



Importance of Social Support in Women's Life

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Abstract

Social support may be defined as the perception or experience that one is loved and cared for by another person. The paper aims to highlight the role of social support in a woman's life. Social support involves receiving advice, instrumental support, and emotional support from others. Sources of social support are family, relatives, friends, coworkers, social and community ties, and pets. Social Support may be present in two different forms actual Social Support and Perceived Social Support. There are four different types of social support- Emotional, Esteem, Informational, and tangible social support. It promotes physical as well as mental health. It reduces psychological distress including depression or anxiety at times of stress. It increases adherence to medication and treatment plans and causes rapid recovery from illness and better adjustment. Working women have family responsibilities that as taking care of household chores e.g. brooming, mopping, cooking, caring for children, husband and in-laws, etc. At the office, they are supposed to complete their assigned work within the allotted time frame. Conflict arises when working women try to complete allotted assignments at the expense of family responsibilities or vice versa. Among working mothers, their work role and family roles interact closely and it becomes difficult to separate both things. It results in higher levels of work-family conflict, turnover, low job- satisfaction, deteriorated job performance, and low organizational commitment. It will also cause psychological distress, anxiety, and depression in working mothers. Social Support can reduce work-family conflict. Working mothers can get social support from their spouses, children, in-laws, and domestic helpers at home. While at the workplace sources of social support are colleagues and bosses.

Keywords: Social Support, Physical health, Mental health, Actual and Perceived social support

Introduction:

Social support may be defined as the perception or experience that one is loved and cared for by another person (Wills, 1991). It may involve receiving advice, instrumental support, and emotional support from others (Linley and Joseph, 2004). It is a variable that affects a person's well-being. It facilitates an individual coping effectively with stressors (Lazarus and Folkman, 1984). Sources of social support are family, relatives, friends, coworkers, social and community ties, and pets (Allen, Blascovich & Mendes, 2002). The origin of social support includes a person's genetic factors and his/her early environment. There are some cognitive and personality variables, for example, locus of control, dependency, problem-solving skills, introversion-extroversion, etc., that are likely to affect a person's need for social support. The concept of social support has been studied by researchers in anthropology, epidemiology,

medicine, nursing, psychology, and sociology (Uchino, 2004). Renowned French Sociologist Emile Durkheim (1897) found in his research that socially integrated people were more likely to commit suicide.

The need of social support varies from person to person. Perceived social support is also affected by the gender of a person. Self-reliant persons are less likely to need social support as compared to other-reliant persons. Females have higher social support than males (Shari et al., 2007; Lian & Geok, 2009). This is because females get support from their friends, relatives, and children, while males get support only from their spouses and co-workers (Kendler et al., 2005). There are two aspects of social support - structural and functional social support. Structural social support focuses on the existence and quantity of social relationships (Sherbourne and Stewart, 1991). The density and size of one's social network and frequency of social contact might indicate one's structural social support (Gallo et al., 2015). While functional social support is a subjective assessment of the adequacy and quality of one's relationship (Santini et al., 2015). It can be measured by assessing how much one is satisfied with his/her relationship (Davidson et al., 2016). Females have been found to get more perceived social support from their friends than their male counterparts (Cumsille and Epstein, 1994). The opposite of social support is called loneliness. Having a confidant (such as a spouse or a partner) may be the most effective social support (Collins & Feeney, 2000; Cohen & Wills, 1985), especially for men (e.g., Broadwell & Light, 1999; Wickrama, Conger, & Lorenz, 1995). Accordingly, married people report higher perceived support than unmarried people do (Thoits, 1995).

There are four different types of Social Support- Emotional, Esteem, Informational, and Tangible social support (HC et al., 2013). Tangible Social support is assistance or help that one gets in the form of money, goods and services, etc. Helping one's friend by giving money in hospitalization is an example of Tangible support. Informational social support involves helping someone by offering a piece of information. Helping one's friend in hospitalization by offering information about different hospitals is an example of Informational Social Support. Emotional Social support encompasses offering affection, love, concern, intimacy, and encouragement. It is warmth and nurturance that is provided by our well-wishers (family and friends). Esteem social support involves giving compliments and boosting other's confidence.

Social Support may be present in two different forms: actual Social Support and Perceived Social Support. Actual Social Support is the help that one gets from others. Perceived social support is one's belief that social support is available to him/her. It is one's perception of the availability of social support (Norris & Kaniasty, 1996; Sarason, Sarason, & Pierce, 1990). It may assist one in coping with problems by building a social network (Holahan et al., 1995). It plays an important role in psychological adjustment and results in reduced stress (Xiao et al., 2019; Xu et al., 2013). It enhances self-esteem. Social support may also be distinguished as negative social support and Positive social support. Negative social support is any type of support that one perceives as unhelpful, though the intention of the person is not so (Revenson, Schiaffino, Majerovitz, & Gibofsky, 1991). While positive is perceived as beneficial and affirmative (Wortman & Conway, 1985).

There are two psychological models – The stress-buffering model and the Main effect model that explain conditions under which different kinds of social support influence health. The stress-buffering model says that social support is related to well-being primarily in persons who are under stress. While, the Main (or direct) effect model says that social supports have beneficial effects despite stressful situations ((Cohen & Wills, 1985; House, 1981).

Studies have found that the increase or onset of psychological problems in young people may be prevented by social support from parents, siblings, members of the extended family, and peers (Walen & Lachman, 2000; Whitney, 2010). A more socially isolated person or person with low social support is more likely to experience poor health (both psychological and mental) and is more likely to die early (House, Landis & Umberson, 1988). (Cohen, 1988).

Social Support and Physical Health

A systematic review showed that social support from spouses, friends, and health professionals was an important factor in establishing and maintaining healthy habits for nutrition and lifestyle in people diagnosed with diabetes. A systematic review showed that social support from spouses, friends, and health professionals was an important factor in establishing and maintaining healthy habits for nutrition and lifestyle in people diagnosed with diabetes. Social support has a significant effect on diabetes self-management behaviors. Social support also affects cardiovascular health via physiological processes as well as behavioral processes. When Stress is associated with low social support, it may affect the heart through sympathetic arousal, which causes reduced HRV and contributes to increased inflammation (Aggarwal, Liao, & Mosca, 2008; Barefoot et al., 2003). Hormonal responses to social support (increased Oxytocin level) increase cardiac functioning (Dornelas, 2008; Grewen, Girdler, Amico, & Light, 2005). Because oxytocin is related to reduced BP and cortisol levels. The absence of social support increases vulnerability to various diseases (Kaplan et al., 1977). Studies have found that social support is associated with adaptation and recovery from illness and injury (Davidson, 1981; Dimatteo & Hays, 1981)

Social Support and Mental Health

Social support is positively correlated with mental (Patrick et al., 2004). It means higher the social support better mental health. The stress and coping theory (Lazarus and Folkman, 1984) says that social support plays an important role in mental health. It says that social support shapes how we perceive and handle stress. Access to social support makes a person more likely to view events less stressful (Acoba, 2024). It positively influences the well-being in international students and children (Bender et al., 2019). It also maintains self-esteem and enhances the coping effort of a person (Thoits, 2013).

Benefits of Social Support

Research has also indicated that perceived social support is a better predictor of psychological well-being than the actual social support received (Cohen et al., 2000; Gallagher & Vella-Brodrick, 2008). Researchers have found a relationship between social support and health. It promotes physical as well as mental health. It reduces psychological distress including depression or anxiety at times of stress (Fleming, Baum, Gisriel & Gurung, 1997). The

knowledge that one is wanted, cared for, and loved is desirable and can get help at times of adversity can affect the self-esteem and self-image of a person (Kalpana, 2016).

Low social support causes lower adherence to medication and treatment plans. People with low social support are likely to have difficulties in arranging transportation to medical appointments (Dornelas, 2008).

When social support was provided to hospitalized patients, they showed rapid recovery from illness and better adjustment (Kulik & Mahler, 1993). It is also associated with longevity, lower stress levels and improved overall well-being (Kalpana, 2016).

Factors Affecting Perceived Social Support

Several factors affect perceived social support. Some of these are:-

Culture

The need for social support is also affected by the culture in which a person lives. Indian Culture has the joint family concept. Western culture gives less importance to social support while Eastern culture gives more weightage to social support.

Personality traits

Perceived Social support is affected by the personality traits of individuals. Individuals who are high in extraversion, high in agreeableness, and low in neuroticism reported high levels of perceived social support

(Swickert et al., 2004).

Family

There are two types of family- nuclear family and joint family. The social support that a person will get also depends on the type of family he or she belongs. Low family support has been found to be linked with poorer coping strategies (Hardy, Power, & Jaedicke, 1993; Valentiner, Holohan, & Moos, 1994). Studies have found that the increase and onset of psychological problems in young adults may be prevented by social support that one gets from their parents, siblings, extended family members, and peers (Walen & Lachman, 2000; Whitney, 2010). In a joint family, a person gets unconditional social support.

Measurement

Scales that measure social support are :-

1. The Multidimensional Scale of Perceived Social Support

It was developed by Zimet et al., in 1988. It consists of 12 items to identify the social support factors perceived by the individuals. The scale is comprised of 3 groups depending on the source of support, each group consisting of 4 items. High scores reflect more perceived social support. The PSS has an excellent internal consistency, with an alpha of .90

2. The Social Support Scale

It was developed by Peeter et al. to measure emotional, appraisal, instrumental, and informational social support. It is a 4-item scale. It must be responded according to 5 response categories (0 = strongly disagree; 1 = Disagree; 2 = Neutral; 3 = Agree; 4 = Strongly Agree). Its total scores range from 0-16. A higher score means higher social support (Santiago et al., 2023).

3. The Social Support Questionnaire

It was developed by Irwin Sarason, Robert Basham, and Barbara Sarason in 1981. There are 27 items in the scale. It measures perceptions of social support and satisfaction with that social support (Sarason et al., 1983)

4. PGI Social Support Questionnaire

This scale was developed by Nehra, Kulhara, and Verma in 1998. This scale measures the perceived Social Support of a person. This scale is an Indian adaptation of the Pollack and Harris Scale (Pollack and Harris, 1993) to measure perceived social support. It is simple, short, and quick to administer. It has 18 items. It is a 4-Point Scale. Each item is presented on a 4-point scale. A higher score on this scale means higher perceived social support.

Women and Social Support

Women's participation in the workplace is increasing all over the world. Women who are working in exchange for a salary outside the house are referred to as working women. Working mothers have family responsibilities that as taking care of household chores e.g. brooming, mopping, cooking, caring for children, husband, in-laws, and guests, etc. At the office, they are supposed to complete their assigned work within the allotted time frame. Conflict arises when working mothers try to complete allotted assignments at the expense of family responsibilities or vice versa (Cole, 2004). Work-family conflict experienced by working mothers may be bidirectional, which means, work can interfere with family functioning and family can also interfere with work responsibilities (Grandey et al., 2005). Among working women, their work role and family roles interact closely and it becomes difficult to separate both things. It results in higher levels of work-family conflict, turnover, low job-satisfaction, deteriorated job performance, and low organizational commitment (Allen et al., 2000). It will also cause psychological distress and anxiety in working mothers. Studies have shown that social support has a buffering effect on working mothers in both domains, that is workplace and home (Allen, 2001; Lampierre & Allen, 2006). Working mothers can get social support from their spouses,

children, in-laws, and domestic helpers at home. While at the workplace sources of social support are colleagues and bosses.

Conclusion

social support has a buffering effect on working mothers in both domains, that is workplace and home. It helps them maintain their psychological well-being, enhance their self-esteem, and make them productive.

Reference:

- Aggarwal, B., Liao, M., & Mosca, L. (2008). Physical activity is a potential mechanism through which social support may reduce cardiovascular disease risk. *Journal of Cardiovascular Nursing*, 23, 90-96.
- Allen, K., Blascovich, J., & Mendes, W.B. (2002). Cardiovascular reactivity and the presence of pets, friends, and spouses: The truth about cats and dogs. *Psychosomatic Medicine*, 64, 727 – 739
- Allen, T. D., Herst, D. E. L, Bruck, C.S. & Sutton, M. (2000). Consequences Associated with Work-Family CONFLICT: A Review and Agenda for Future Research. *Journal of Occupational Health Psychology*, 5, 278-308.
- Barefoot. J.C., Burg.M.M., Carney, R.M. Cornell, C.E., Czajkowski, S.M., Freedland, K.E...Shep, D. (2003). Aspects of social support associated with depression at hospitalization and follow-up assessments among cardiac patients. *Journal of Cardiopulmonary Rehabilitation*, 23, 404-412.
- Barnes, M. K., & Duck, S. (1994). Everyday communicative contexts for social support. In B. R. Burleson, T. L. Albrecht, & I. G. Sarason (Eds.), *Communication of social support: Messages, interactions, relationships, and community* (pp. 175–194). Thousand Oaks, CA: Sage Publications.
- Bender, M., van Osch, Y., Slegers, W., and Ye, M. (2019). Social support benefits psychological adjustment of international students: Evidence from a meta-analysis. *J. Cross-Cult. Psychol.* 50, 827–847
- Cohen, S. (2004). Social relationships and health. *American Psychologist*, 59(8), 676–684. Cohen, S., & Wills, T.A. (1985). Stress, social support, and the buffering hypothesis, *Psychological Bulletin*, 52, 55-86.
- Cohen, S., Underwood, L., & Gottlieb, B. (2000). *Social Support Measurement and Intervention: A Guide for Health and Social Scientists*. New York: Oxford University Press
- Cole, D.W. (2004). Social Reflection on Women Playing Dual Roles: An Assessment of Women in Leadership Positions. *Journal of Gender Studies*, 7(2), 126-132.
- Collins, N.L., & Feeney, B.C. (2000). A haven: An attachment theory perspective on support seeking and caregiving in intimate relationships. *Journal of Personality and Social Psychology*, 78, 1053 – 1073.
- Cumsille, P.E., & Epstein, N.(1994). Family cohesion, family adaptability, social support, and adolescent depression symptoms in outpatient clinic families. *Journal of Family Psychology*, 8(2), 202-214.
- Donna P. Funchand James R. Marshall (1984). Self-resilience as a modifier of the effects of life stress and social support, *Journal of Psychosomatic Research* 28: 9-15.
- Dornelas, E.A. (2008). *Psychotherapy with cardiac patients: Behavioural cardiology in practice*. Washington DC: American Psychological Association.
- Drageset, Jorunn. (2021). Social Support. 10.1007/978-3-030-63135-2_11.
- Davidson, S. K., Dowrick, C. F., and Gunn, J. M. (2016). Impact of functional and structural social relationships on two year depression outcomes: a multivariate analysis. *J. Affect.Disord.* 193, 274–281. doi: 10.1016/j. jad.2015.12.025
- E. Durkheim, suicide (Free Press, New York, 1951[1897].

- Fleming, R., Baum, A., Gisriel, M.M., & Gatchel, R.J. (1982). Mediating influences of social support on stress at Three Mile Island. *Journal of Human Stress*, 8, 14 – 22.
- Gallagher, E. N., & Vella-Brodrick, D. A. (2008). Social Support and Emotional Intelligence as Predictors of Subjective Well-Being. *Personality and Individual Differences*, 44, 1551- 1561. <http://dx.doi.org/10.1016/j.paid.2008.01.011>
- Goldsmith, D. J. (2004). *Communicating social support*. Cambridge University Press
- Grandey, A.A, Cordeiro, B.L & Crouter, A. C. (2005). A Longitudinal and Multi-Source Test of the Work-Family Conflict and Job Satisfaction Relationship. *Journal of Occupational and Organizational Psychology*, 78, 1-20 samples. Plos One, 18(1), e 0279954.
- Grewen K.M., Girdler, S.S., Amico, J., & Light, K.C. (2005). Effects of partner on resting oxytocin, cortisol, norepinephrine, and blood pressure before and after warm partner contact. *Psychosomatic Medicine*, 67, 531-538.
- Gallo, L. C., Fortmann, A. L., McCurley, J. L., Isasi, C. R., Penedo, F. J., Daviglius, M. L., et al. (2015). Associations of structural and functional social support with diabetes prevalence in U.S. Hispanics/Latinos: results from the HCHS/SOL sociocultural ancillary study. *J. Behav. Med.* 38, 160–170. doi: 10.1007/s10865-014-9588-z
- Hawkey, L. C., Hughes, M. E., Waite, L. J., Masi, C. M., Thisted, R. A., and Cacioppo, J. T. (2008). From social structural factors to perceptions of relationship quality and loneliness: The Chicago health, aging, and social relations study. *J. Gerontol. Soc. Sci.*63B, 375–384. doi: 10.1093/geronb/63.6.S375
- Heaney, C. A., & Israel, B. A. (2008). Social networks and social support. In K. Glanz, B. K. Rimer, & K. Viswanath (Eds.), *Health behavior and health education: Theory, research, and practice* (4th ed., pp. 189–210). Jossey-Bass.
- Holahan, C.J.; Valentiner, D.P.; & Moos, R.H. (1995) Parental support, coping strategies, and psychological adjustment: An integrative model with late adolescents. *Journal of Youth and Adolescence*, 24(6) 633-648.
- Hardy, D.F., Power, T.G., & Jaedicke, S. (1993). Examining the relations of parenting to children's coping with everyday stress. *Child Development*, 64, 1829–1841.
- House, J.S. (1981). *Work stress and social support*. Reading, MA: Addison-Wesley.
- https://cancercontrol.cancer.gov/sites/default/files/2020-06/social_support.pdf interactions, relationships, and community (pp. 175–194). Thousand Oaks, CA: Sage Publications.
- K Rani. (2016). Perceived Social Support and Psychological Well-Being: Testing the Unique Association and Gender Differences among Young Working Adults. *International Journal of Indian Psychology* 3 (2), DOI: 10.25215/0302.065, DIP: 18.01.065/20160302.
- Kendler, K. S., Myers, J., & Prescott, C. A. (2005). Sex differences in the relationship between social support and risk for major depression: A longitudinal study of opposite-sex twin pairs. *Am J Psychiatrist*, 162, 250-256.
- Kulik, J. A., & Mahler, H. I. M. (1993). Emotional support as a moderator of adjustment and compliance after coronary artery bypass surgery: A longitudinal study. *Journal of Behavioral Medicine*, 16, 54–64.
- Ko HC, Wang LL, Xu YT. Understanding the different types of social support offered by audience to A-list diary-like and informative bloggers. *Cyberpsychol Behav Soc Netw*. 2013;16(3):194-9. doi:10.1089/cyber.2012.0297.
- Langford, C. P., Bowsher, J., Maloney, J. P., & Lillis, P. P. (1997). *Social support: a conceptual analysis*.

- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York: Springer.
- Nehra, R., & Kulhara, Li, Haifeng & Wang, Cong. (2021). The Relationships Among Structural Social Support, Functional Social Support, and Loneliness in Older Adults: Analysis of Regional Differences Based on a Multigroup Structural Equation Model. *Frontiers in Psychology*. 12. 10.3389/fpsyg.2021.732173.
- P., & Verma, S. K. (1998). *Manual for PGI social support questionnaire*. Varanasi: India Rupa Psychological Centre.
- Patrick, A.B, Eric C. & Thomas, V.P. (2004). Perceived stress, internal resources, and social support as determinants of mental health among young adults. *Quality of Life Research*.13(1): 161-170.
- M. Robin Dimatteo and Ron Hays, "Social Support and Serious Illness," in *Social Networks and Social Support*, ed. Benjamin Gottlieb (Beverly Hills, Calif.: Sage Publications, 1981), pp. 117-43.
- Revenson, T.A., Schiaffino, K.M., Majerovitz, S.D., & Gibofsky, A. (1991). Social support as a double-edged sword: The relation of positive and problematic support to depression among rheumatoid arthritis patients. *Social Science & Medicine*, 33(7), 807-813.
- Santiago P.H.R., Smithers, L.G., Roberts, R., & Jamieson, L. (2023). Psychometric properties of the Social Support Scale (SSS) in two Aboriginal
- Sarason, I.G., Levine, H.M., Basham, R.B., et al. (1983). Assessing social support: The Social Support Questionnaire. *Journal of Personality and Social Psychology*, 44, 127- 139.
- Santini, Z. I., Koyanagi, A., Tyrovolas, S., Mason, C., and Haro, J. M. (2015). The association between social relationships and depression: A systematic review. *J. Affect. Disord.* 175, 53–65. doi: 10.1016/j.jad.2014.12.049
- Schaefer, C., Coyne, J. C., & Lazarus, R. S. (1981). The health-related functions of social support. *Journal of Behavioral Medicine*, 4(4), 381–406. <https://doi.org/10.1007/BF00846149>
- Sharir, D., Tanasescu, M., Turbow, D., & Maman, Y. (2007). Social support and quality of life among psychiatric patients in residential homes. *International Journal of Psychosocial Rehabilitation*, 11(1), 85-90.
- Swickert, Rhonda & Rosentreter, Christina & Hittner, James & Mushrush, Jane. (2002). Extraversion, social support processes, and stress. *Personality and Individual Differences*. 32. 877-891. 10.1016/S0191-8869(01)00093-9.
- Sherbourne, C. D., and Stewart, A. L. (1991). The MOS social support survey. *Soc. Sci. Med.* 32, 705–714. doi: 10.1016/0277-9536(91)90150-B
- Terrence Davidson, M. Lenora Bowden, and Irving Feller, "Social Support and Post-Burn Adjustment," *Archives of Physical Medicine Rehabilitation* 62 (1981): 74-78;
- Thoits, P.A. (1995). Stress, coping, and social support processes: Where are we? What next? *Journal of Health and Social Behaviour*, 35, 53 – 79.
- Thoits, P. A. (2013). Self, identity, stress, and mental health. In C. S. Aneshensel, J. C. Phelan, & A. Bierman (Eds.), *Handbook of the sociology of mental health* (pp. 357–377). Dordrecht, the Netherlands: Springer Netherlands.
- Tam, Cai Lian & Lim, Swee Geok. (2009). Perceived social support, coping capability and gender differences among young adults. *Sunway Academic Journal*. 6.

- Uchino, B. N. (2004). *Social support and physical health: Understanding the health consequences of relationships*. Yale University Press.
- Valentiner, D.P., Holohan, C.J., & Moos, R.H. (1994). Social support, appraisals of event controllability, and coping: An integrative model. *Journal of Personality and Social Psychology*, 66, 1094–1102.
- Walen, H. R., & Lachman, M. E. (2000). Social Support and Strain from Partner, Family, and Friends: Costs and Benefits for Men and Women in Adulthood. *Journal of Social and Personal Relationships*, 17,1, 5-30.
- Weiner, I. B., Nezu, A. M., Nezu, C. M., & Geller, P. A. (2012). *Handbook of psychology, health psychology*. John Wiley & Sons, Incorporated.
- Whitney, C. (2010). Social supports among college students and measures of alcohol use, perceived stress, satisfaction with life, EI, and coping. *Journal of Student Wellbeing*, 4,1, 49-67.
- Wills, T. A. (1991). Social support and interpersonal relationships. In M. S. Clark (Ed.), *Prosocial behavior* (pp. 265–289). Newbury Park, CA: Sage.
- Wortman.C. B., & Conway, T.L. (1985). The role of social support in adaptation and recovery from physical illness. In S. Cohen & S.L. Syme (Eds.), *Social support and health* (pp. 281-302). New York, NY: Academic Press.
- Walen, H. R., & Lachman, M. E. (2000). Social Support and Strain from Partner, Family, and Friends: Costs and Benefits for Men and Women in Adulthood. *Journal of Social and Personal Relationships*, 17,1, 5-30
- Whitney, C. (2010). Social supports among college students and measures of alcohol use , perceived stress, satisfaction with life, EI, and coping. *Journal of Student Wellbeing*, 4,1, 49-67.
- Xiao, H.; Zhang, Y.; Kong, D.; Li, S.; Yang, N. The Effects of Social Support on Sleep Quality of Medical Staff Treating Patients with Coronavirus Disease 2019 (COVID-19) in January and February 2020 in China. *Med. Sci. Monit.* 2020, 26, e923549.
- Xu, J.; Wei, Y. Social support as a moderator of the relationship between anxiety and depression: An empirical study with adult survivors of Wenchuan earthquake. *PLoS ONE* 2013, 8, e79045