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A THEORETICAL AND METHODOLOGICAL
ANALYSIS OF SOCIAL SUPPORT,
LIFE EVENTS AND
SUBJECTIVE WELL-BEING.

A thesis presented in partial fulfillment of
the requirements for the degree of
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ABSTRACT.

This thesis presents a theoretical and methodological analysis of social support, life events and subjective well-being. Theoretical developments and conceptualizations are presented for each area along with an examination of the various measures available, many of which are found to be confounded with outcome measures. Particular attention is paid to the controversial 'buffering hypothesis' of social support. A life-span perspective for viewing life events and social support is highlighted. Methodology is discussed in terms of direct effects, additive effects and interactions. Among the studies examined problems which emerged as particularly relevant included confusing theoretical conceptualizations, confounded and inadequate measures and incomplete reporting of results. Strategies for future research methodology are recommended. These include the need for longitudinal studies and consensus as to appropriate analysis with more use being made of subjective well-being as an outcome measure. Studies would be improved by using both objective and subjective scales to measure all variables while clearly indentifying each as such. It is suggested that life events and social support should be examined in a life-span developmental context. The need for theoretical and conceptual clarity is emphasised, particularly in the area of social support where a new definition is presented. It is recommended that social support be further examined as a variable in its own right rather than as a buffer.

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CHAPTER ONE

INTRODUCTION

This thesis will examine theoretical and methodological issues in the areas of subjective well-being, life events and life event stress and social support. In recent years a large body of research has accumulated but findings have been mixed due largely to inadequate conceptualizations of theoretical issues and varied and often inappropriate methodological approaches. I will attempt to clarify some of these theoretical issues and highlight methodological shortcomings.

I began with an interest in subjective well-being and would have liked to have devoted more time and space to studies using this as an outcome variable. Unfortunately most research dealing with life event stress and social support used some form of depression or psychological distress measure as a dependent variable making a focus on subjective well-being impractical. In well-being terminology these studies can be said to have negative affect as a dependent variable - negative affect and depression are significantly correlated - about .70. Rather than discard subjective well-being from consideration because it was not often used, it is included because its utility as an outcome measure should become more obvious in the future as researchers realise the value of being able to ascertain the positive as well as negative aspects of people's mental health. Positive and negative affect behave in different ways and each is differentially correlated to other variables.

Throughout this thesis the importance of the individual's subjective evaluations is emphasised. This stance is consistent with the trend of current thinking, particularly in the areas of life events and hassles and their resultant stress. Recent examinations of social support are also tending towards more subjective evaluations. This enables improved explanations of processes involved such as how the individual perceives and uses available social support.

Methodological issues will be dealt with in some detail with relevant studies and their measures being evaluated. Competing models, particularly in the social support area, will be discussed. Social support is at present a fashionable (if controversial) subject for research. There is good cause for this. Current emphasis on community psychology and preventative measures have led to a search for factors which may be providing an individual with protection and defenses against stress. Social support research, no matter what the model adopted, is continually demonstrating the protective nature of social support in our society.

When looking at variables which play a part in determining an individual's well-being the possibilities are endless. Time and space necessitated choosing only a few but it must be acknowledged that others are equally influential. Personality variables such as hardiness, locus of control and meaning in life make a significant contribution as do factors such as physical health.

Often studied along with life events and social support is coping. Coping can be defined as something which the individual does on a cognitive and behavioural level to ameliorate the impact of stressful life events. Such a definition would seemingly make it logical to examine coping in this thesis. However I have chosen not to do so because of reasons such as that given by Folkman and Lazarus [1980] who warn against premature attempts to explore relationships between coping and adaptational outcomes, pointing out that it is all too easy to confound the process and the outcome. As will be seen later this potential confounding is not restricted to coping alone - it also occurs with other variables.

Coping processes can be seen as intertwined with other variables to the extent that it may be unnecessary to examine them separately. An individual's unique style of coping with life will, in part, incorporate his/her perception of and use of available social support. It will also influence perceptions and impact of life events.

Implicit in this thesis then is the idea that when life events, stress and social support are being discussed coping is an integral part of these variables. Dependent variables such as subjective well-being will in part reflect the success of the individual's coping processes.

CHAPTER TWO

SUBJECTIVE WELLBEING

History and Definitions.

The theory and measurement of subjective well-being had its impetus from two sources. One was the broader social indicators movement which originally focused on objective indicators - such measurable units as housing conditions, cars, television sets owned and income levels. In the late 1960's and early 1970's this movement developed sideways as researchers began to examine not only how people lived but how satisfied they were with their lives. It became clear that quality of life is not only defined by physical variables but how people perceive their lives and conditions. From there it was a short step to the concentration on measurement of perceptions of well-being that define the quality of people's lives. [Andrews & Withey, 1976].

The other source was the age-old question of what Bradburn [1969] calls the "happiness problem." Since Aristotle people have known that happiness is a desirable state but have had difficulty with the definition and measurement of the concept. Happiness has been examined and debated as a religious, political and economic problem but only really in the 20th century has happiness been viewed as a concern for research. In the past happiness has been defined in terms of a normative framework such as a person possessing or fulfilling desirable qualities. However, Bradburn [1969] sees happiness as affect balance - or as experiencing more positive than negative affect. His definition of psychological well-being incorporates the emotional components more

than do definitions arising from the life satisfaction literature. Researchers of subjective well-being have therefore concentrated on two components - life satisfaction and affect balance.

Rather than actually defining subjective well-being, Deiner [1984] talks of the three hallmarks of the area. The first is its subjective nature - it is well-being as perceived by the individual and not as measured by some external criteria. The second hall-mark is the fact that subjective well-being includes positive as well as negative measures. The third is that the measures usually include a global assessment of a person's life.

Subjective well-being then is an individual's perception of how he or she feels about life - as separate and distinct from the objective circumstances which may or may not influence these perceptions.

Measures and Dimensions of Subjective Well-being.

The influence of the methods used to measure well-being on the dimensions which emerge requires that these two issues be dealt with together.

Scales designed to measure subjective well-being fall into two categories - single-item measures and multi-item scales.

Single-item measures are most often used along with other measures that may or may not be related to well-being. A good example is Andrews and Withey's [1976] Delighted/Terrible scale which asks people: "How do you feel about how happy you are?" and requires a response on a seven-point scale from Delighted to Terrible. Andrews and Withey, Deiner [1984] and others report evidence for good reliability and validity of this measure despite highlighting a number of problems with single-item measures. For example these measures tend to skew towards the positive and they may not be sensitive enough to variations in well-being. They are however influenced by satisfaction, positive affect and negative affect, - although no separate information on these components can be obtained from a single item scale. Deiner concludes that the good reliability and validity of these scales makes them an adequate, if brief, measure of global well-being.

Diener's [1984] review of the area includes information on several multi-item scales available, most of which have not had sufficient empirical examination. Two scales which have already been subjected to close scrutiny are Bradburn's [1969] Affect Balance Scale and the Affectometer 2 [Kammann & Flett, 1983]. Bradburn's large-scale research on the Affect Balance Scale found that it was the best predictor of an individual's current level of well-being. In addition it correlated well with other measures of life satisfaction and happiness. Other studies such as Harding's [1982] evaluation of the scale in Britain, have found support for Bradburn's claims.

Kammann and Flett's [1983] Affectometer 2 is a 40-item scale which, like the Affect Balance Scale, uses the time-frame of "the last few weeks." Also in common with Bradburn's scale the Affectometer 2 measures positive and negative affect separately and obtains what is called a net score by subtracting negative from positive affect. Like the Affect Balance Scale, the validity of the Affectometer 2 is high, yielding correlations in the range of .68 to .75 with other measures. Kammann and Flett [1983] also claim high correlations with daily mood scores.

These two scales, Bradburn's Affect Balance Scale and Kammann and Flett's Affectometer 2 are at the heart of a controversy surrounding the relationship between positive and negative affect.

There has been considerable debate in the last few years over the components and dimensions of subjective well-being. Bradburn [1969] saw well-being as being the difference between positive and negative affect. His Affect Balance Scale therefore is made up of 10 items - five measuring positive affect and five measuring negative affect. Bradburn views positive and negative affect as independent components of well-being e.g. high positive affect does not necessarily accompany low negative affect. Research showed that positive and negative affect were differentially correlated with other variables. Positive affect was correlated significantly with such things as social participation, income and education while negative affect correlated significantly with physical symptoms of ill-health, depression and anxiety [Bradburn, 1969]. These last findings have been well-supported [Harding, 1982; Andrews and Withey, 1976; Warr, Barter & Brownbridge, 1983].

However, other research has found results which support the notion that positive and negative affect are correlated, rather than being independent. Kammann, Christie, Irwin and Dixon, [1979]; Kammann, Farry and Herbison, [1982] and Kammann and Flett [1983] consistently found positive and negative affect to be inversely correlated - as high as $-.66$.

Attempts to explain these discrepant findings have included an examination of:

- [1] Response formats e.g. yes/no versus graded responses.
- [2] Time span e.g. whether respondents reflect over the last few weeks or over a longer period of time.
- [3] Distinctions between frequency and intensity of positive and negative affect.

These three issues are inter-related and make it difficult to come to any clear-cut conclusions.

The format of Bradburn's [1969] measure has been cited as a possible reason for the findings of statistical independence. Respondents are asked whether, in the last few weeks, they have experienced a feeling and must reply 'yes' or 'no'. Kammann and Flett [1983] and Kammann, Farry and Herbison [1984] contend that this response mode may be the reason statistical independence is found.

Independence disappears using Kammann and Flett's [1983] Affectometer 2 which requires responses using a graded format. It asks respondents to indicate how often over the last few weeks a feeling was present - not at all / occasionally / some of the time / often / all of the time.

Warr, Barter and Brownbridge [1983] used Bradburn's response mode with new sets of items and found negative and positive affect to be statistically independent. However when using a format requiring graded responses they found results similar to those of Kammann, that is the two scales were now found to be inter-correlated $-.54$.

Deiner [1984] examined the problem from a slightly different perspective. It is proposed that at particular moments in time positive and negative affect are related - each type of affect tends to suppress the other. This suppression is less likely with graded responses, suggesting that the inverse relationships found are an artifact of the frequency-type measures.

Deiner, Larsen, Levine and Emmons [1983] suggest that studies using a longer time span confuse or blur frequency of positive affect (the amount of time in which positive affect dominates over negative affect) and the intensity with which affect is experienced. The correlations across persons between the intensities of positive and negative affect were found to be positive - at least $.70$ and were reliable over time. Deiner et al. demonstrated that with intensity partialled out (i.e. frequency left in) strong inverse correlations were found between positive and negative affect. These authors suggest no correlation between frequency and intensity of affective experience, and it follows (they say) that the resulting influence of the two, over time, is to make positive and negative affect independent. Scales measuring frequency will find correlations and scales measuring mean levels of affect (both frequency and intensity) will find independence.

It is unclear which of the formulations in the preceding section is the most appropriate. What does emerge strongly is the inter-related nature of methodological and theoretical issues. The structure of well-being appears related to the methods used to measure it. In the light of this it does not seem reasonable to accept or reject a theoretical argument about the dimensions of well-being without being aware of the methodological premise on which it is based. On the other hand the methodology should be appropriate for the model of well-being in question.

Despite Kammann et al.'s [1984] argument for a uni-dimensional bipolar construct of well-being, factor analysis of the Affectometer [McFarland, 1984] has shown that it actually measures three bipolar dimensions of well-being. These dimensions are positive affect, negative affect and a less important factor called social-loving feelings.

The question of the dimensions of subjective well-being was also examined by Viet and Ware [1983]. They developed the Mental Health Inventory, based on Dupay's General Well-being Schedule. Partly as a result of their psychometric evaluation of it they present evidence in favour of a single mental health factor which can be sub-divided into psychological distress and psychological well-being. "These are in fact, positive and negative affect with new names" [Chamberlain, 1984].

One of the interesting features of Viet and Ware's [1983] Mental Health Inventory is the breaking down into lower order factors. Of special relevance to this thesis is the inclusion of the social support (emotional ties) component in psychological well-being. Viet and Ware state that the hierarchical model derived from their psychometric

evaluation provides confirmation for the distinct and separate nature of psychological well-being and psychological distress (positive and negative affect).

Tanaka and Huba [1984] took Viet and Ware's analysis a step further and using confirmatory factor analysis, examined whether or not the data supported separable distress and positive well-being factors as indicators of a general third order Mental Health construct. They found that Viet and Ware's theoretical formulation was indeed consistent with the data.

Viet and Ware's [1983] measure and model have been soundly criticised by Kammann [1983] who feels that their 'mental health' concept is merely 'subjective well-being' with its component dimensions of positive and negative affect. Kammann points to likely faults in their methodology, including their choice of items from Dupay's original scale. Given the significance mentioned earlier of the time-frame in well-being studies it is important to evaluate the questionnaire format of Viet and Ware's scale. An examination of the actual items shows that they asked respondents to look back over the last month and that they did in fact use a graded response format thereby failing to separate frequency and intensity data.

It is not surprising therefore, that Viet and Ware's hierarchical model highlights and confirms distinct and separate positive and negative components of well-being, although these dimensions are correlated. The model is also consistent with the high correlations obtained (as stated earlier) between negative affect and depression, anxiety and other symptoms of psychological distress.

The Cognitive Dimension of Well-being.

The previous section only dealt with the affective dimensions of subjective well-being, but current evidence supports a cognitive evaluative dimension as well [Chamberlain, 1984]. This cognitive component may be what Andrews and Withey [1976] identified as life satisfaction. It involves an individual's appraisal of his or her life and situation judged relative to some standard or situation which the individual may have expected, hoped for or seen in other's lives. McKennell and Andrews [1983] point out that affect, unlike the cognitive dimension is an immediate feeling state that is not anchored to the same extent to cognitive frames of reference.

There is little available research looking specifically at the cognitive dimension and its relationship to the affective dimensions of well-being. However a number of studies provide indirect support for the existence of this dimension.

In 1974 Beiser factor analysed the measures used in his study and found three main factors - negative affect, pleasureable involvement (which he said was similar to positive affect) and a third factor which he called long term satisfaction. He labelled this factor an affective dimension and states that it is related to emotional and family ties. Judged in the light of more recent research this factor is probably closer to a cognitive evaluation rather than an affective dimension.

Bryant and Veroff [1982] examined the structure of psychological well-being using data gathered from large surveys 19 years apart. They found a stable three-factor structure - stable across sex and time. As well as the positive and negative affect dimensions they found a distinct factor of perceived competence in handling one's life.

McKinnell and Andrews [1980] examined models to ascertain how cognition and affect operate in perceptions of well-being. They evaluated models that included cognition and models that did not. They found that models that contained the cognition factor fitted the data better than the models that did not. McKinnell and Andrews [1983] conclude that in making global assessments of life quality "respondents weigh directly both affective and cognitive considerations, so that the final assessment is a compound of the two."

Subjective Well-Being and Other Variables

A distinction is often and necessarily made in the literature between objective life conditions (such as income, housing, employment, education, sex and intelligence) and subjective satisfaction judgements with the various domains.

Deiner [1984] points out that satisfaction judgements tend to correlate more highly with subjective well-being than do objective conditions. However this can be seen in part as a result of method variance shared with subjective judgements and subjective well-being and because objective conditions are usually mediated by subjective processes.

Subjective well-being appears to be unrelated to psychological maturity [McCrae & Costa, 1983], to sex [Andrews & Withey, 1976], or to intelligence [Deiner, 1984]. However differences in subjective well-being can be predicted by some personality factors e.g. extroversion and neuroticism, locus of control and self-esteem [Costa & McCrae, 1980]. Although personality factors, as such, are beyond the bounds of this report, it should be kept in mind that they can and do influence other areas such as social support and coping.

Deiner's [1984] summary of the literature reports that most studies find positive relationships between income and subjective well-being, but the data is confusing. For example although wealthier people tend to be happier than poorer people, as the overall level of income within a country rises the overall level of happiness does not show a corresponding rise. Deiner [1984] posits a number of possible reasons for this and concludes that, "it is not the purchasing power or mean levels of income that are important, but the overall distribution of income, including the range, that influences subjective well-being" [p.31]. The cognitive dimension may be important here as individuals cognitively appraise their situation relative to that of others.

An important predictor of lowered subjective well-being is unemployment. Even beyond financial factors, being unemployed has a devastating effect on well-being [Campbell, Converse & Rogers, 1976; Bradburn, 1969; Warr, 1984]. Unemployment is to some extent a proxy variable which cannot completely account for relationships in its own right. Along with it go other factors such as financial strains, loss of status, lack of time structure and reduced social contacts which are all contributing to the overall effect of unemployment on well-being.

Marital status is a particularly good predictor of subjective well-being. A recent article by Kammann [1983] found that the higher levels of well-being reported by married people as opposed to any other group are consistent between N.Z. and U.S. samples. Tied in to marital status are other variables, such as social support, which are too important to be ignored. Marital status, like unemployment, is a proxy variable. It is not merely the fact of being married which is accounting for well-being levels.

Deiner [1984] reports positive effects on well-being for social contacts and friendship. As will be discussed in some detail later these variables, as well as marital status, can be said to fall under the general umbrella of social support and will reflect similar positive benefits.

Also to be examined in more detail in this thesis are overall life events which show a small relationship to subjective well-being [Deiner, 1984]. Events seen as beneficial relate to positive affect and bad events relate to negative affect [Zautra & Reich, 1980]. The work of Lazarus and his colleagues has demonstrated the relevance of examining life events within a shorter time-frame - daily hassles. Hassles have been shown to have a more significant relationship with health than do life events on a larger scale [DeLongis, Coyne, Dakoff, Folkman & Lazarus, 1982].

Subjective well-being is probably determined by a large number of factors, and may equally well be a causal variable. For example it may be difficult to know if social contact is the result of or the cause of well-being. The difficulty is often exaggerated when components of subjective well-being are used as independent variables as well as

being built into the dependent variable. This confounding is reasonably common in the literature. Deiner [1984] pointed out the difficulties involved in attempting to separate out the effects of variables which are themselves inter-correlated: "One can examine the unique variance predicted by each variable, but the common variance is often the largest portion of variance accounted for" [p.49].

Deiner [1984] discussed the need for more adequate theorizing and methodology in the area. There are adequate instruments available to enable subjective well-being to be used as a dependent variable. What remains unclear is how to be sure that measures of subjective well-being are not measuring aspects of the independent variable as well. Just as important are attempts to devise ways to properly measure and interpret the effects of other variables on subjective well-being.

It can be seen then that subjective well-being is a useful outcome measure which has been theoretically well-defined. The positive and negative dimensions correlate differentially to other variables and research has supported the reliability and validity of these dimensions. The cognitive dimension plays an important part in global assessments of life satisfaction. Available measures of subjective well-being are sound and should be more extensively used as outcome measures in the future because of their ability to provide information about positive affect as well as negative affect.
