

## Informal Support as an Influential Factor in Elderly Women's Health: The Importance of Same-Sex Friendship in US

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### ABSTRACT

It is known that the role of informal support for elderly women is critical to their physical and mental health, adjustment in old age, and their overall life satisfaction.

Elderly women's situation such as social losses, widowhood, living alone, and geographic relocation etc. may result in a need for more informal supports for elderly women's health than ever before. Particularly, women's same-sex friendships were rated higher for overall quality, intimacy, enjoyment, and nurturance.

Unlike a generally accepted notion that later life for women is a time of isolation and loneliness, elderly women tend to maintain and reestablish their friendship regardless their marital status and living situation. Although studies on informal support for elderly women were inconclusive in many ways, elderly women's friendship tends to be stable despite of changing health status and life events. The relative importance between daughters

and friends was also controversial. This study suggests that more research with reliable measurements is necessary for the practical prevention and intervention program of elderly women's health on this issue.

*Key words* : elderly women's health, informal support, influential factor, same-sex friendship

## I. Introduction

Numerous studies have reported that the role of informal support for elderly women is critical to their physical and mental health (Cohen et al. 1985; Asher 1984), adjustment in old age (Costa et al. 1981; Kasper 1988), and their overall life satisfaction (Reinhardt et al. 1989; Lewttes 1989).

Due to women's longer longevity and lower remarriage rates than men (Berkman et al. 1979; Cutler et al. 1975), it has been generally accepted that to be old is to be female (Reinhardt et al. 1989; Magaziner et al. 1989). Women in their later life commonly experience many social losses and life changes such as widowhood, declining health, decreasing income as a result of retirement and geographic relocation (Adams 1987; Field et al. 1985; Lewttes 1989). In addition, higher proportions of the elderly

widows tend to live alone and the women who live alone are more often childless (Magaziner et al. 1989; Essex et al. 1987). Those women who live alone are particularly vulnerable to health problems due to the effects of isolation (Magaziner et al. 1989; Bishop 1986). If they are no more frail than others, their disabilities would be more problematic as a result of lack of adequate informal support systems. Hence, there has been a widespread myth that later life for women is a time of isolation and loneliness (Adams 1987; Essex et al. 1989; Magaziner et al. 1989; Reinhardt et al. 1989; Bankoff 1983). This situation may result in a need for more informal supports for elderly women's overall health maintenance and promotion than ever before.

Before mentioning informal support for elderly women, it is first necessary to distinguish between supportive relationships and social networks. Supportive relationships depict a qualitative manner of support with

a subjective measure, while social networks indicate quantitative and relatively objective means of measurement. The former provides increased psychological stability and an improvement in health and morale in times of stressful life changes. On the other hand, the latter describes identification of network members, size of the network and frequency of interaction (Magaziner et al. 1989; Reinhardt et al. 1989). Many investigators have emphasized quantitative aspects of informal support in their studies. This present paper, however, will be focused on supportive relationships of elderly women as they were known using the support first to fulfill their emotional needs (Hooyman et al. 1993). This is due to many studies which have reported that it is the quality of support rather than its quantity which is important (Reinhardt et al. 1989; Liang et al. 1980; Snow et al. 1982), possibly because of role support and self affirmation provided by close relationships (Reinhardt et al. 1989; Longino et al. 1982).

## II. Informal Networks and Elderly Women

The elements of the social support networks

of elderly women are kin, friends and neighbors, and typically revolve around other females, specifically daughters and friends (Adams 1987; Reinhardt et al. 1989). Unlike the previously stated myth stated created from cross-sectional studies and which might have been caused by ignorance of possible cohort effects, longitudinal studies show opposite results on social networks. That is, elderly women's social networks do not decline as women get older and are not limited to a few loyal friends and family members in a woman's later life (Adams 1987; Essex et al. 1987; Rubenstein et al. 1982; Magaziner et al. 1989). In addition, the size of their potential informal supports (numbers of close relatives and neighbors) is similar between women who live alone and those who live with others (Essex et al. 1987; Peplau et al. 1982; Magaziner et al. 1989). Particularly, in the size of friends network, those who live alone are found to have a larger one than those who live with others (Magaziner et al. 1989).

Several studies have reported that a majority of elderly women live geographically close to their friends, thus interacting regularly and having frequent contact with family members (Essex et al. 1987; Fischer et al. 1982). Other studies, however, have found

that frequency of contact with others does not noticeably affect elderly women's feelings of loneliness or isolation (Conner et al. 1979; Larson 1979). Any of these effects were often reduced or in some cases disappeared when socioeconomic status and health status were controlled (Lemon et al. 1972; Smith et al. 1972).

Adams(1987) presumes that the sources of these contradictory reports from previous studies are a conceptualization and interpretation that excludes other aspects of form and content rather than the results themselves.

### III. Informal Support and Elderly Women

Informal support has been distinguished from an instrumental aspect which refers to a tangible assistance and an affective aspect (Reinhardt et al. 1989; Cantor 1979; House 1981; Kahn et al. 1980). Some investigators have focused their studies on objectively measurable instrumental supports such as the quantity of transportation, shopping, assist when ill and so on (Roberto et al. 1984). Yet, it was found that a character of elderly women's relationships was overall confiding, intimacy, personal

concern, emotional interaction, and bondedness (Sapadin 1988; Reinhardt et al. 1989; Candy et al. 1981; Davidson et al. 1981) and that the emotional isolation and loneliness were a result of the absence or loss of an important intimate relationship (Essex et al. 1987; Schultz et al. 1984).

Wright(1985) has developed a model with dimensions of close interpersonal relationships to solve the problem with the informal relationships. It includes rewards or values such as stimulation, ego support and utility, the strength of the relationship and the maintenance difficulty of the relationship. The terms used by Wright are defined to as follows: stimulation is "the extent to which the partner's perspectives and favored activities are expanded"; ego support describes "the extent to which a person helps one maintain a worthwhile impression of oneself"; and the utility refers to "the giving of one's own time and resources to help the partner meet his/her needs or reach various personal goals".

### IV. Friendship Vs. Kinship in Elderly Women: Same-Sex Relationship

Same-sex relationships are more likely to

include confidants than cross-sex relationships in both kinship and friendship (Hoyt et al. 1983; Reinhardt et al. 1989). Despite a friendship myth on women which states women are not able to establish and maintain a true friendship, women's same-sex friendships were rated higher for overall quality, intimacy, enjoyment, and nurturance (Sapadin 1988). There have been many studies to determine the relative importance of factors of informal support, that is, daughters and female friends (Reinhardt et al. 1989). However, the results are also controversial and inconclusive, such as, the issue on whether or not elderly women are socially isolated. Investigators have not yet attempted to sort out and examine the relative importance of the quantity of contacts and the various qualitative features of relationships between daughters and friends.

Some researchers have claimed that the relative importance between kinship and friendship is not comparable and nonsubstitutable since the two relationships are in separated and different realms (Antonucci et al. 1987; Arling 1976; Litwak 1985; Reinhardt et al. 1989). Kinship (a casual relationship) is likely to be associated with some sense of long-term commitment and obligation, providing all types of support,

whereas friendship (a confidante relationship) is voluntary, maintained by affective bonds chosen in a compensatory fashion (Colleen et al. 1994; Lee et al. 1982; Litwak et al. 1969; Reinhardt et al. 1989; Cantor 1979).

Cantor(1979) has proposed a hierarchical (kinship) - compensatory (friendship) model for the comparison of these relationships. In this model, Cantor(1979) and Reinhardt et al.(1989) have predicted daughters as better overall supporters and as having stronger relationships with their mothers than female friends in any occasion. Previous studies supported the predictions only in a situation, when frail and poor elderly women needed instrumental assistance, and thus, depended on their daughters for support (Dono et al. 1979; Cantor 1979; Cicirelli 1981; Stoller et al. 1983). The daughter relationship is also an indicator of the well-being of widowed elderly women because of the expressive support of daughters. On the other hand, other studies found friendship relationships more satisfactory due to mutual and reciprocal characteristics of the friendship (Essex et al. 1987; Arling 1976; Bankoff 1983; Blau 1973; Perlman et al. 1978).

Although most findings from previous studies lead to a potential conclusion that

same-sex friendship is more important as a critical source of informal supports than same-sex kinship, which is a daughter for elderly women, cautious review would be necessary before proceeding further. First, a question ought be raised regarding the use of terms, particularly about friends and confidants. Using these terms without giving clear definition will yield various answers as the terms are very subjective and vague. For the same term, study subjects might imagine acquaintances, church or senior center members, relatives, and chums. Second, using only quantitative methods will not present the quality of relationships but frequency of interaction. With these weak-points, this paper will continue to investigate same-sex friendship as a meaningful support to elderly women.

### View of Friendship

This is a review of the view of friendship before approaching the different patterns of friendship by marital status. Friendship is generally viewed in relation to age cohort and affectivity with mutual choice and needs, common interests, intimacy with distance, and a voluntary exchange of sociability between equals. In addition, friendship is assumed to be same-sex relationships in many studies

(Sapadin 1988). Thus, the characteristics of friendship such as age, life style, sex, and socioeconomic status are usually similar to each other. Studies on friendships of elderly women also view friends as valuable providers of support and assistance and effective buffers, especially during the period of major socio-environmental transitions, in adjusting to role losses, such as widowhood and retirement, and psychological growth, including the issues of intimacy, reciprocity and relational identity in later life. Thus, it plays as a key element in maintaining elderly women's physical and mental health and in contributing to their continued psychological growth. Just being involved in a friend relationship helps elderly women sustain a sense of usefulness and self-esteem more effectively than filial relationships. Perhaps it is because sharing relationships without obligations such as activities and roles.

There have been two different views on aging and friendship. One is friendship in aged as a process of the loss of choice or of decreasing life space (Brown 1981). This view emphasizes less extensive and more intensive friendship networks and supports of elderly women (a few good, old friends).

The other is aged friendship as an opportunity for new experiences or period of reinvestment in friendship (Baum et al. 1980; Lownethal et al. 1975). This idea sees elderly women as people who have more time affording new relationships and fewer obligations to consider. It has also been suggested that this period is not long due to age-related declines and is for only elderly women with adequate financial resources and optimum health. Yet, there is individual diversity regarding the ability to make and maintain friendship in later life. This capability may be cultivated through a woman's life time and can bloom and help her in her later life in adapting to the transitions of aging.

## V. Marital Status and Friendship

Most women confront over 20 years of widowhood in the U.S.; the average age of widowhood is 56 years and the average life expectancy is approaching 80. The value of friendship in this stressful life transition would seem to be very desirable.

Although the effects of marital status on the social isolation and loneliness were not well identified, married elderly women have

been consistently reported to be less lonely or isolated than unmarried elderly women (Essex et al. 1987; deJong-Gierveld et al. 1982; Rubenstein et al. 1982). When marital status was considered separately, the married and the never-married, particularly the unmarried who live alone, were less lonely than the formerly married (Essex et al. 1987; Peplau et al. 1984).

### 1. Married Elderly Women

Essex et al.(1987) proposed that the quality of a marital relationship is a major source of loneliness for older married women. If the relationship is stressful, other replacement relationships would not effect their emotional and psychological well-being. For instance, women who did not define their husband as their closest relative, substituted their closest female kin such as a daughter or sister for the husband at first. Then, they were affected by deteriorating health and a restricted network. If these women's educational status was high, they were likely to be involved in more social activities compared to less educated women and women who had more restricted social networks (Essex et al. 1987).

## 2. Formerly Married Elderly Women

The major marital relationship discontinuity through death or divorce seems to be a major source of feelings of loneliness and isolation to formerly married elderly women (Essex et al. 1987). Elderly widowed women were more likely to get help from their widowed friends than did their married counterparts (Roberto et al. 1984). They also tended to seek aids from their widowed friends than married friends. Hence, for them having widowed friends means achieving social networks and valuable informal supports (Reinhardt et al. 1989). If their close friends are under stress, the impact of this was significantly related to their feelings of loneliness or social isolation.

There is an example of an elderly woman's feeling regarding friendship in her widowhood (Adams 1987, p225):

“(Since my husband passed away), I have more time. When you're married, you are busy with your husband and his business friends. Now I'm footloose and fancy free. I have time for real neighborhood.”

Reinhardt et al.'s study(1989) presents that the utility value of friends provided

with everyday tasks was a predictor of life satisfaction of widowed elderly women, while ego support from daughter was the same predictor. One particularly interesting aspect of the report is that their friends lived within an average of twenty minutes away.

## 3. Never-Married Elderly Women

Never-married elderly women were less vulnerable than married and formerly married elderly women on their emotional well-being. Their circumstances and life-cycles were significantly different from other women in different marital status (Essex et al. 1987). The characteristics of the majority of the never-married elderly women were better educated, career women, lived alone most of their adult lives, and had fewer relationship with other women. They lived with rich social contacts regardless of the possible reasons due to their backgrounds and revealed a tendency of having experienced little loneliness or isolation, and retaining the ability for socialization (Perlman et al. 1984; Weiss 1973). Poor health status was the only predictor of loneliness than were their relationships with others. Presumably, since they had developed and maintained

self-reliance, a loss of independence, which was their source of merit, threatened then most and resulted in greater and stronger feelings of desolation and loneliness than women without the same life-long pattern. Therefore, frequent and intensive informal support by their friends or kin is greatly needed when the never-married elderly women revealed deteriorating health.

Here, an example of a retired women is introduced (Adams 1987:225):

"I was too limited while I was working. I had to maintain relationships with my colleagues. I didn't have time for meaningful friendships."

## VI. Stability and Change of Friendship

Change of friendships are more vulnerable than of any other social relationships because participation is voluntary (Adams 1987). In later life, elderly women face the risk of losing friends (Adams 1987; Lewttes 1989). However, people tend to retain central formal relationships, such as friendship and kinship, at all cost even in the risky later life (Field et al. 1985). The tendency is more likely a move toward a reversal of

their earlier friendship patterns. Despite the tendency of stability in activity level and social interaction, considerable individual variation and difference produced by social status have been found (Adams 1987; Field et al. 1985).

A longitudinal study conducted over a period of 50 years by the institute of Human Development, University of California, Berkeley, namely the Berkeley Older Generation Study, provided information about stability in social relationships between young-old and old-old ages. According to the study, factors associated with stability or change in the later years are as follows:

1. Social clusters for elderly women were less likely to decline than those for elderly men;
2. Although health decline had an influence on elderly people's social activities, it was not the primary cause of change;
3. The impact of marital status on the change of relationships was modest;
4. Desire of friendships did not change in advanced old age, that is, friendships were as important as ever even after age 85.

Adams(1987) also found a similar pattern of stability in his study. However, he noticed, in particular, the change of friendship

networks. Within four years (1981-1984) the elderly women subjects acquired more new friends than they had eliminated or lost. Consequently, they averaged more friends in the fourth year (1984). One qualitative aspect as recognized by Adams (1987) is introduced below.

"I have the same number of friends now (that I had before my husband died), but they are different ones. I'm no longer tied up in couple things." (p.226)

The difference among social status as mentioned earlier seems to affect the course of friendship network evolution (Adams 1987). Elderly women in high society are more likely to cherish friendship with a few close relationships. Women in the middle society tend to explore new friendships outside of their previous relationship networks. The lower class women expand their networks by participating in the senior centers. It was presumed by the researcher that the friendly relations formed in the women's later lives may be the first time in their lives they have had such relationships.

## VII. Summary

Studies on informal support for elderly

women are inconclusive in many ways. Yet, elderly women seem to have strong desires and some of them seek the informal social supports actively for their psychological well-being, which may have the following critical consequences. Unlike in folk myths, feelings of loneliness and isolation do not seem pervasive among elderly women. Rather elderly women bravely tend to maintain and reestablish their contacts for meaningful relationships, friendship, despite of their repeated social losses, declining health, and lack of mobility in the advanced age. Whatever their marital status is, and whether living alone or not, elderly women supposedly are seldom isolated. Educational status is likely to be an important predictor of elderly women's emotional well-being in both positive and negative ways. Higher education may predict sizable social networks and higher amounts of activity while it also may generate negative psychological well-being if their health status is negative.

Elderly women's friendship tends to be stable both voluntarily and with effort despite the disadvantages generated by aging and subsequent life events. If there is a change in the relationship, other friends seem to create other support. Even changing health

may not necessarily affect their relationships.

The relative importance between daughters and friends is also controversial. As some investigators have supposed, they may be two different relationships. Otherwise, both quantitative and qualitative research with depth and breadth, that is, work covering the gamut is essential in drawing conclusions.

## VIII. Future Implications

Friendship does not simply imply a friendly relationship. If elderly women fail in a relationship, the loss may result in feelings of loneliness, isolation, mental problems, increasing morbidity and mortality and so on. Hence, the word of friendship does not only start with the letter of 'F' but also finish with the letter of 'P'. It connotes the most important influential factor of overall health status, particularly in elderly women.

First of all, more research, with reliable measurements, is essential in both quantitative and qualitative research methods or a mix of them in the near future. In fact, previously conducted studies on informal support focusing on same-sex friendship were not compatible due to lack of study conducted, different

study design and subjects, and the means of measurement. The sample size of studies, in general, were too small to yield generalizations of the results. In addition, these studies were quantitative and cross-sectional. Longitudinal studies and qualitative approaches must be added. Although this paper tried to focused on informal support which is qualitative, the majority of studies on social networks were conducted in a quantitative manner.

Research with a prospective perspective would be necessary because skills to establish, develop, and maintain friendships will not be created in later years, but through the life time. Thus, other information on friendships are needed such as the social value; the definition; quality; types or patterns; change in amount and quality; termination; the source of learning friendship.

Second, a basis on information about friendship, intervention programs for elderly women at risk that have a lack of or no informal support by friends, and prevention programs for female youth would be expected. If most health and educational organizations develop a class to teach the importance of friendship using stories and movies to diffuse the idea/concept, younger generations might see a healthier human

world in their later life. To do so, awareness and awakening of the importance and changes in social values will be a prerequisite condition to proceed. For now, such the efforts like existing widow-to-widow programs, which lead elderly women's self-awakening about the importance of friendship in their health maintenance and promotion and to give them opportunity to reach the networks, should be a starting point.

Finally, American has been known as a country with multiculture. Nonetheless, the majority of study subjects were middle class, Caucasian elderly women. Almost all information about minority women in the U.S. has shown that they have multiple problems in later life. Knowing how minority women or women with other ethnic backgrounds associate with their friends would be valuable in this multiethnic setting. In the view point of friendship and it's roles, these women might be in a worse situation among American elderly women. Or they might have unexpectedly rich and meaningful lives even while having a lower economic and health status. Does this play a positive or negative role in the U.S.? Only then can effective or culturally appropriate programs for prevention and intervention be formed resulting in successful

outcomes for elderly women.

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