in size (from a minimum of 1 member to a maximum of 21), depending on the type of ties, level of functionality, number of relationships that provided each of the support functions, level of closeness, frequency of contact, multidimensionality and total sufficiency level (Arias, 2004).

While the main purpose of that research was to achieve a description of the social support network in old age, the main finding was the wide variability of networks in older adults. While some networks showed a varied composition, because different types of ties formed them, others had an extremely homogeneous distribution of functions concentrated in a few ties of a single type of relationship. These variations depended on a number of issues such as marital status, presence or absence of children and grandchildren, having or not a spouse, siblings and degree of social participation. This inability to identify a senior's type of network demonstrates the heterogeneity of the aging process and its manifestation in the social area.

As regards the changes that occur in the network, van Tilburg (1998) conducted a study in which he explored the variations in the size and social support that the personal networks provided in adults 55 to 85 years old. He proved the existence of development variants and variable pattern changes in losses as well as bond incorporation in old age. In some of them, he found personal networks in which gains and losses coincided, and others in which networks were even expanding in old age.

Shaw, Krause, Liang, and Bennett (2007) also emphasize the dynamic nature of social relationships in old age and the wide inter-individual heterogeneity of the trajectories in the social dimension; while some older people have fewer networks, others keep their ties stable or they even increase them. It is clear then that the lifespan not only generates differences in the elderly's networks, but also in the dynamic changes that occur in them.

Conclusion

An analysis of the social support availability in old age and changes in the seniors networks is complex and requires the inclusion of multiple aspects. From research analysis, we conclude that the disruption of the social support network in old age is not a generalized fact. On the contrary, older people generally have sufficient support resources and good social interaction.

The gains and loss coexistence in old age proposed by the lifespan theory is also present in the social support network; it is very dynamic, showing variations in both its structure and its functionality as well as in its bond attributes. Thus, within the social network changes in old age we may find the tie loss, inclusion and variation in certain attributes.

Regarding bereavement, central ties (same generation type) leave the network primarily due to death and peripherals ties are lost because of a selection process. While old people face loss - mainly by the death of family and/or friends - they also show great potential to confront and develop adaptive strategies both from the optimization of ties and compensation to include new relationships.

The inclusion of ties in the elderly is common, primarily when the support resources available are scarce and when most people develop active participation in social environments. Older adults not only maintain and optimize relationships that have been established in earlier stages of their lives but also continue to generate new ties that join their networks.

No doubt, we are going through a time of great change concerning old age. Seniors are taking an increasingly active and leading role in social and community life, giving them greater opportunities to establish new ties in this stage of life. The last change type mentioned implies changes in certain tie attributes that enable optimization, for example, certain peripheral relations become central and consequently remain in the network to provide greater support to the person. These renovations on the social network show the resources that seniors have to face changes, to continue to develop and to achieve high well-being at this stage of life. Finally, the wide inter-individual variability should be noted; once again large differences, accumulated in a lifetime as a result of lived events, show both in the structure and functionality of the elderly's networks, and in the changes they produce.

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Claudia J. Arias - Licenciada en Psicología. Magister en Psicología Social. Docente y investigadora. Facultad de Psicología. Universidad Nacional de Mar del Plata (Argentina). E-mail: cjarias@mdp.edu.ar