



(RESEARCH ARTICLE)



Gender differences in the association between received social support and satisfaction with life

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Abstract

Objectives: This study aimed to assess whether there are gender differences in the association between three domains of received social support and satisfaction with life among older persons in Kitui County, Kenya. **Methods:** This study utilized the convergent parallel mixed method design, cluster sampling technique and included 396 persons aged 60 and over derived through the Yamane formula. Satisfaction with life was measured using the single-item life satisfaction measure. Social support included one item from each of the three domains of instrumental, emotional, and informational support pervasive in previous studies of social support. Chi-square statistics were used to determine the gender differences in the association between received social support and satisfaction with life. **Results:** Regardless of the older person's gender, social support was significantly associated with life satisfaction, making it a crucial element of their quality of life.

Keywords: Social well-being; Satisfaction with life; Social support; Older persons; Receiving social support

1. Introduction

The world's population aged 60 and over is expected to double to 2 billion from 2000 to 2050, with eighty percent of older people residing in low- and middle-income nations by the year 2050(1). The population growth of older adults in Kenya reflects an important demographic trend that needs substantial and sustained attention. As of 2020, Kenya had 2.8 million persons 60 years and older; by 2050, that number is anticipated to have doubled due to a significant fall in fertility and increased life expectancy (2).

In developing countries like Kenya, older people struggle to manage their biopsychosocial demands given the limited resources available (3). Older persons typically rely on family members for social support because of their disengagement from the workforce or other sources of income and decreasing health(4). This makes social support very essential in later life (5). Social support refers to the assistance that people receive from their social relationships with other people, groups, and broader communities (6). These people include spouses, siblings, other family members, friends, neighbours, housekeepers, and other people who offer social support (7,8).

This social support is a combination of many forms of support, especially emotional, informational, and practical help which is linked to the highest quality of life (9). According to López-Cerdá and others (10), older adults benefit from social support since it serves as a safeguard against issues like loneliness, stress, and depression. The degree of social assistance that older persons receive can be crucial for assuring their ability to adjust to old age (11). Social support has a positive impact on older persons' life satisfaction, making it a crucial element of their quality of life (12).

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Life satisfaction is connected to cognitive judgments based on readily available and reliable resources which makes it a relatively steady component of subjective well-being (13–16). According to Al-ja'freh and others (12) it is an important aspect of well-being for older people, which results from satisfaction and contentment with one's life (18). This satisfaction emanates from the fulfilment of personal needs arising from the resources available in the social network.

The experience of life satisfaction based on social support received among older men and women is an important area of inquiry. This need arises due to a failure in most current research on the effects of social support on well-being to account for gender differences (7). According to Matud and others, (18) gender and received social support are indisputable factors associated with the well-being of older persons. This is because of the differences in gender norms which continue to be deeply ingrained among older adults (19). In addition, older men and women do not merely perform similar social roles in society (12). Given that women and men experience uneven chances, gender disparities in well-being may be expected (7). These gender disparities can thus influence the effect generated by social support received.

Previous research demonstrated that there were significant gender differences in the relationship between social support and wellbeing in older persons (20,21). However, while some researchers claimed that older males and females experienced different levels of life satisfaction based on social support, other researchers discovered no discernible differences (22). In addition, Ebimgbo and others, (4) noted that there is limited analysis of gender differences in satisfaction with received social support. This study therefore made an attempt to contribute to filling that gap.

2. Methodology

2.1. Design

A cross sectional, concurrent parallel mixed method research design was used. Data collected using open ended questionnaire.

2.2. Sample and Setting

A sample size of 396 community dwelling older people agreed and completed the questionnaire. The sampling technique was cluster sampling consisting of locations and then sublocations where the sample was drawn. Inclusion criteria included: all those above the age of 60 years and older and able to express themselves. Exclusion criteria included older persons who had not resided in the area over the past 12 months, those who could not express themselves and those not willing to participate in the study.

2.3. Data collection Procedures

Data collection started after ensuring ethical approval from the Kenyatta University Ethical committee, National Commission of Science and Technology (NACOSTI) and Kitui County Ministry of Education. This study was conducted in compliance with the principles of written informed consent and confidentiality.

2.4. Measures

2.4.1. Independent Variable

Based on previous research (18,23), social support means instrumental, emotional and informational support. One item of each was used to establish whether gender and satisfaction with social support are related. For the instrumental support, participants responded to the question "Did you receive care when you were sick"? For emotional support, the question was, "Did your close network members trust you to solve their problems?" while for informational support, participants responded to the question "Did you receive helpful advice to make an important decision"?

2.4.2. Dependent Variable

The Single Item Life Satisfaction Measure (SILSM) was used to assess the satisfaction with received social support. Life satisfaction was measured by one item covering self-rated life satisfaction in relation to the social support that was received. The scale has good reliability of 0.71 and is validated in literature (24). Self-rated life satisfaction was assessed by "how do you rate the satisfaction with the social support (instrumental, emotional and informational) that you received from your close network members" with a five-point Likert scale ranging from 1 (very dissatisfied) to 5 (very satisfied). The scale was later collapsed during analysis to satisfied and dissatisfied because the other points were very few.

Sociodemographic characteristics included information related to age, gender, marital status and education level.

3. Results

3.1. Sociodemographic Characteristics:

The analysis demonstrated that age ranged from 60 to over 100 years with a mean of age range of 60-70 years, 40.9.0% (n = 162) were males and 59.10% (n = 234) were females. The majority of the older persons (57.6%, n = 228) were married, and 41.7% (n = 165) had attained primary level of education. Refer to table 1 for more details.

Table 1 Respondents' socio demographic characteristics (n= 396)

Characteristic	Subgroup	Frequency (%)
Age	60-69	200 (50.5)
	70-79	110 (27.8)
	80-89	63 (15.9)
	90-9	17 (4.3)
	100+	6 (1.5)
Gender	Female	234 (59.1)
	Male	162 (40.9)
Marital Status	Married	228 (57.6)
	Single	13 (3.3)
	Divorced	3 (0.8)
	Widowed	143 (36.1)
	Separated	9 (2.3)
Level of education	No formal education	142 (35.9)
	Primary	165 (41.7)
	Secondary	74 (18.7)
	Tertiary	15 (3.8)

3.2. Gender differences in the association between social support and satisfaction with life

The analysis as illustrated in Table 2 shows that a majority of the respondents received instrumental social support (care during sickness) with more females satisfied (96.7%) with received social support compared to males (92.8). The crosstabulation demonstrates that there was a significant relationship (p value =0.05) between instrumental social support and satisfaction with received social support regardless of gender. The majority of the older persons received emotional support in the form of trust to solve problems. A slightly higher number of older women (97.7%) compared to men (97.2%) were trusted by their close network members to solve their problems. There was also a statistically significant relationship between the emotional social support and satisfaction with life irrespective of gender. Table 2. shows that in relation to information support received, a majority of female older persons (98.1%) received helpful advice to make important decisions than men (95.5%). Informational social support and satisfaction with received social support were statistically significant at < 0.05 . regardless of gender.

Table 2 Gender and satisfaction with received social support

Support received	Gender	Responses	Satisfaction with social support				χ^2	Df	p-Value
			Satisfied	%	Dissatisfied	%			
Care during sickness	Male	Yes	129	92.8%	10	7.2%	4.969	1	0.042*
		No	18	78.3%	5	21.7%			
	Female	Yes	207	96.7%	7	3.3%	6.658	1	0.038*
		No	16	84.2%	3	15.8%			
Trusted to solve problems	Male	Yes	138	97.2%	4	2.8%	56.818	1	0.000*
		No	9	45.0%	11	55.0%			
	Female	Yes	214	97.7%	5	2.3%	33.05	1	0.000*
		No	10	66.7%	5	33.3%			
Helpful advice to make decisions	Male	Yes	128	95.5%	6	4.5%	21.098	1	0.000*
		No	19	67.9%	9	32.1%			
	Female	Yes	206	98.1%	4	1.9%	28.08	1	0.000*
		No	18	75.0%	6	25.0%			

4. Discussion

The satisfaction with received care during illness may be attributed to meeting the older persons expectations of being cared for by those closest to them. According to Crisp & Robinson, (25) close network members are driven by a sense of duty to care for the older persons who are ill. Receiving the care while ill enables older people to manage the difficulties posed by sickness, thus improving their social well-being (26). The results of this study are consistent with those of Chitaka, (27) who indicated that older people anticipate those close to them to take care of them, particularly their spouse and adult children. The findings of this study also concur with Ebimbo (4) that female older persons received more social support compared to men.

Majority of the respondents received emotional support and were satisfied. This was attributed to the feelings of being resourceful, valued and trusted that was generated by the trust received to solve problems. According to Broome et al., (28) satisfaction with life is associated with decision making capacity and trust. When older people feel that their close network members have given them the freedom to handle some of their life problems, they feel confident and fulfilled because they know that their close network members believe in them. The findings showed that older women were more satisfied with their social support than older men. This research supports prior Greek community sample research that indicated, at a significance level of 0.05, that females reported somewhat higher levels of support satisfaction (29).

Similarly, majority of the older persons (both male and female) were satisfied with received informational social support. The satisfaction was attributed to the potential of the advice to make decisions, since some decisions can be blurred due to factors like financial constraints, age, religion, and others. According to Jiang et al., (30) older people seek the counsel of those close to them about actions they want to take because the advice they receive is beneficial to them and improves their wellbeing. The study found that receiving useful advice from close network members was statistically significant for both older men and women. These findings resonates with Liu et al., (31) who found that access to useful informational on benefits, services, or support was significantly associated with satisfaction and quality of life

5. Conclusion

In this representative sample of older persons in Kitui County, our results suggested that there was gender difference in the relationship between received social support in the instrumental, emotional and information domains of social support and satisfaction with life. To improve the well-being of older persons, social support interventions must be

gender specific. This is due to the struggles that older persons face in managing their biopsychosocial demands given the limited resources.

Compliance with ethical standards

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Disclosure of conflict of interest

The authors have no conflict of interest to declare.

Author contributions

The final manuscript has been approved for publication by all authors

Statement of informed consent

Written informed consent was obtained from all study participants before the commencement of the study

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