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Social Resources and the Quality of Life[1]

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In this study four social resource measures were distinguished based on their cognitive and affective properties and tested in a survey of the quality of life (QOL) of 537 community residents. It was expected that resource measures would correlate only with criteria in the same affective domain, i.e., positive measures would relate to positive appraisals of life quality, negative measures to negative QOL outcomes. Cognitive properties of the measures, and the life context within which resources were utilized, were expected to influence whether a resource would show cross-domain *effects such that a positive resource would be associated with a reduction in negative states. Measures differed in the degree to which they identified resources coming from internal rather than external sources. Their effects on QOL were studied separately and in interaction with two life context variables: the number of negative life events over the previous year and resident age and sex. The findings were consistent with expectations. In general, positive measures of resources were associated with boosts in positive affect but not reductions in negative affective states. A measure of negative aspects of social resources was associated with distresss and negative affect but not with a reduction in positive affect. Cross-domain or "buffer" effects, in which positive aspects of the person's social resources would reduce distress, did occur but only for measures that implied self-involvement, and only when the resident was experiencing high levels of stressful life events. Also, there were life-cycle differences in the availability of social resources to residents of the community, and evidence suggested that the value of some resources changed as a function of the resident's stage in life.*

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National surveys (Andrews & Withey, 1976; Flanagan, 1978) leave little doubt that when people talk about the quality of their lives (or the lack of it) thay often have social resources on their minds. Recently, community researchers have had social support in mind. They have proposed that certain supportive resources would act as a buffer, protecting a person from the potential harms of stress and making him/her less vulnerable to psychological disturbance (e.g., Cohen, in press; Heller & Swindle, 1983; Wilcox, 1981).

While there have been a number of recent attempts to identify broad and far-reaching dimensions of social resources both in terms of their social functions (e.g., Barrera & Ainlay, 1983) and also their psychological utility (e.g., Gottlieb, 1981), few investigators have taken a careful look at how the more basic cognitive and affective components of a social support measure might determine its relationship to personal appraisals of well-being and quality of life (QOL). This paper examines the basis for a link between social resources and psychological well-being through an empirical analysis of how statements about one's resources that differ in affective and cognitive features correspond with subjective evaluations of life quality made by a cross-section of community residents.

Clarification of the meaning of various social resources measures by empirical means cannot proceed without a discussion of the nature of the criterion: subjective well-being, or QOL. Andrews and McKennell (1980) recently identified three basic components of QOL judgments: positive affects, negative affects, and a third set of cognitive influences. According to Andrews and McKennell, when people appraise their QOL, they combine positive feeling states, negative feeling states, and their thoughts (cognitions) about those feelings. Important in this conceptualization of QOL is the separation of affects into two distinct domains: positive and negative.

While feeling good (positive affect) is the logical converse of feeling bad (negative affect), these feelings appear to be experienced (and stored) separately. Bradburn (1969) discovered this when he constructed positive and negative affect scales and found them to be uncorrelated in the general population. Most recently, Zevon and Tellegen (1982), in factor analyses of 90 days of mood states, confirmed the presence of separate affective domains, one positive, the other negative, for 21 of 23 subjects.

This distinction appears to extend also to the value people attach to events. In past studies of major life experiences, those events that enhanced positive emotions and feelings have had little or no influence on negative feeling states (see Zautra & Reich, 1983, for a review). Also, everyday events that are rated as positive such as "calling an old friend" or "helping another person," while increasing satisfaction generally, have not been

associated with reduced negative affect and less distress (Kanner, Coyne, Schaefer, & Lazarus, 1981; Lewinsohn & Amenson, 1978). It thus appears that people employ two separate affective domains for events: one for registering positive impacts and another for registering negative impacts.

Social resources measures, like events, may also be classified as positive or negative. Such a distinction should provide straightforward predictions as to their effects on well-being. When the measure asks residents to recall positive social resources such as "getting good advice from a close friend" then it should relate to positive criteria. A measure that assesses shortcomings of a person's social network such as "family troubles frequently upset me" should relate to negative states. In short, measures should relate only to criteria that are in the same affective domain.

These predictions run counter to those of many community researchers, however, who search for ways that positive supports might reduce or deter negative states. Their application of social resource measures is one that inquires about *cross-domain* effects; i.e., when experiences in one affective domain influence the thoughts, feelings, and emotions in another domain. For example, the experience of "feeling supported" is a feature in the positive domain; researchers have claimed that such feelings should help buffer the person from distress and other negative emotions arising from stressful encounters with the social environment (Cohen & McKay, in press). Past evidence in life event research shows that the cross-domain effect of a positive limiting the expression of a negative is particularly rare (Zautra & Reich, 1983). Nevertheless, it would be valuable to identify conditions under which such cross-domain effects might be observed, especially since the application of such research to the prevention of mental health problems has appeared on the surface to be quite promising (Barrera, 1981; Cohen & McKay, in press).

One bridge across affective domains worth exploring is a cognitive one. Andrews and McKennell (1980) have estimated that as much as 33% of the variance in a person's overall evaluation of QOL is determined solely by cognitive factors. There are many cognitive processes thought to influence subjective ratings (cf. Brickman & Campbell, 1971; Gutek, Allen, Tyler, Lau, & Majchrzak, 1983). Those related to perceptions of personal control and a sense of mastery appear to hold the most promise for cross-domain effects (de Charms, 1972; Sandler & Lakey, 1982). For example, there is evidence that feelings of satisfaction and a sense of control are highly related. People tend to express greater happiness when experiencing events over which they feel they have some control (Rodin & Langer, 1977), and when events turn out positive, people tend to view themselves as responsible (Zuckerman, 1979). Control over aversive outcomes also appears to reduce stress reactions (Pennebaker, Burnam, Schaeffer, &

Harper, 1977). Generalizing from these findings it seems likely that the value of social resources would be sharpened for the person who sees support as arising from his/her own efforts. A sense of mastery in and with one's social network should boost self-esteem and, through strengthening self-definition (Epstein, 1976), bridge affective domains to reduce a person's vulnerability to distress and other negative affective states (Kobasa, Maddi, & Kahn, 1982). Along these lines, Pearlin and Schooler (1978) have suggested that self-reliance may be critical to effective coping.

Thus, one prediction of this study is that self-reliant types of resource measures will evidence cross-domain effects and buffer negative emotions under certain circumstances, but resources from external sources will not show such influences.

The characteristics of the measure itself do not provide complete information with which to predict outcomes. The value of social resources is likely to also depend on the life context of the person receiving support. one such context is the level of negative life events with which a person needs to cope. The stressfulness of unwanted life experiences, such as divorce, loss of job, and death of a loved one, has been well documented (Pearlin, Lieberman, Menaghan, & Mullan, 1981). Such distressing experiences put a person, if only briefly, at the extreme end of the continuum of negative emotion. The heightened pressures to cope caused by such distress (see Lazarus, Kanner, & Folkman, 1980) could modify the general rules governing the separation of affective states. Evidence that social supports promote adjustment only for persons who have experienced major stressful events has been reported (see Cohen & McKay, in press; and Heller & Swindle, 1983, for reviews).

A second life context within which social resources may vary in meaning is the person's stage of life (Danish, Smyer, & Nowak, 1980). People of different ages and sex often have different kinds of life stresses requiring different types of resources in order to adapt (Levinson, 1978). The presence of certain social resources may be especially critical for development at one stage in life, but not for another. Such distinctions could influence whether the value of a given resource is greater at a given life stage, and whether a measure crosses domains to have a global influence on QOL.

HYPOTHESES

A series of analyses were arranged to test the framework sketched out here. Three social resource measures were identified from a community survey that were clearly positive; one social resource measure assessed

shortcomings of the social resource network. Cognitive distinctions were also made among the three positive measures. Two measures clearly identified resources coming from internal sources: degree of self-reliant coping, and the degree of responsibility a person felt toward others. A third measure assessed resources that came solely from external sources: help from family and friends. To assess life contexts, frequency of negative life events was assessed as well as life-cycle characteristics: age and sex. Finally, QOL criteria were selected that would measure negative affects and distress separately from positive affects. An overall measure of QOL was also included.

In general, the analyses were expected to reveal that positive resources would relate primarily to positive affects, and negative with negative. Positive social resources would not cross domains to buffer distress unless (a) they implied a sense of mastery or personal efficacy and (b) the person was experiencing a stressful life context, e.g., many negative life events. No directional hypotheses were made concerning the role of life-cycle variables: age and sex. It was anticipated, however, that these variables would affect social resource availability and would influence how resources would be associated with QOL.

Existing data, collected in a previous survey, were used to test these propositions (see Block & Zautra, 1981). These data were collected at a single point in time so no causal inferences could be drawn from them. However, since the study was concerned primarily with the meaning of social resource measures, a semantic level analysis (Levy, 1963) was seen as appropriate to test the hypotheses without resorting to assumptions concerning the causal nature of relationships obtained.

METHOD

Subjects

A sample comprising 604 household addresses were selected from Swain's (1976) street directory of Tempe, Mesa, and Chandler, Arizona.[3] Residents of these addresses were mailed letters introducing them to the purposes of the survey and asking them to consent to an interview from a person who would soon come to their door. Of the initial sample of 604, 537

[3]This study utilized data collected from a previous community survey. An abbreviated description of the methods of data collection is provided here; those interested in a more detailed description are encouraged to consult Block and Zautra, 1981.

adult residents, 18 years of age or older, were interviewed. This represented 89% of the households selected; 7% of the residents refused and 4% could not be contacted during the 6 months of data collection.

There were 25 interviewers; they were male and female, undergraduate and graduate psychology students, ranging in age from 18 to 34. Each interviewer received 8 hours of training in survey administration and was given a randomly selected list of addresses from the pool of 604. Interviewers were instructed to ask the first person answering the door for an interview, but also to vary the sex of the respondent by asking for another member of the household if the previous interview was with a person of the same sex.

The interview itself lasted approximately 1½ hours. The measures discussed in this study comprised 90% of the interview. Demographic information was collected first followed by measures of perceived life quality, positive and negative affect, inquires about responsibilities, sources of discontent, and social support. Residents were next asked to fill out a 65-item life event schedule and then asked questions about psychiatric symptoms. The interview ended with an inquiry into the resident's values, a part of the study not reported on here.

Survey Instruments

Life-Cycle Measurement. A full complement of demographic information was collected in the survey. This study utilized information on age and sex differences because of the interest in contrasts between residents at different stages of life. Also, previous studies have revealed that life-cycle differences have the most striking effect on the number and quality of life events that residents experience (e.g., Karsten, Note 1; see also Zautra, Beier, & Cappel, 1977). Three age groups were identified such that each was different from the other on the frequency of at least five life events from a 65-item event inventory (described below) based on chi-square analyses across events. This procedure verified that experiences of residents in the three age groups were indeed different. Further, men and women were studied separately because of likely differences in their life-cycle demands, particularly in mid-age ranges. Based on these classifications, residents were placed into six life-cycle groups; men 18-24, women 18-42, men 25-54, women 25-54, men 55 or older, and women 55 or older.

Social Resource Measures. For two of the measures residents were asked: "When you have problems, things that are troubling you, which of the following often (sometimes or never) helped see you through those troubles?" A series of items followed, each scored from 1 to 3, never to often. The items were constructed from a content analysis of open-ended responses to the same question asked in a previous survey (see Zautra et al.,

1977). Two items signified *support from others:* "Your family?" (spouse, children, relatives, etc.) and "Your friends?", scores were obtained by summing responses to these two items. Two items were seen as signifying *self-reliance:* "Yourself, what you do?" and "Just relaxing, taking your mind off the troubles?" (by getting out of the house, taking a vacation etc.). Scores were obtained for this measure also by summation. A measure of *social responsibility* was constructed from open-ended responses to a previous survey (Zautra et al., 1977). Residents were asked "What responsibilities do you have to/for . . . . ?" followed by eight items: "Yourself—What you do for yourself?", "Economic or financial?", "Household?" (meals, dishes, etc.), "Family relationships?", "At work—whether volunteer or for pay?", "Friends/Neighbors?", "Church or community?", and "other?" Each category was scored 0 or 1 for not mentioned or mentioned. Social responsibility was scored as the sum of all items except "yourself—what you do for yourself" which was ambiguous in meaning to residents. Negative social resources were measured by asking the following question adapted from Gurin, Veroff, and Feld (1960), "Everyone has things about their lives they are not completely happy about. In your experience, which of the following are often the cause of you being less than completely happy with you life?" Among the items that followed, four were summed to obtain a score on *social network blame:* "Your family—how they get along with one another?", "Lack of opportunity (education, upbringing, etc.)?", "The way you are treated by your employer?", "Your social life—the number and kinds of people you can meet?" As with other measures, these items were derived from content analyses of open-ended responses to the same question asked in a previous survey (see Zautra, Young, & Guenther, 1981, for additional analyses).

Negative Life Events. A 65-item life event inventory was constructed for this survey by modifying previous event measures (Holmes & Rahe, 1967) and adding items in order to provide a comprehensive assessment of positive and negative events that had occurred to residents during the previous year (see Block & Zautra, 1981). Residents were asked to read over the event list, check off those life events that had occurred in the past 12 months, and rate whether the event turned out to be positive and/or negative. Negative events were scored as the sum of all events rated as having a negative outcome by residents. It should be noted that other rating schemes were tested for this measure including the use of consensus-rated negative events and events weighted by estimated magnitude of readjustment. The simple sum of subjectively rated events was of equal reliability and was more highly correlated with QOL indicators than events weighted by magnitude of readjustment. It was thought to be a more parsimonious indicator of life stress than other methods. Further, including positive events in a measure of life stress in any case was not seen as

defensible given its lack of correlation with measures of distress (see Block & Zautra, 1981).

Measures of Life Quality. Four criterion measures were selected each with a somewhat different mix of positive and negative affects. The positive and negative affect scales from Bradburn (1969) were used which provide uncorrelated scores in the two domains. A measure of overall Life Quality was obtained from the average score across the 17 items from the Perceived Quality of Life Scale (Andrews & Withey, 1976), suggested for use by the authors of that scale. In these items, residents were asked to rate, on a 1–7 scale how satisfied they were with themselves, their family, their standards of living, their health, job, neighborhood, and community. Last, a measure of Psychological Distress was obtained from scores on the Langner (1962) 22-Item Psychiatric Screening Inventory. The distress measure was thought to capture fairly severe expressions of negative states including symptoms of psychological impairment.

Analysis of the Data

The many planned comparisons in this study required that several steps be taken in the analysis of the data. Means and standard deviations of social resource measures were computed first, broken down by life-cycle group. Tests for between-group differences were made on these measures and on QOL criteria. Then Pearson correlation statistics were used to test for same domain versus cross-domain relationships among social resource and QOL measures. Following these analyses, social resources, life-cycle groups, and the life event measures were studied together with MANOVA analyses. Each social resource was tested separately as a factor in a design that included negative life events and life-cycle group as two additional factors. Interaction effects were predicted such that self-reliance and social responsibility would reduce negative affect when there were many negative life events, but not when a person reported few negative events. It was thought that such interaction effects may be conditional ones, dependent on life-cycle group. Specific predictions about interactions between life-cycle groups were not made, but were tested in the three-way MANOVA design.

RESULTS

Life-Cycle Differences

Means and standard deviations of the social resources measures are provided in Table I both for the total sample and for each life-cycle group.

Table I. Means and Standard Deviations of Social Resource Measures For Life-Cycle Groups

			Self-reliance		Support from others		Social responsibility		Network blame	
Group	Age	*n*	$\bar{X}$	SD	$\bar{X}$	SD	$\bar{X}$	SD	$\bar{X}$	SD
Men	18-24	56	5.05	.96	4.54	.85	4.46	1.14	6.71	1.64
Women	18.24	59	5.05	.86	5.02	.92	4.42	1.52	5.93	1.46
Men	25-54	112	4.93	.87	4.41	1.04	4.79	1.44	6.14	1.67
Women	25-54	146	4.70	.96	4.73	1.00	4.77	1.16	6.18	1.66
Men	55+	59	4.59	1.07	3.98	1.15	4.02	1.66	5.10	1.35
Women	55+	63	4.76	.98	4.49	1.31	4.10	1.50	5.20	1.31
Total		495	4.83[a]	.95	4.55[b]	1.08	4.52[c]	1.41	5.95[d]	1.63

[a] $F(5, 489) = 2.88; p < .05$.
[b] $F(5, 489) = 7.07; p < .001$.
[c] $F(5, 489) = 4.59; p < .001$.
[d] $F(5, 489) = 10.03; p < .001$.

Significant but not sizable group differences were observed for each measure. Generally, responsibilities were highest for mid-aged groups, male and female (t's = 2.98, 2.87, $p < 01$, and lowest for elderly men and women, combined ($t = -3.76, p < .001$). Compared to other groups, self-reliance was lowest in elderly men and women, combined, $t = -2.51, p < .02$. Support from others was most often reported by young women ($t = 3.65, p < .01$) and least often by older men ($t = -3.80, p < .001$). Social network blame was highest among young men ($t = 4.48, p < .001$) and lowest among men and women in the oldest age categories ($t = -6.54, p < .001$).

There were life-cycle differences on the criterion measures as well. The oldest residents (men and women combined) reported less positive affect, $t = -5.61, p < .001$, less negative affect, $t = -5.45, p < .001$, and less psychiatric distress, $t = -2.72, p < .01$, than other groups. However, the mid-aged sample of women and young males reported the highest distress ($t = 3.23, p < .001$; and the mid-aged sample of men reported the lowest distress of all groups, $t = -5.19, p < .001$. There were no significant differences among groups on overall life quality, $F(5, 496) = 1.42, p > .20$.

QOL Correlates of Social Resources

Pearson product-moment correlations among support measures and criteria are shown in Table II. As expected, support measures in general did not cross affective domains. Positive expressions of support including social responsibility coincided with reports of positive affect, but not less negative affect; social network blame was related to negative affect and psychiatric distress, but not positive affect. It is interesting to note that the report of

Table II. Correlations Among Measures of Support and Well-Being

	1	2	3	4	5	6	7	8
1. Self-reliance								
2. Supportive others	.24[b]							
3. Social responsibility	.10[a]	.15[b]						
4. Social network blame	.07	.03	.08					
5. Positive affect	.15[b]	.25[b]	.26[b]	−.03				
6. Negative affect	.01	.06	−.03	.34[b]	.04			
7. Psychiatric distress	.00	.03	−.02	.30[b]	−.03	.39[b]		
8. Overall life quality	.02	.10[a]	.08	−.39[b]	.31[b]	−.30[b]	−.31[b]	
9. Number of negative events	−.04	.03	.04	.33[b]	−.09	.32[b]	.34[b]	−.37[b]

[a] $p < .05$; $df \geq 510$.
[b] $p < .001$; $df \geq 510$.

failures of the social network was a stronger (negative) correlate of perceptions of life quality than reports of feeling supported by others, or any of the other social resource measures.

Tests of Interactions Between Social Resources and Life Context

In order to test for interaction effects between social resource measures, life events, and life cycle, scores on all resource measures were split at the median. Life event scores were similarly grouped; residents reporting three or more negative life events were compared with those reporting two or fewer negative events. Four three-way multivariate analyses of variance (MANOVA) were performed on those data, one for each social resource measure. All criterion measures were included for each MANOVA.

Of interest were significant two-way and three-way interactions involving life events and social resource measures. One of the four MANOVA revealed significant multivariate F's due to a two-way interaction of this kind: Self-reliance with negative life events, Wilks lamda $F(4, 496) = 3.35$; $p < .01$. The univariate F tests are shown in Table III. An analysis of simple effects revealed that self-reliance was associated with lower scores on psychiatric distress $F(1, 206) = 4.25$, $p < .04$, and higher scores on overall life quality, $F(1, 206) = 4.87$, $p < .02$, when there were many negative life events. When there were few negative events the differences were not statistically significant, but tended to favor a slightly lower quality of life overall for those with high self-reliant scores.

A three-way MANOVA interaction between social responsibility, negative life events, and life cycle was statistically significant, and was due to univariate effects on positive affect and negative affect as shown in Table IV. Inspection of the means showed that mid-aged women with few

Table III. Interaction Effects of Self-Reliance with High and Low Life Stress

A. MANOVA results for self-reliance by negative life events	*F*	*df*	*p*<	Standardized discriminant function coefficients
Wilks lamda	3.35	4, 496	.01	
Univariate tests				
Positive affect	.41	1, 499	ns	−.00
Negative affect	4.39	1, 499	.05	−.28
Psychiatric distress	6.72	1, 499	.01	−.47
Overall life quality	8.56	1, 499	.01	.63

	Negative life events	
B. Cell means on psychiatric distress	0–2	3 or more
Self-reliance		
Low	2.07	4.47
High	2.57	3.62

Table IV. Interaction Effects of Social Responsibility Life Stress and Life-Cycle Group

MANOVA results	*F*	*df*	*p*<	Standardized discriminant function coefficients
Wilks lamda	1.97	20, 1513	.007	
Univariate tests				
Positive affect	3.07	5, 459	.01	−.83
Negative affect	2.52	5, 459	.03	.69
Psychiatric distress	1.34	5, 459	ns	−.21
Overall life quality	.436	5, 459	ns	−.03

responsibilities had low scores on negative affect if they also reported few negative events, but the highest scores if they had many negative life events. Mid-aged women with many responsibilities fell between those two extremes; the number of negative life events did not affect their scores. The interaction effect on positive affect was the result of differences between men and women over 55. Elderly men with more responsibilities, unlike those with fewer responsibilities, reported lower positive affect when reporting more negative life events. In contrast, the elderly women who showed less positive affect with greater negative events were those with relatively few responsibilities.

There were no significant two-way multivariate interactions between life-cycle and social resource variables influencing QOL. Multicollinearity may have been a factor in the absence of interactions for the social network blame measure which had a moderate correlation with life cycle. Network blame was also associated with negative life events which also may have attenuated that set of interactions. However, it is important to note that the one measure closest in meaning to social support in this study, support from others, did not suffer from restrictions in its effects due to multicollinearity, yet the measure had no ameliorative influence on negative affect or distress and no life event interactions that would have been evidence for a buffer effect.

DISCUSSION

In general, the resource measures used here did not cross affective domains. As predicted, positive indicators, such as support from others, correlated with positive affective criteria. A negative resource, social network blame, was associated with negative affect and psychological distress. Cross-domain effects did occur in which positive resources were associated with less distress, but only for measures of self-reliance and social responsibility which were laced with implications of personal control and

mastery of the social environment, and only when the level of life stress over the previous year was high. Further, there appears to be important social/developmental differences in the value of one's social resources; social responsibility appeared to be associated with a better QOL for some groups and lower QOL for others, depending upon the age, sex, and life circumstances of the resident. In short, the relationships between social resources and well-being depended both on the cognitive-affective components of the resource and also on the life cycle and event contexts that surrounded its use.

The contrast between self-reliance and support from others is the most striking finding in this study. Consistent with the work of Pearlin and Schooler (1978), Pearlin et al., (1981), and also Brown (1978), residents who rated their personal coping capacity high expressed less negative affect and fewer signs of psychiatric distress when faced with many stressful life events. However, this self-reliant orientation did not make a person much happier; post hoc comparisons suggest that those with few negative events might have found that a self-reliant attitude brought a slightly lower QOL. Such differences were more than offset by the resistance to distress apparently felt among those with many life stress events during the previous year. These findings are consistent with expectations cited earlier. They give provisional support to the proposition that the self-system provides a bridge across affective domains; measures that assessed a person's perception of his/her efficacy were the best at showing buffer effects.

Why did support from others fail to reduce distress? Other studies of social support (Cohen & McKay, in press; Gottlieb, 1981) appear to show much more promising results. The answer may be found by inspecting the cognitive and affective language used in the measures. In the present study, support from others clearly was signifying help coming from external rather then internal sources. In other studies, however, personal competence is implied in the support assessment (see Cohen & Haberman, Note 2). Second, in this study there was no stated (or implied) negative anchor point connoting dissatisfaction and upset with support given. Positive support was either present or absent. Most other measures, however, assess highly positive and also highly negative reactions to social supports (e.g., Turner, 1981). Using the perspective taken here, it is not at all surprising that the support from others measure did not lower distress either directly or through interaction with stressful life events. It was not confounded either by the implication of personal mastery or by an assessment of dissatisfaction with support embedded in the measure.

Support from others, when stripped of its implications for personal mastery and discontent, did boost positive states. Pearlin et al. (1981) reported similar findings in their study such that "(social support) effectiveness is exclusively confined to helping (job losers) avoid the

lowering of positive self-concepts" (p. 349). Of course, when criterion measures are used that assess positive well-being as well as distress (e.g., Linn & McGranahan, 1980; Williams, Ware, & Donald, 1981), main effects and even interaction effects for social support might be observed. These effects are not, however, what most investigators hope for in predicting stress-buffer effects. The distilled measure of support used here showed little evidence of direct or interactive links to psychiatric distress; careful analysis of other studies shows such evidence is lacking there as well.

Thus social support per se is the wrong place to look for stress buffers. A self-reliant attitude while coping with stress and not a benign social climate is most likely to coincide with fewer negative feelings and emotions. Certainly social systems can be impoverished, provide less than what is expected, and be blamed. The lack of support can hurt when missed. Its presence in itself, does little to help. The underlying active agent in coping with stress is the person and not the support network.

Measurement is always embedded within a context. Two types of contexts were monitored in this study; an event context and a social/developmental one. Both appeared to influence the meaning of social resources. With many negative life events, the value of self-reliance and social responsibility (for some groups) increased. An increased demand for coping is a likely cause. Lazarus et al. (1980) have suggested that positive feeling states may reduce negative states during stressful times (cf. Cohen & McKay, in press); there is also some empirical evidence to support such a claim (Reich & Zautra, 1981). Here the same subjects are not observed under different levels of life stress nor could they be randomly assigned to such "treatments," so only consistent and not definitive support is provided here for the hypothesis of life-stress mediated cross-domain effects.

Only limited attention could be paid to the social/developmental distinctions among residents. Specific implication of findings should await further and more elaborate study of life-cycle differences in resource need and utilization. Findings presented here nonetheless do demand close attention: Life-cycle groups showed pervasive differences in the levels of social resources available to them, and, in the case of social responsibility, how that resource related to their judgments of QOL. Many studies have assessed QOL components separately for groups differing in age and sex; few test whether QOL measures take on different and, at times, opposite affective values depending upon the age and sex of the respondent. Many adaptive tasks vary considerably across the life-span; more needs to be known about the resources most helpful at each stage in life.

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