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GIVING VERSUS RECEIVING SOCIAL SUPPORT: AN ANALYSIS OF WHAT CONTRIBUTES THE MOST TO FAVORABLE LIFE OUTCOMES

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Abstract

This study calls for the question whether providing help to others is more beneficial than receiving it. Thus the present study probed the relative contributions of giving versus receiving social support to life satisfaction, marital satisfaction and distress in a sample of 436 older married adults aged 43-66 years. Baseline indicators of giving and receiving support were used to predict the study variables. Adults also provided data on the measures of life satisfaction, marital satisfaction, and distress. Results from regression analyses indicated that life and marital satisfaction were significantly increased for individuals who reported providing instrumental support to friends, relatives, and neighbors, and individuals who reported providing emotional support to their spouse. Receiving support had no effect on life and marital

satisfaction once giving support was taken into consideration. The results pertaining to distress showed the opposite findings for individuals who reported providing support than individuals receiving support. These results have implications for understanding how social contact influences life patterns, happiness, and mental health.

Keywords

Giving Versus Receiving, Social Support, Instrumental Support, Life Satisfaction, Marital Satisfaction

1. Introduction

Usually receiving support from our close relations is considered healthy for us. However, very few researches have debated on the opposite assumption that helping others also benefits our life outcomes. It is crucial to know whether supporting others be beneficial for our healthy lives and well-being? Latest investigations on social influences on favorable life outcomes have provided new grounds in support of this assumption. Literature has also evidenced that individuals who take an interest in social connections are psychologically, physically, socially & economically healthier and live more than individuals who are socially alone. (Brown, Orbuch & Maharaj, 2010; Kitreerawutiwo, & Mekrungrongwong, 2015)

Although receiving is in beneficial to our wellbeing but the empirical grounds does not confirm this. Testing this assumption that receiving support is good has offered opposing findings (Smith, Fernengel, Holcroft, Gerald, & Marien, 1994), showing in some cases that receiving support from others can be destructive (Brown & Vinokur, 2003). Some studies have questioned the hypothesis of receiving support, taking note of negative impact of it on relationships and wellbeing. Many studies have postulated that negative wellbeing and distress issues emerge when people get help from others. Individuals when feel they are a burden to their friends and family possibly experience psychological wellness issues, for example, distress, anxiety, depression, and suicide (Brown, Dahlen, Mills, Rick, & Biblarz, 1999; Taylor, Brown, Chatters & Lincoln, 2011). Thus if receiving help makes some one experience mental health issues, then receiving could be destructive to, as opposed to enhance, the life satisfaction and wellbeing of the receiver.

By noting the limitations associated with the hypothesis of receiving support, it is important to explore that giving support as compared to receiving support is more advantageous

for life well-being and interpersonal relationship. This thought comes from evolutionary theory and also is in line with socio-psychological researches on altruism and support. Theories of evolution explaining altruism describe the significance of helping others (Lehmann, L. and Keller, L., 2006). If giving support to others brings positive outcomes of emotions, and positive outcomes ensures wellbeing, then giving help may contribute in benefits to social relations.

Former literature has demonstrated that high level of giving is a fundamental aspect of one's interpersonal relations that are portrayed by a social ties and bonds (Brown, 1999; Brown and Smith, 2003; Cialdini, Brown, Lewis, Luce, & Neuberg, 1997). As utilized here, a bond is characterized as the experience of having affections for others that include friendship, closeness, and responsibility and that are persisting through time and in different situations. As a result of its helping aspects, this "altruistic" perspective of interpersonal relations is a radical takeoff from the present tendency to underline the individualistic profits of preserving close relationship. For instance, social experts question whether romantic relationships are fulfilling to the individual, and health experts question whether people get enough social support from their relationship spouse or from the people. Of the few exploration lines that seek giving (for instance, care giving), the absolute concentration is on distress and burnout. The examination reported here recommends that our love for others (and our social nature) may be established in the estimation of what we perform for others, rather than what others accomplish for us. On these grounds, marital or romantic satisfaction may leave a person with the feelings that he/she has done some for partner.

Though very small number of studies have analyzed whether making a support to others builds life span, sociologists take note of the universality of providing for others (Rossi, 2001). Several studies also demonstrate that people take advantages from helping other people, for example, decreased distress (De Waal, 2008;; Midlarsky, 1991) and enhanced wellbeing (Schwartz & Sendor, 2000). Besides, volunteering has positive impacts for volunteers, including enhanced physical and psychological well-being (Omoto & Synder, 1995; Wilson & Musick, 1999). Indeed thoughts likely to be connected with giving, for example, a feeling of significance, intention, and mattering, have been indicated to promote happiness and life satisfaction, and also diminish distress (Taylor & Turner, 2000; Batson, 1998).

Although there are both theoretical and empirical rationale to assume that giving support may result in benefit to human life outcomes, reciprocal-altruism theory (Hammerstein, 2003).

Which is significant in proposing that success of human reproductive ability depends on giving resources to relationship partners. Keeping the inadequate literature on giving versus receiving social support contributing in life outcomes, led us to produce more insight into the literature. The present study is an extension of and an addition to the study by Brown, Nesse, Vinokur & Smith (2003) that reported findings on the contribution of providing support to mortality rate among older married individuals. We designed this study to explore the role of giving support to others and receiving support from spouses in enhancing life satisfaction and marital satisfaction, and to reduce distress. For this study, support was measured in two domains; emotional support exchanged between partners and instrumental support exchanged with others. On the basis of study objectives, it was hypothesized that giving instrumental and emotional support compared to receiving instrumental and emotional support will be more effective in producing life satisfaction and marital satisfaction, and in decreasing distress among married people.

2. Method

2.1 Participants

Utilizing convenient sampling technique, 436 married people with age range between 43-66 years ($M = 51.28$, $SD = 11.34$) were selected for data collection. Of them 222 were married males and 214 were married females approached from different areas of Multan city. Participants education level was from graduation to Ph.D. Thus 213 (48.85%) of the participants were graduates, 126 (28.90%) were post graduates, and 97 (21.16%) were with Ph.D qualification. While 198 (45.42%) of the participants were from rural areas and 238 (54.59%) of participants were from Urban areas.

2.2 Instruments

2.2.1 Instrumental Support

2.2.1.1 Giving Instrumental Support to Others (GISO) was assessed by asking four survey questions from participants used in the study by Brown et al. (2003). Respondents were asked to respond on yes/no coded as 1/0 respectively about they had provided instrumental support to their relatives, neighbors, and friends than their marital partner in the past 6 months. Four questions were about whether they had given help with (a) trip, shopping, transport; (b) housework; (c) child care; and (d) other chores.

2.2.1.2 Receiving Instrumental Support from Others (RISO) was measured by one item: “If you and your husband/wife required additional support in general housework or home maintenance, how much would you count on friends or family members to help you?” 4-point scale was used to code the responses.

2.2.2 Emotional Support

2.2.2.1 Dyadic Adjustment Scale (Spanier, 1976) items were used to measure the giving and receiving emotional support.

2.2.2.2 Giving Emotional Support to a Spouse (GESS) was measured with two items by asking from respondents whether they provided love and care to their partner and whether they had listened to their partner when he/she was needed to talk.

2.2.2.3 Receiving Emotional Support from a Spouse (RESS) was measured with two items similar to GESS in a way that respondents were asked whether their partner made them feel loved and cared for, and whether their spouse was willing to listen if they needed to talk. A 5-point scale was used to collect the responses on items.

2.2.3 Satisfaction with Life Scale

Life satisfaction was measured using satisfaction with life scale (Diener et al., 1985) comprising five items. Items are responded on a 7-point Likert scale wherein “Strongly Disagree” shows 1 and “Strongly Agree” indicates 7. Total score is obtained by simply adding the responses on items and higher scores indicate higher level of life satisfaction. Test-retest reliability is 0.85 reported by Köker (1991). The internal consistency coefficient for the present study was found as 0.71.

2.2.4 Psychological Distress Scale

Psychological Distress Scale (Kessler, Andrews, Colpe, et al, 2002) was used to measure the distress level among individuals. It has 10 items rated on 5-point Likert scale. These items measure distress based on questions about depressive and anxiety symptoms experienced in last 4 weeks. Scores below 20 indicate wellness and above level 30 indicate distress level.

2.2.5 Index of Marital Satisfaction

The Index of Marital Satisfaction (IMS) by Hudson (1982) is a 25-item wherein each item is scored according to the following five categories: 1 = rarely or none of the time; 2= a little of the time; 3 = some of the time 4 = a good part of the time; and 5 = most or all of the time. The first step in scoring is to reverse-score each of the positively worded items so that an item

score of 5 becomes 1, 4 becomes 2, 2 becomes 4, 1 becomes 5, and a score of 3 remains unchanged. The reverse score items in IMS are 1, 3, 5, 8, 9, 11, 13, 16, 17, 19, 20, 21 and 23. After reverse-scoring the appropriate items on the scale and then denoting the item responses as Y, the total score (S) is computed for scale as $S = \sum Y - 25$. IMS has a clinical cutting score of 30. That is it generally found that persons who obtain a score above 30 have a clinically significant problem in the area being measured. While those who score below 30 are generally free of such problems. Alpha Reliability Coefficients of Urdu-Version of this scale is 0.62 and split-half reliability is 0.89.

2.3 Procedure

For the purpose of data collection, participants were first briefed about the objectives of study and then were assured about the confidentiality of their responses. After obtaining consent from participants to participate in the study, a booklet containing three scales was given to the participants. They were clearly guided about how to respond on all questions. Analyses were performed using SPSS-20.

3. Results

Table 1: Mean, SD, & Correlations Matrix

		M	SD	1	2	3	4	5	6
1	RISO	108.3	32.92	1					
2	GISO	9.776	3.096	.11*	1				
3	RESS	8.961	2.742	.19*	-.06	1			
4	GESS	9.507	2.487	.23**	-.09	.47**	1		
5	Life Satisfaction	8.496	.2.487	.17**	.57**	.24**	.63**	1	
6	Marital Satisfaction	7.742	3.373	.21**	.41**	.21**	.52**	.362**	1
7	Distress	77.25	15.68	.37**	-.55**	.34**	-.43**	-.12*	-.29**

Note.

RISO receiving instrumental support from others;

GISO giving instrumental support to others;

RESS receiving emotional support from a spouse;

GESS giving emotional support to a spouse

* $p \leq .01$, ** $p \leq .001$.

Table 1 reveals the correlation coefficients among all study variables. Giving instrumental support to others and giving emotional support to spouse are positively correlated with life satisfaction and marital satisfaction, and are found negatively correlated with distress than receiving instrumental and emotional support.

Table 2: Standard Regression Model showing impact of RISO, GISO, RESS, & GESS on Life Satisfaction

Predictors	B	Std. Error	Beta	t	p
(Constant)	413.50	137.56		2.26	.034*
RISO	.131	.047	.251	1.63	.122
GISO	.612	.053	.601	2.82	.000**
RESS	.162	.035	.103	1.71	.137
GESS	.561	.041	.544	3.22	.000**

$R^2 = 0.68$, Adjusted $R^2 = 0.41$, ($F(2, 433) = 21.17$, $p < 0.001$) * $p < 0.05$, ** $p < 0.001$

Table 2 indicates that independent variables of RISO, GISO, RESS, and GESS 68% explain the dependent variable of life satisfaction. A significant F -value for the standard regression model ($F(2, 433) = 21.17$, $p < 0.001$) also demonstrate that model predicts the outcome variable significantly well. Examination of t -values also indicates that independent variables are significantly contributing in the prediction of dependent variable.

Table 3: Standard Regression Model showing impact of RISO, GISO, RESS, & GESS on Marital Satisfaction

Predictors	B	Std. Error	Beta	t	p
(Constant)	461.31	143.26		2.64	.004**
RISO	.068	.015	.141	1.04	.337
GISO	.437	.039	.567	3.13	.000**
RESS	.118	.027	.035	1.03	.118
GESS	.372	.021	.414	4.02	.000**

$R^2 = 0.71$, Adjusted $R^2 = 0.57$, ($F(2, 433) = 28.62$, $p < 0.001$) * $p < 0.05$, ** $p < 0.001$

Table 3 presents that independent variables of RISO, GISO, RESS, and GESS 71% explicate the dependent variable of marital satisfaction. The standard regression model ($F(2, 433) = 28.62$, $p < 0.001$) also predicts significantly the outcome variable. T -values also depict that RISO, GISO, RESS, and GESS are significantly contributing in the prediction of marital satisfaction.

Table 4: Standard Regression Model showing impact of RISO, GISO, RESS, & GESS on Distress

Predictors	<i>B</i>	<i>Std. Error</i>	<i>Beta</i>	<i>t</i>	<i>p</i>
(Constant)	413.50	137.56		2.26	.034*
RISO	.109	.012	.131	1.55	.232
GISO	-.352	.041	-.373	-2.18	.03*
RESS	.152	.015	.114	1.62	.157
GESS	-.271	.035	-.452	-2.92	.000**

$R^2 = 0.57$, Adjusted $R^2 = 0.52$, ($F(2, 433) = 14.11$, $p < 0.001$) * $p < 0.05$, ** $p < 0.001$

Table 4 shows that dependent variable of distress was 57% explained by independent variables of RISO, GISO, RESS, and GESS. *F*-value in the standard regression model ($F(2, 433) = 14.11$, $p < 0.001$) also significantly predicts the distress. Analyses of *t*-values also reports that independent variables significantly contribute in the prediction of dependent variable of distress.

4. Discussion

The present study was conducted to explore the contributing role of giving versus receiving social support in most favorable life outcomes. In the present research three hypotheses which were revolved around the effect of giving support compared to receiving support on life satisfaction, marital satisfaction, and distress were tested. Giving and receiving support were tested in two domains of support; instrumental and emotional support because House (1981) proposed that these two aspects of helping –instrumental and emotional- depicts two of the processes of interpersonal dealings.

First hypothesis was established in terms of the predictive effect of giving support rather than receiving support on life satisfaction and it was assumed that giving instrumental and emotional help to others will positively predict the life satisfaction among married individuals than the receiving instrumental and emotional help that they get from their spouse. This Research fully supported the hypothesis and provided the evidence that people when gave help to others particularly their friends, family members, and neighbors experience more satisfaction in their lives as compared to when received help from their spouse. Finding suggests that giving instrumental and emotional supports to others have been found more effective for married people' life satisfaction than receiving help from partners.

The second hypothesis was stated in respect to the effect of giving versus receiving support on marital satisfaction and it was hypothesized that giving instrumental and emotional support to others will positively influence the marital satisfaction among people than receiving help from partners. Present study also supported this hypothesis and confirmed the claim that people experience more marital satisfaction when they provide help others than the way when they receive help from spouse whether the support is instrumental or emotional.

These findings of present study are supported by the studies from life scientists who explored that when females provided help to their spouse in painful situations, and then an activity is enhanced in reward-related regions of the females' brain. Moreover, when females demonstrate more reward-related neural activity, then they experienced more emotions towards their spouse while giving help. And when no help was given by females, then the neural activity in brain became low and decreased.

The profits of social contact may increase beyond received help to incorporate different dimensions of the interpersonal relationship that may ensure wellbeing and improve longevity - for instance, offering help to others. On the other hand, with few exemptions (Liang, Krause, & Bennett, 2001), studies on social support rarely measure whether there are advantages from giving help to others. Yet the advantages are usually attributed to receiving support or sometimes are attributed to giving support. Giving social support is more prone to be associated with close relationships (Antonucci, Fuhrer, & Jackson, 1991).

The third hypothesis was made in keeping the previous literature available on impact of giving versus receiving support on distress. It was assumed in the present research that giving instrumental and emotional support will reduce the level of distress while receiving support will produce distress among married people. Findings significantly supported the hypothesis and affirmed that people giving support to others feel distress low than those who receive help from spouse. It also suggests that receiving support is harmful as it produced distress (anxiety and depression) among individuals. These present findings are in consistent with the work of several other empirical surveys. For example, Lu and Argyle (1992) reported that seeking help and support from other people may result in anxiety and guilt and anxiety. Brown, et al (1999) provided evidence that one's perception that he is a burden to other people who presumably give help is related to increased suicidal ideations.

Another follow up study (Brown, Smith, House, & Brown, 2003) completed with a sample of widows postulated that compared to those widows who never provided help to other, widows who provided instrumental support to others were found with low sadness and depressive symptoms after one year follow up. Study further affirmed that widows who extended the quantity of giving to others reported few symptoms of depression. The findings of present research are also in line with other studies. For example, Brown, Perry, and Swartz, 2003 also presented similar findings obtained for dialysis patients. They reported that dialysis patients who were on giving activity were with higher levels of life satisfaction and subjective well-being, and lower levels of burnout and depressive symptoms.

4.1 Conclusion

The findings of the present study are in consistent with the previous literature available on the question whether giving support to a close one extends advantages to only the recipient or providing help is good for giver as well? Usually people when report about the situations wherein social support is considered beneficial for our well-being and mental health, they generally propose that the positive outcomes of social support are the results of support that we obtain from our friends, family, and neighbors, but the present study has affirmed that several benefits of social support indeed come from the support we *give* to others. This study has deduced that giving instrumental and emotional support to others contribute more in the favorable life outcomes; for instance in this study are increased life satisfactions, marital satisfaction, and decreased distress among married people.

4.2 Limitations & Suggestions

Many unaddressed questions thirstily await future investigation. In spite of significant findings from this study, some limitations should be taken care of in replicating the study in future. As only three life outcomes of life satisfaction, marital satisfaction, and distress level have been studied in the present research, many other still need to be examined. Therefore a holistic understanding of giving versus receiving support will come when the study will be replicated with some other life outcomes of one's life especially in terms of organizational benefits, educational benefits, developmental benefits, clinical benefits and etc. For more insight into the research question, gender and age differences could be helpful. Future research should focus on the use of representative sample and reliable data collection tools for more external and internal validity of the findings.

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