

# **STUDY ON THE SIGNIFICANCE OF AGEING: DWELLING OF SOCIAL SUPPORT AND SOCIO-ECONOMIC STATUS**

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## **ABSTRACT**

The present study aims at exploring the socioeconomic status and social support among the elderly population of India. It has been long proposed that Money can not fulfill everything. Everyone heard this notion since very long. But the present study reveals something different from this belief. The current research exploited the unique opportunity to understand the relationship between socio-economic status and social support among older adults. Socio-economic status of an individual, group, or a society plays a crucial role in one's life. The data was collected through the random sampling method. This research reveals that financial status of an individual attracts family members and friends. But, it does not attract significant persons in our life such as life partners. The sample comprised 96 old-aged participants. In order to assess the social support of the old aged

Multidimensional Scale of Perceived Social Support by Zimet, Dahlem, Zimet & Farley (1988) was used. ANOVA was used as a statistical method. The finding reveals that there is a significant difference between socio-economic status and social support. Critically, it was found that the person who lies in the upper class attracts more social support from their family and friends than others. Findings provide important and novel insights related to the current factuality of society

*Keywords:* social support, older adults, socio-economic status, money.

## **INTRODUCTION**

India is considered the largest democracy in the world having 28 States and 8 Union Territories. It is the second-largest populous country after China and is facing a transitional phase of change. The changing demographic scenario and population projections indicate that the growth rate of Indian older adults is comparatively faster than the other areas of the World. It also indicates that the rate of mortality in India is on a decline. At present, the population of older adults in the country is increasing at a fast pace.

Ageing is a universal process and it affects every individual in the world. It can be considered as a byproduct of the demographic transition ie, the change from high fertility to low fertility and high mortality to low mortality. The absolute and relative increase in the number of elderly people is an important demographic transition. It is seen more evident in the countries like India where the population of old age people is growing rapidly. It is expected that the old aged population will increase by 12.5 per cent by 2026 and 20 per cent by 2050 respectively. Ageing is defined as the change of the human organism after the ages of physical maturity, accompanied by a regular transformation in appearance, social role, behaviour and experience.

We live in the era of population ageing. Population ageing has progressed furthest in developed countries but developing countries have also begun to experience a significant increment in their proportion of elderly people (Weil DN. Population aging). India has also come across the population ageing phenomenon too (Gavrilov et al., 2003).

It has been noticed that the growth rate of older adults in India is comparatively faster than in other parts of the World (aged 60 and above). In 1991, the population of this group of society was 56.7 million, which got doubled in 2011 i.e. 103 million (chandramouli, 2011) and is anticipated to triple in the next four decades i.e., 316 million (James et al., 2011).

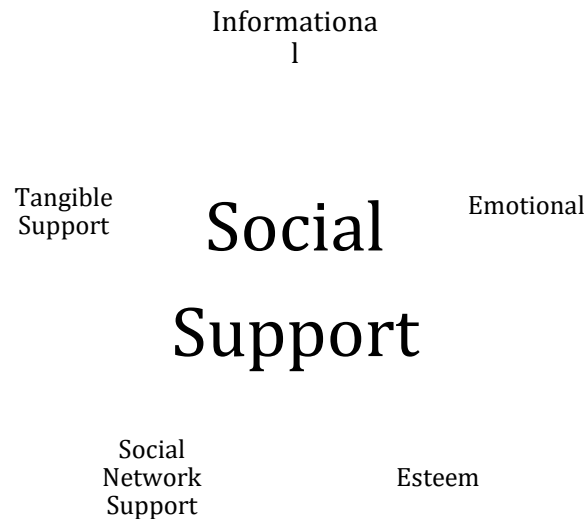
## **SOCIAL SUPPORT**

Social support is the perception and actuality that one is cared for, has assistance available from other people, and is a part of the supportive social network. It is a kind of perception that someone cares about. This is a supportive social network that turn in time of need. Social support is considered as the individual in the family and social settings to whom the older adults can relate socially and emotionally (Jamuna and Ramamurthy, 1991). It is a key component of a solid relationship that comes in many forms. Good social support can help an individual to deal with stress, isolation and loneliness. It helps in enhancing the quality of life and provides a buffer against adverse life events. It can be emotional, instrumental, or informational. Emotional support comes in the form of love, care, and trust. Instrumental support comes in the form of tangible services such as money. And, informational support comes as a piece of advice or suggestions. These supports are important for our mental health, or to cope with stress and major life changes.

Social support is defined as any information leading an individual to trust that he is cared for, loved, and is a respected part of a network of mutual obligation. It is one of the essential factors that plays

a major role in maintaining well-being in the aged tenure. It is a moderator and prolocutor of stressful life episodes. Lack of social support in different manner results in both physical and mental health problems (Cassel, 1976). The social relations integral to an active environment are significant factors of subjective well-being including perceived satisfaction in life in older adults (McAuley et al., 2000). Social support has a significant prognosticator of mental health outcomes (McCulloch., 1995). Elderly who had lost a partner experienced lower self-esteem, resulting in higher emotional and social loneliness, leading to the perception of less support (Van Baarsen et al.,2002). It appears to play an important role in elaborating variations in subjective functioning. Individuals who are living alone or only with a spouse, particularly the elderly, resulted to be at greater risk for disability problems. They should encounter specific attention from preventive programs in the society or community (Koukouli et al., 2002). Social support, self-esteem, and optimism were all positively correlated with the positive health practices; and social support was positively related to self-esteem and optimism (McNicholas, 2002). Social support in a broad sense, refers to any process through which social relations might promote health and well-being. It refers to the social resources that an individual perceives to be available or that are actually provided to them by non-professionals in the context of both formal support groups (Cohen et al., 2000). Definitions of social support are divided into two categories. One is the objective social support which shows what form of support people have actually received or report to have received. The other is a subjective perception, which captures an individual's beliefs about the available support, and which is more persistently and more strongly related to health and well-being than objective social support (Berkman et al., 2000).

Cutrona and Suhr (1992) define a social support category system, which involves five general categories of social support: (a) informational, (b) emotional, (c) esteem, (d) social network support, and (e) tangible support.



**FIGURE 1**

Various dimensions of social support

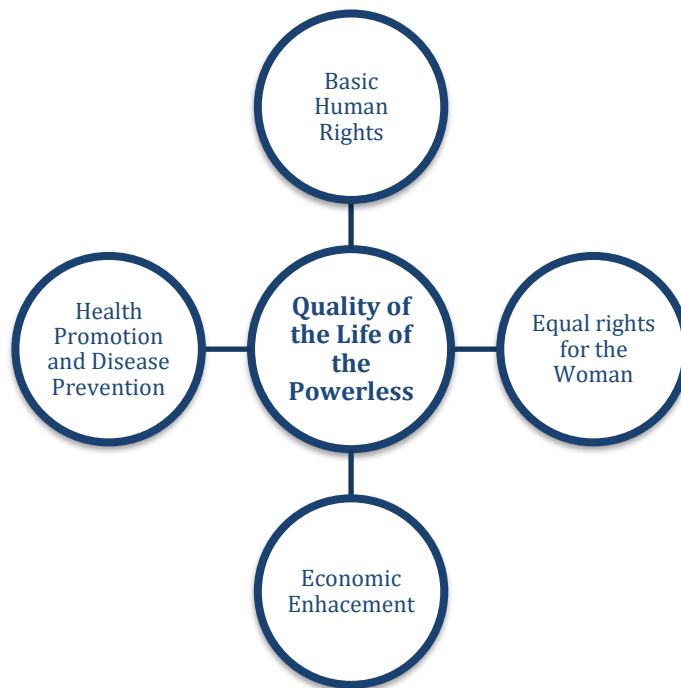
### **SOCIOECONOMIC LIFE**

Focusing on the elderly, social support is considered the main source of personal care and well-being, and the importance of social support becomes more critical and amplified by the various problems connected to an ageing population (Litwin et al., 2000). Moreover, Old age is also associated with lower levels of income ( Berkman et al., 1998). It also leads to a decrease in social networks and social support depending on the socio-economic position (Weyers et al., 2008). Lack

of informal support can result in a serious impact on health including the quality of life of low-income elderly women living alone, resulting in premature institutionalization (Ryser et al., 2011).

On the prevalence of elder abuse and neglect in various countries, a systematic review of literature has revealed that abuse rates ranging is between 3.2 to 27.5% among the general population (Cooper et al., 2008). Greater levels of social support can manage and decrease depression in old age as a risk component for elder abuse, mainly in women (Dong et al., 2010).

Kar, Catherine, and Kirstin (1999) have focused on four major domains or aspects of life that influence the overall quality of life of the powerless. The four main domains are basic human rights, equal rights for women, economic enhancement, and health promotion including disease prevention.



**FIGURE 2**

Domains of Quality of life of the Powerless

Research done by Anuradha (1991) shows that the elderly feel that they are included in the social interactions and many times not given sufficient attention which results to the feeling of unworthiness or unwanted. For instance, a study by Gallicchio et al.(2007) showed that poor social networks are associated with worse physical health and mental well-being. Other factors such as living in poor housing, inadequate finances, and inadequate social relationships were also important factors leading to deterioration in Quality of Life.

In 1905, a study on the physical and psychological health benefits of social support was published. Dr. Joseph Pratt, a Boston internist, assembled a group of tuberculosis patients to teach them about hygiene and its relationship to their disease. This “support group” demonstrated the importance of the significance of psychological support in physical and mental health. In fact, social support is now proven to be a literal lifesaver. People who have intimate relationships with friends, relatives, coworkers, or other support networks are less likely to suffer from illness or die prematurely (House, Landis, and Umberson 1988). Hundreds of researches show that social support has a positive impact on mental and physical health (Cohen 2004; Uchino 2004). But it may have indirect effects on health, such as improved mental health, reduced stress, or the development of a sense of meaning (Cohen 2004; Thoits 1995). Supportive social relations can reduce heart rate, lower blood pressure, and stress hormones, and reduce undesirable arousal that leads to risky behavior (Uchino 2006). It can protect older people from the adverse effects of age-related challenges such as the loss of loved ones, interpersonal disputes, and even extraordinary incidents, like natural disasters, and experiencing mental disturbances (Hatfield et al., 2013; Hsu & Tung, 2010; Taylor & Lynch, 2004). In fact, social support is just like a treatment tool that can enable older people to interpret stressful situations and reduce the pathological effects that are associated with normal ageing deterioration (Chou et al., 2001; Gow et al., 2007).

Individuals' social networking depends largely on their social and economic status, as well as some demographic factors such as marital status, household size, and working conditions (Fakiolas, 2012). Socio-economic status refers to the social standing or a class of an individual or group. It affects the overall human functioning which includes our physical and mental health. People with lower socioeconomic status cannot get the same stress-relieving benefits from their social support as those with higher socioeconomic status (Riley & Eckenrode, 1986). They may receive lower-quality support from their near and dear ones than those who are of higher socio-economic status (Belle, 1982, 1990; Krause & Borawski-Clark, 1995), and even don't try to seek help during periods of high stress (Krause, 1997). Their social relationships are weaker compared to those who are of higher socioeconomic status (Li and Wang, 2020). People who are socially deprived are more likely to complain about a lack of social networks and resources (Weyers, et. al., 2008). Various studies on adolescents also prove the same.

Considering the increase in the elderly population in India and worldwide, there requires a need for similar studies on a larger scale including different regions and environmental setups with varied parameters. It will help to understand the change and possible differences in the dynamics of ageing. It will also lead to improving the living condition of the elderly. The purpose of the present study is to find out the importance of socioeconomic status in an elderly's life. The hypothesis was that there would be a significant relationship between socio-economic status and social support among older people.



## **METHOD**

### **Participants**

We recruited participants from the one residing in India. All the individuals more than 60 years were eligible to participate. We included 110 participants, from which we excluded those who did not provide a thoughtful and complete questionnaire (N=10) and failed to complete the attention check task (N=4). Following exclusion, 96 participants (50 women, 46 men) with a mean age of 66.80. Out of this 32 participants belonged to lower socio-economic backgrounds, 33 from middle and 31 from the upper level. The total of 96 the elderly population were assessed for socioeconomic status and social support. The participants with an income is 2.5 lakh INR per annum and below are considered in lower socio-economic backgrounds, whose income is approximate 6-8 lakh INR per annum and are considered in middle socio-economic background, and whose income are more than 8 lakh are considered as upper level in socio-economic background.

### **Procedure**

Participants completed the rapport establishing task provided by the author and were not restricted by the amount of time that they had while completing the questionnaire. We provided participants with the information about the study and asked them to complete the questionnaire. The participants were randomly allocated to read the questionnaire. The sampling technique employed was purposive in nature and data was collected with the pre-tested questionnaire

### **Measures**

Participants completed the Multidimensional Scale of Perceived Social Support (MSPSS) by Dahlem, Zimet & Farley (1988). This scale is a multidimensional tool that consists of 12- item questionnaire. They are used as a brief measure of satisfaction with social support which assesses both the perceived availability and adequacy of emotional and instrumental social support involving three dimensions relating to the source of support. Perceived social support from three perspectives: friends, family, and significant others (near and dear ones) are measured from this scale. The responses are given on a 7-point Likert-type scale, ranging from 1 = very strongly disagree to 7 = very strongly agree (Zimet et al., 1988). The reliability of the original scale was .88 as reported by its original authors. Respondents with MSPSS mean scores <3, between 3 to 5 and >5 were considered to be perceived as low, moderate, and high support respectively.

## **RESULTS**

IBM SPSS 20 software is used to represent the data interpretations. Descriptive statistics provided a check for the distribution of data into three groups, the mean and standard deviation of each group. In order to analyze the demographic variables, descriptive statistics were used. ANOVA test was provided to check the significant differences between the three groups. Post Hoc and Mean plots show a clear picture of the relationship between socio-economic status and social support among older people. Overall the participants reported a significant relationship between socioeconomic status and social support.

### **Descriptive Statistics and ANOVA**

***Table 1:** Mean, standard deviation, and ANOVA test of different type of socio-economic status (upper class, middle class, lower class) on the three dimensions of social support.*

		<b>N</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>Sig.</b>
<b>Social support of Significant other</b>	Upper Class	31	5.5474	.94511	
	Middle Class	33	4.6924	1.28295	.023
	Lower Class	32	5.0781	1.37582	
<b>Social support of Family</b>	Upper Class	31	5.5210	.93397	
	Middle Class	33	4.9545	.97519	.006
	Lower Class	32	4.6563	1.23907	
<b>Social support of Friends</b>	Upper Class	31	5.2565	1.09291	
	Middle Class	33	4.5348	1.32603	.033
	Lower Class	32	4.5156	1.33643	
<b>Total of Social of support</b>	Upper Class	31	5.4584	.86897	
	Middle Class	33	4.6509	.89430	.001
	Lower Class	32	4.7478	1.01070	

**Post Hoc Analysis**

**Table 2:** Posthoc comparision using Tukay's HSD. Mean differences shown. \*shows the mean differences is significant at the 0.05 level.

	Upper class (U)	Middle class (M)	Lower class (L)
<b>Social support of significant others</b>			
Upper class (U)	1	.85500*	.46929
Middle class (M)		1	-.38570
Lower class (L)			1
<b>Social support of Family</b>			
Upper class (U)	1	.56642	.86472*
Middle class (M)		1	.29830
Lower class (L)			1
<b>Social support of Friends</b>			
Upper class (U)	1	.72160	.74083
Middle class (M)		1	.01922
Lower class (L)			1
<b>Total</b>			
Upper class (U)	1	.80748*	.71057*
Middle class (M)		1	-.09690
Lower class (L)			1

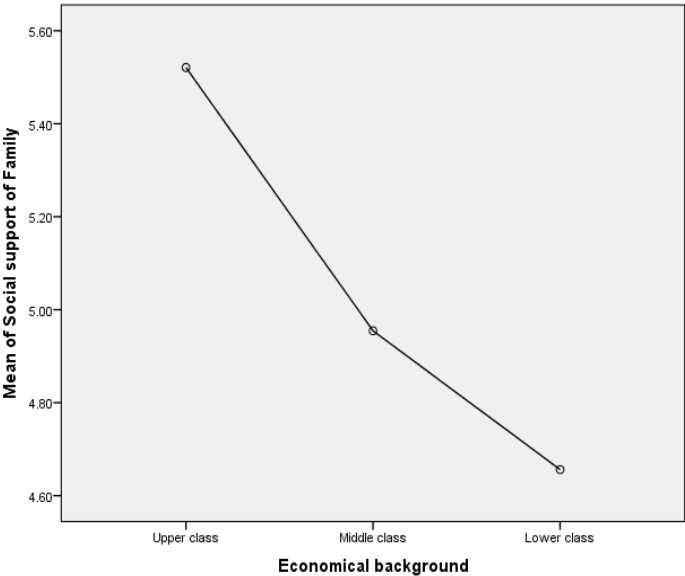
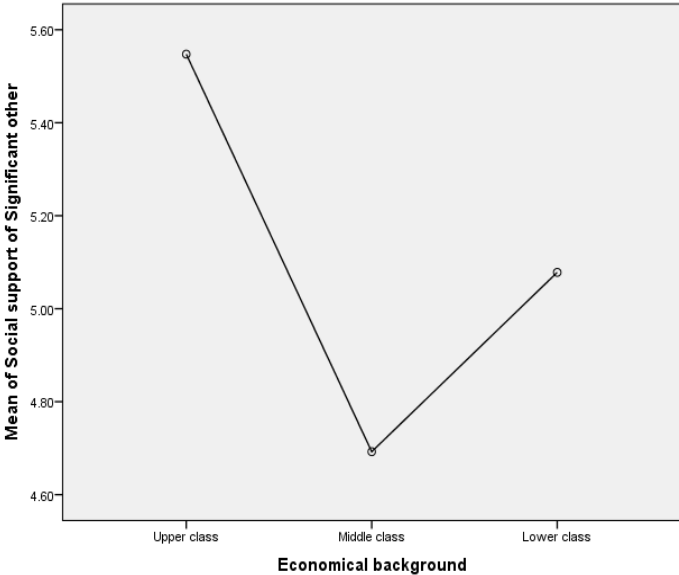
**Mean Plots**

**Social Support of Significant Others**

**Social Support of Family**

(a)

(b)

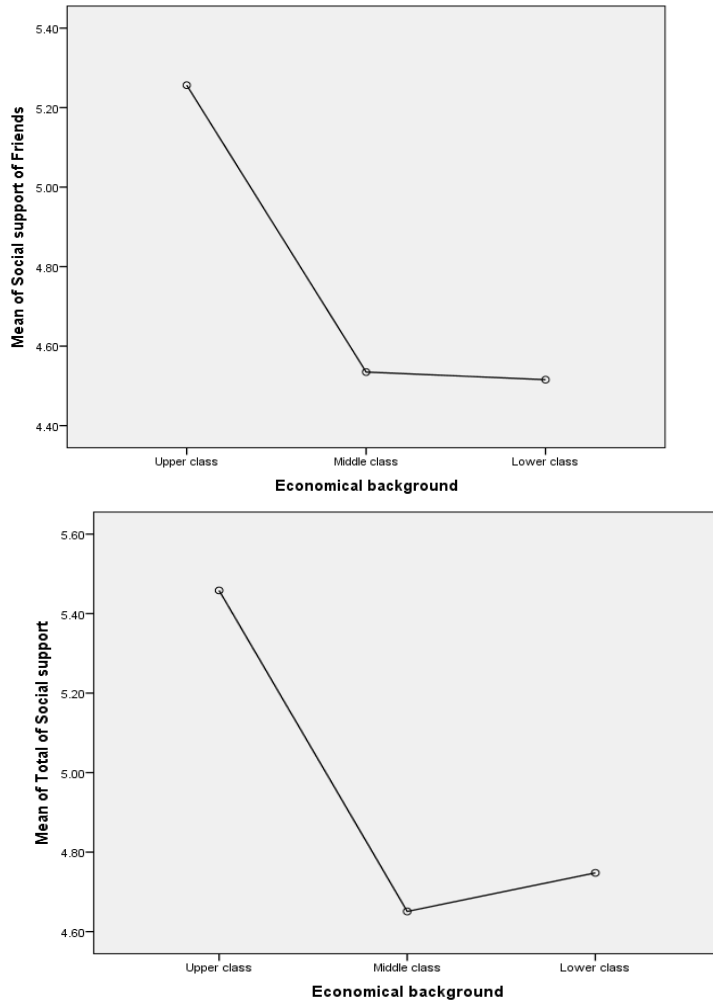


**Social Support of Friends**

**Total of Social Support**

(c)

(d)



**FIGURE 3**

Plot of cell means showing the effect of socioeconomic status and social support of significant other (3a), social support of family (3b), social support of friend (3c) and total social support among the participants.

A Result of the descriptive analysis reveals that on the dimension of *Social Support of Significant Others*, **upper class** old aged have scored the highest mean= 5.55 in comparison to the middle class and lower class 4.69, & 5.07 respectively (see Graph a) and the significant value is **.023** ( $p < 0.05$ ) (see table 1). Similarly, on the dimension of *Social Support of Family*, **upper class** old aged have

scored the highest mean= 5.52 in comparison to the middle class and lower class 4.95, & 4.66 respectively (see Graph b) and the significant value is **.006** ( $p<0.01$ ) (see table 1). On the dimension of *Social Support of Friends*, **upper class** old aged have scored the highest mean= 5.26 in comparison to the middle class and lower class 4.53, & 4.52 respectively (see Graph c), and the significant value is **.033** ( $p<0.05$ ) (see table 1). It indicates that among the economical background, the upper class attracts more social support from their family, friends, and near and dear ones than other economical backgrounds. Results of *Total Social Support* reveal the same thing. On the total score, **upper class** old aged have scored the highest mean= 5.46 in comparison to the middle class and lower class 4.65, & 4.75 respectively (see Graph d) and the significant value is 0.001 (see table 1).

The post hoc tests allow researchers to locate the specific differences among the variables. It was done to compare the group mean and to analyze the result of our experimental data. The test clearly shows the significant difference between socioeconomic status and social support (see table 2).

## DISCUSSION

In this study, we found that there was a significant relationship between socioeconomic status and social support. It is concluded that as upper class receives more social support from family and friends. The middle class receives the least social support and the lower class gets the social support of significant others. It shows the clear about the society that social support is provided to the upper class who are more economically stable. It is also revealed that the middle class is not provided with social support. Even the lower class does not receive social support except under significant other. They get social support only from those who are significant in their life and can be due to various

other reasons. We conclude that there is an important role of socioeconomic status in providing social support among the older adult population.

The development of social support among the older adults is important as it helps to reduce stress, decrease anxiety and depression, and reduce the risk of physical health concerns. Social interaction is better for our mental health as it can lighten your mood and make you feel happier. Meaningful interaction and a feeling of connectedness can lead to an individual's happiness. It also promotes a sense of security, belonging, and a sense of safety. Allowing oneself to confide in others and let them confide in you makes one feel worth living.

The results of the present study are supported by the previous research. Belle (1982, 1990), Riley & Eckenrode, (1986), Krause & Borawski-Clark, 1995), Krause (1997), Weyers, et. al., (2008), Fakiolas, (2012), and Li and Wang (2020) found that lower socioeconomic status does not get proper social support compared to those with higher socioeconomic status. But most of the studies are done on the population of youth. A similar research reveals the similar result for old aged. The hypothesis was that there will be significant relationship between socio-economic status and social support is proved here. This study was limited by a small sample size and can be further done over a large scale population concerning more important variables significant to older adults.

## **CONCLUSIONS**

This research is revealing a fact about society. This research concluded that social support from family and friends comes from seeing money! Whereas, the social support of significant others doesn't come by seeing money only. The results show that lower-class people get more social support; from people who are significant in their life, when compared to the middle class. The findings gave the insight to understand what type of individual gains more social support. This



research is very helpful to define the attitude of individuals about one's financial condition. The conclusion of the study is relevant for psychologists, educators, trainers, parents, guides, and counselors. They all can understand with the help of this study, that there is a need to change the perspective about money. They all have to focus to make individual more sensitive and help people provide social support by not seeing their financial status, rather than focusing on the positive intentions. There is a need to teach moral values, and empathy toward others without seeing their financial condition. When we give of ourselves and expect something in return, it's a transaction, not a kind gesture. Providing social support or helping others makes one feel good. It is possible that helping others does more for the happiness of the person helping than the person who receives the help.

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#### **CONFLICT OF INTEREST**

All authors declare no conflict of interest.

#### **AUTHOR CONTRIBUTION**

**Richa Chaudhary:** conceptualization, data curation, writing- original draft, review & editing, methodology, result, discussion and conclusion.

**Tamanna Gupta:** literature reviewing and editing.

**Neelam Pandey:** investigating, conceptualization, supervision, guiding.

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