

STRESS AND SOCIAL SUPPORT— IN SEARCH OF OPTIMAL MATCHING

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Theoretical and practical advantages are discussed of a model that specifies the type of social support that is most beneficial (i.e., most effective in preventing deleterious physical or mental health consequences) following different kinds of stressful life events. Prior attempts to specify such optimal combinations of stress and social support are reviewed, and a new optimal matching model is proposed. Issues that must be addressed in the validation of optimal stress-support models are discussed, and methodological suggestions for future research endeavors in this area are offered.

No one would think of offering money to console a wealthy man who had just suffered the loss of his wife, or of offering esteem support to someone who had just won the Nobel Prize. Clearly, different situations call for different kinds of interpersonal behavior. Although we know this intuitively, research on social support has tended to ignore potential differences in the helpfulness of specific kinds of social support in the context of different types of stressful life circumstances (Cohen & Wills, 1985; Heller, Swindle, & Dusenbury, 1986; House, 1981).

One reason for our lack of insight into specific matches between types of stress and social support is methodological. Early research tended to treat social support as a unidimensional construct or to analyze only aggregate support scores, thus obscuring the differential impact of specific components. Another design feature of most research in the area of social support has also obscured the effects of specific components of support in the context of specific stressful events. Most researchers have tested the effects of social support in broad community samples, without regard for the specific types of stress that individuals have encountered. Only severity or number of events is coded, using cumulative life event measures (e.g., Holmes & Rahe, 1967). In 1985, Cohen and Wills estimated that 90% of the published social support studies used this approach. Although such methods are useful in establishing the *average* effects of

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support in protecting individuals who have experienced a wide range of stressful events, this epidemiological approach cannot advance our understanding of optimal matches between types of stress and types of support.

There are obvious clinical reasons for seeking insight into the most beneficial forms of social support for different kinds of stressful events. If optimal matches between types of stressful events and types of social support were known, leaders of support groups, designers of friendly visitor programs, psychotherapists, and concerned family and friends would know how best to tailor their attempts to help individuals facing such crises as bereavement, divorce, cancer, unemployment, or victimization by crime. Research shows that family, friends, and professionals frequently offer well-intentioned, but highly distressing "support" that derives its aversiveness from a lack of congruence with the target individual's current needs (e.g., Lehman, Ellard, & Wortman, 1986). Thus, considerable practical benefit might accrue from a valid model that matches support type with type of stress.

In this paper, prior work in the area of social support and stress specificity will be briefly summarized and critiqued, followed by an optimal matching model of stress and social support that is currently under development by my research group. The purpose of this paper is not to present the "correct" model of optimal matching between stress and social support, but to describe one preliminary model to illustrate the many complexities that arise in the development of theory in the area of social support and stress and to stimulate research regarding patterns of optimal matching.

PRIOR SPECIFICITY MODELS

A theme that is common to virtually all specificity models is that different stressful events pose different coping requirements (e.g., Cohen & McKay, 1984; Thoits, 1986). Researchers categorize coping demands in somewhat different ways, with different degrees of specificity, but implied in all models is the assumption that social support has its beneficial effects by facilitating or augmenting psychological and environmental processes that the individual must set in motion to overcome the objective problem that is taxing his or her resources, or to decrease the magnitude of aversive emotions that are generated by the problem (Lazarus & Folkman, 1984).

In 1984, Cohen and McKay outlined a stressor-support specificity model of the buffering hypothesis. Buffering effects for individuals facing stressors involving resource deficits would be seen primarily for tangible

social support (e.g., money, transportation, help with household chores). Stressors in which the individual's distress is generated by his or her subjective interpretation of the situation rather than by the objective threat posed by the event would require appraisal support. Stressors that can lead to internal attributions of failure or inadequacy may best be buffered by esteem support. The loss of significant relationships require social support that will restore or maintain a feeling of belonging or being cared for.

Cohen and Wills (1985) conducted a major review of the literature regarding circumstances in which specific components of support were beneficial in maintaining positive health and adjustment. On the basis of their review, they concluded that esteem support and information support were beneficial across a wide range of circumstances. However, buffering effects were only found for belonging and tangible assistance when the stress entailed a relationship loss (belonging) or a loss of tangible assets (tangible assistance). Thoits (1986) divided events broadly into those that imposed coping demands for appraisal, problem solution, and emotion management and argued that only social support that facilitates the appropriate coping demands should be effective.

The evolutionary nature of many life crises has been emphasized by several writers who argue that different coping demands are characteristic of different phases of the experience of stress (Jacobson, 1986; Lazarus & Folkman, 1984; Weiss, 1976). Weiss (1976) described different phases of coping with bereavement. The first phase he termed "crisis" and hypothesized a primary need for emotional support. In the second phase, termed "transition," the individual attempts to build a new identity without the lost partner, and takes on responsibilities previously borne by the lost partner. During this phase, cognitive support (i.e., information and feedback on appropriateness and capability) is key. Very often, an extended period of deficit follows the transition stage, as the consequences of lost income and services are experienced, and during this phase, tangible support is viewed as most beneficial.

CRITIQUE OF PRIOR SPECIFICITY MODELS

One problem inherent in some of the stress-support matching models described above is a lack of objective defining characteristics of event classes that require different kinds of social support to promote optimal coping and adjustment. For example, Cohen and McKay (1984) define two categories of stressful events in terms of abstract psychological processes. Events hypothesized to require appraisal support are "those stressors involving primarily psychological as opposed to universal sources

of stress" (p. 262). Events hypothesized to require esteem support are those "that can result in a self-attribution of failure or inadequacy" (p. 262). Although these hypotheses may well be correct, they suffer from a lack of operational definition. For example, who determines whether the cause of a given stressor is likely to be attributed internally? The individual experiencing the stress could provide his or her perception of causality, but such a judgment is likely to be contaminated by the *effects* of the stressor, such as depression (Hamilton & Abramson, 1983).

An alternative approach has been to define stressor classes in terms of objective characteristics of the event. For example, Cohen and Wills (1985) concluded, based on their review of the relevant literature, that events characterized by a loss of tangible assets would require tangible forms of social support. However, Wethington and Kessler (1986) argue that even if tangible resources are needed to resolve a problem, their provision by members of the social network is required only if the target individual cannot obtain these resources himself or herself. Furthermore, it has been argued that tangible support may have the undesirable effect of undermining self-efficacy (Kahn & Antonucci, 1982; Krause, 1987). Thus, it appears that objective characteristics of stressful situations alone may be insufficient as determinants of the type of social support that will be maximally beneficial.

AN OPTIMAL MATCHING MODEL OF STRESS AND SOCIAL SUPPORT

Motivation for developing a specificity model of stress and social support developed out of a series of field studies we conducted to investigate the contribution of social support to two kinds of stresses: the transition to parenthood (Cutrona, 1984; Cutrona, 1989; Cutrona & Troutman, 1986); and stress in the workplace (Constable & Russell, 1986; Russell, Altmaier, & Van Velzen, 1987). For each of these stresses, we tested the contribution to mental health of each of Weiss's (1974) six provisions of social relationships in at least two independent samples. Our results, which were quite similar across samples, indicated that different support components ("provisions" in Weiss's terminology) predicted a positive adjustment to parenthood (guidance and network support) than predicted a positive adjustment to work stress (esteem support). Given that these patterns replicated across independent samples with diverse demographic characteristics (e.g., adult and adolescent mothers; teachers and nurses), it seemed worthwhile to pursue a systematic model of stress-support matching.

COMPONENTS OF SOCIAL SUPPORT

A review of the most frequently cited social support classification systems revealed a high degree of convergence across authors, although terminology differed (Cutrona & Russell, in press). We derived a set of five basic support dimensions that appear in most of these models: (a) *emotional support* (expressions of comfort and caring); (b) *social integration* or *network support* (membership in a group where members share common interests and concerns); (c) *esteem support* (bolstering of the person's sense of competence or self-esteem); (d) *tangible aid* (services or resources); and (e) *informational support* (advice or guidance). A study by Rose (1986) has provided empirical support for the parallels across these models in support components.

One psychometric issue in the measurement of social support will be briefly addressed. For a number of measures of social support, sizeable correlations among the dimensions that are assessed have been reported (see discussion by Brown, 1986; House, Kahn, McLeod, & Williams, 1985) suggesting significant overlap among dimensions. However, three recent studies have employed confirmatory factor analysis to test for the existence of multiple dimensions of social support (Brookings & Bolton, 1988; Cutrona & Russell, 1987; Vaux, Riedel, & Stewart, 1987). Results were consistent across studies, in that distinct dimensional factors were confirmed. Cutrona and Russell (1987) further reported that a single second-order factor, reflecting the existence of a global social support construct, could be identified. Thus, just as in the case of intelligence, these results suggest the existence of a general support factor that is further differentiated into the specific dimensions of support that are reflected by individual support components.

DIMENSIONS OF STRESS

A valid categorization system for stressful life events is critical to an optimal matching model of stress and social support. Four dimensions of stressful life events were abstracted based on a review of the stress categorization literature (Cutrona & Russell, in press): desirability, controllability, duration of consequences, and life domain affected by the event. Life domains were subdivided into assets, relationships, achievement, and social roles. All four of these dimensions emerged from both theoretical (Lazarus, 1966, 1981) and empirically based taxonomies of life events (Fava et al., 1981; Paykel, 1974, 1979; Brown & Harris, 1978; Redfield & Stone, 1979; Ruch, 1977).

Each of these dimensions was viewed as a determinant of the psychological demands and coping needs imposed by stressful life events. However, the two dimensions that were viewed as most influential in this regard were controllability and life domain affected by the event, as will be described below.

Controllability. In our conceptual model, the most influential dimension with regard to needed social support is that of controllability. When an event is uncontrollable, that is, nothing can be done to prevent the event or lessen its consequences, the most important task for the individual is to recover from the negative emotions elicited by the event. This is termed "emotion-focused coping" by Lazarus and Folkman (1984). Thus, we predict that uncontrollable events will require social support components that serve primarily to minimize the intensity of the individual's negative emotional reactions to the event. Thus, emotional support (reassurance of caring and concern) is hypothesized to be optimally beneficial following uncontrollable negative life events.

By contrast, when an event is controllable, that is, the individual can prevent its occurrence or consequences, the most beneficial social support will foster effective instrumental action ("problem-focused coping," Lazarus & Folkman, 1984). We predict that controllable events will require either or both of the instrumental support components: informational and tangible support. However, as Cobb (1979) argues, instrumental behavior may also be facilitated by noninstrumental support. In particular, we predict that esteem support, which communicates belief in the individual's ability and competence, is of considerable utility in promoting effective problem-focused coping. Borrowing from Bandura (1982), it is hypothesized that esteem support bolsters the self-efficacy beliefs of the individual, thereby promoting more effective instrumental behavior (see Cutrona & Troutman, 1986). Thus, a third prediction is that esteem support will be associated with better outcomes following controllable events.

Life Domain Affected by Stress. We have based our hypotheses regarding the dimension of life domain on Stroebe and Stroebe's (1985) deficit model and Hobfoll's (1989) resource conservation model, in which the nature of the loss affects the nature of the required replacement. The life domain dimension is viewed as most relevant for uncontrollable events, especially those involving loss. Controllable events may be associated with temporary replacements in the life domain affected by the stress, but the amounts and duration of needed replacements should be less than for uncontrollable events where a permanent deficit has been created.

Specifically, a loss of assets (tangible resources and physical capabilities) would be associated with a need for tangible support. For example,

an individual experiencing a financial crisis would need a loan. Loss of a relationship would leave a deficit in attachment or social integration (network support), depending on the nature of the threatened or lost relationship. If an intimate relationship were lost, emotional support (expressions of caring) would be most crucial. If group membership were lost (for example, moving with one's family to a new community), network support would be most crucial (Weiss, 1974). When the loss is primarily in the achievement domain (e.g., loss of standing in the work or school setting), esteem support (reassurance of capabilities and worth) would most directly address the individual's deficit. Finally, when a valued social role is lost or threatened (e.g., retirement, empty nest), we would hypothesize that a particular need for network support arises. Membership in role-related networks has been identified as an important source of identity and role-relevant affirmation (Cohen & Wills, 1985; Pearlin, 1983; Thoits, 1986). The predictions of the specificity model are summarized in Table 1.

Desirability and Duration of Consequences. Neither desirability nor duration of consequences was viewed as orthogonal to controllability. Uncontrollable events are likely to be less desirable and to have longer lasting consequences than controllable events. Thus, neither of these dimensions was included in the model.

TABLE 1
Optimal Matching Model of Stress and Social Support

Type of Stressful Event	Optimal Social Support
Controllable (Instrumental behavior can prevent event from occurring or lessen or eliminate its consequences.)	a. Instrumental support (especially information support) b. Esteem support (reassurance of competence, ability)
Uncontrollable (Instrumental behavior cannot prevent event from occurring or lessen or eliminate its consequences.)	a. Emotional support (expressions of caring and concern)
Life domain in which loss occurs:	
Assets (tangible resources and physical capacity)	b. Tangible support
Relationships	
a. Intimate	c. Attachment
b. Casual, group	d. Network support
Achievement (work, school, or other arena of productivity or competition)	e. Esteem support
Social role (loss, gain, or change)	f. Network support

EMPIRICAL SUPPORT FOR THE OPTIMAL MATCHING MODEL

Specific predictions from our optimal matching model were tested in a review of all published literature that could be located in which specific components of social support were tested as predictors of mental or physical health outcomes in the context of specific stressful life events (Cutrona & Russell, in press). A total of 39 such studies were located. For approximately two-thirds of the life events covered in these studies, results were consistent with the predictions of the model. That is, significant correlations were found between outcome measures (e.g., depressive symptoms) and the component of social support predicted to have maximal effectiveness given the life stress faced by the study participants. However, in the context of some events, such as bereavement, multiple components of social support correlated significantly with health outcomes. Our review of the empirical literature suggests that for some events, specific components of social support can be identified that facilitate optimal adjustment, but that for other events (most notably bereavement, medical illness, unemployment, and Vietnam combat exposure), a broad range of social support components are required for recovery. Clearly, a means to distinguish between these classes of events is needed. Some clues have been provided regarding this distinction. When the stressful event involves the loss of a key source of social support (e.g., the spouse), support deficits will occur in the areas of support that were previously provided by the lost individual (Stroebe & Stroebe, 1985). When capacity to function in a wide range of life domains is impaired, as in the case of medical illness, posttraumatic stress syndrome (experienced by many Vietnam era veterans), or unemployment, needs associated with each of those domains will be created.

REMAINING ISSUES AND QUESTIONS

As stated previously, the model outlined above was presented as a starting point for discussion and research. It has not been prospectively tested, and many unresolved issues and questions remain regarding optimal matching between types of stress and social support. One set of issues is methodological in nature, and concerns how we should proceed in developing and testing models. The second set of issues can only be resolved empirically, through systematic testing of theoretical models.

Methodological issues include how best to categorize social support components and stressful life events. As mentioned previously, measures of support components are highly intercorrelated. Although confirmatory factor analyses have shown that items assessing the same component intercorrelate more highly than those assessing different components, some criterion is needed to determine whether indeed some components should be combined into larger categories. Regarding the categorization of stressful life events, different categories emerge depending on the purpose of the categorization scheme (e.g., to identify depressogenic events, to identify events that co-occur). Ideally, events would be assigned to categories based directly on the needs they generate for different types of social support. However, it may be difficult to obtain this kind of empirical grouping. First, if standard multidimensional scaling or cluster analysis procedures are used, it is necessary to communicate the basis for categorization to the subjects, which may be difficult. Subjects may have limited experience with some kinds of social support, and they will certainly have limited experience with many kinds of stressful life events. Thus, subjects will be forced to rely on stereotypes or prototypes in their responses. To derive categories of stressful events from studies of individuals who have actually experienced each stress would be ideal. However, such field studies pose significant recruitment challenges, and to sample a sufficient range of groups who have experienced different kinds of stressful events would be extraordinarily time consuming.

One approach that has been used in field studies is to interview individuals with respect to the kinds of social support they have found most beneficial, but it is not clear that people *know* what benefits them most. For example, individuals who are recovering from a surgical procedure may be grateful for the sympathy they receive, but may actually benefit most from network members who foster recovery by encouraging independence and encouraging them to push physical limits to rebuild physical capacity.

A related methodological question concerns how social support should be operationalized in the context of testing an optimal matching model. For example, if social support instruments assess subjective satisfaction with support, does high satisfaction imply that the support provided corresponded to the individual's needs? Once again, we do not know if people are able to discern the nature of their actual support needs. Thus, ambiguity exists regarding the meaning of such support ratings.

A number of writers have noted that different psychological needs arise at different times over the course of a stressful life event (Jacobson, 1986; Lazarus & Folkman, 1984; Weiss, 1976). One methodological challenge is to incorporate this dynamic process into our optimal matching models.

It is likely that we can do no better than to make rough temporal distinctions (e.g., anticipation, confrontation, immediate and long-term aftermath), which will vary in their implications for social support depending on the nature of the stress and the personality of the individual.

Empirical questions in this area abound. For example, to what extent does the personality of the individual experiencing the stress shape his or her support needs? Can particular personality dimensions be identified that interact predictably with type of stress in determining the type of support that will be maximally beneficial? Which is more important, the type of social support that is provided, or the *quality* of the supportive interaction on other dimensions (e.g., warmth, empathy, duration of the interaction)? Are there contextual variables that contribute to the effectiveness of a supportive intervention (e.g., closeness of the relationship between provider and recipient; whether or not the recipient had to ask for support)? Are there differences in the types of social support that are provided by members of the social network and professional helpers?

RESEARCH IN PROGRESS

To avoid contamination of controllability ratings by the emotional state of the individual experiencing the stress, we have opted to use normative ratings of the controllability of stressful events. Work is currently underway to develop a reliable and valid measure of the perceived controllability of events. Both controllability of the cause and controllability of the consequences of events will be assessed with this tool. As with controllability, it is our intention to gather normative data regarding the dimension of life domain. We are developing a method for assessing the degree to which different domains of peoples' lives are affected by various stressful life events, and normative data will be collected regarding the life domains affected by a range of events. After completion of the measures to assess dimensions of stressful life events, a series of prospective studies is planned. Some will involve longitudinal studies of individuals who are facing specific stressful events (e.g., the diagnosis of Alzheimer's disease in a family member). A second series will assess the immediate impact on mood and satisfaction of receiving support from one's spouse that provides either a match or a mismatch to the particular life event with which the couple is currently coping.

Clearly, many questions must be addressed before we can usefully predict the outcome of interactions between individuals who have experienced a stressful life event and those who are attempting to provide assistance. Type of social support is one dimension that merits investigation, but at this time, we have much to learn methodologically and

substantively before an optimal matching model of stress and social support can be validated.

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