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SOCIAL SUPPORT AND WELL-BEING IN CONTEMPORARY GREEK SOCIETY: EXAMINATION OF MULTIPLE INDICATORS AT DIFFERENT LEVELS OF ANALYSIS

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ABSTRACT. An extensive and coherent body of social and psychological research has identified social ties and supportive relationships as important predictors of well-being and quality of life. This paper examines the relationships between structural and functional indicators of supportive relations and well-being in Greece at different levels of analysis based on results from three studies: (a) the European Social Survey (Study 1); (b) a cross sectional community study in Greece (Study 2); and (c) a social interactions study in Greece and the UK using an event sampling methodology (Study 3). Structural indicators of social support and life satisfaction and happiness in the first study were moderately associated. This finding was partly supported by results from the second study which revealed connections between some structural aspects of social support and well-being (happiness, anxiety, irritability) but not others. Functional aspects of social support and psychological indicators of well-being (happiness, anxiety, mental health) at the individual (Study 2) and social interaction (Study 3) levels were not associated. Crosscultural comparisons of structural indicators of social support in Studies 1 and 3 revealed low frequency of social interactions. Also functional aspects of social support in everyday social interactions in Greece showed significantly lower levels in comparison to the UK. These findings suggest that structural and functional aspects of social support in Greece may not have the same palliative role as usually observed in the international literature and are discussed with particular attention to the level of analysis, the method, and the aspect of well-being being assessed.

KEY WORDS: multilevel analysis, social support, well-being, social interaction

1. INTRODUCTION

In the last two decades, multidisciplinary research programs in the social sciences have established the key role of social relations for health and wellbeing (e.g., Cohen, 2004). A sizeable body of evidence has shown consistent links between inadequate levels of social support and poor physical and mental health (Williams et al., 1981; Sarason et al., 1997). The magnitude of the evidence has been such that House et al. (1988) proposed social support as a fundamental correlate and 'insufficient social support' as a risk factor for health.

However, 'social support' is a broad, not easily defined construct as it covers the many ways in which people behave, and are perceived to behave, supportively towards one's self. Part of the complexity is due to the various ways in which social support has been conceptualized and operationalized. Researchers typically distinguish between structural (distal) and functional (proximal) aspects of social support. Structural aspects (network size, frequency of interactions, type of relationships, marital status, membership within organizations etc.) deal with the 'mere existence of social relationships' (Helgeson, 2003) and have usually been examined with cross-sectional designs and epidemiological type surveys. Conversely, functional measures of social support are typically the concern of psychological research and have been examined with reference to psychological resources such as: emotional, instrumental and informational support, and support satisfaction.

The aim of this paper was to examine the effects of both structural and functional aspects of social support on several aspects of well-being in Greece, in three levels of analysis: the cross-cultural, the individual/cross-sectional, and the social interaction. The examination of multiple social support and well-being indicators from three different studies allowed certain comparisons between levels of analysis contributing to the validity of the findings.

Firstly, data from the European Social Survey (ESS; Jowell and the Central Coordinating Team, 2003) allowed some cross-cultural comparisons of structural social support indicators (i.e., frequency of social meetings in 22 European countries) and the connection of those with reported life satisfaction and happiness. The second source of information was a crosssectional study on social support and well-being across the life-course in Greece (see Kafetsios, 2002; Kafetsios and Sideridis, 2006). This study included more psychologically focused measures of structural and functional aspects of social support (having a partner, frequency of interactions with acquaintances and friends, number of supportive persons, support satisfaction) and well-being (measures of anxiety, irritability and general psychological health). The third study used an event sampling methodology to look at emotions and social support in social interactions in Greece and the UK. This allowed to examine cross-cultural differences in structural and functional facets of support in daily social interactions and also to test for the effects of those on well-being (positive emotions, negative emotions, anxiety and mood).

1.1. Links between Structural and Functional Aspects of Social Support and Well-Being

Researchers have acknowledged that structural and functional facets of social support exert a differential effect on well-being (Lin et al., 1999; Helgeson, 2003). General, epidemiological-type, models of health and social relations consider structural aspects of social support to be responsible for direct effects on health and well-being and functional aspects of support to mediate stress (Cohen and Wills, 1985; Kawachi and Berkman, 2001). Psychological research on social support tends to agree that structural aspects of social support are generally unrelated to well-being, whereas functional aspects of social support are related to well-being. For example, Nezlek (2000) argued that studies using event-sampling methodologies consistently show a lack of relationship between quantity of social interactions and well-being. This finding has been observed with collegiate and community samples, different measures of well-being, and different measures of interaction quality. Nonetheless, psychological research tends to identify functional indicators of social support as predictive of well-being. For example, recent studies in Portugal and Israel have shown that satisfaction with support is a strong predictor of well-being above and beyond personality variables (Priel and Shamai, 1995; Moreira et al., 2003).

Like social support, well-being has been an elusive construct both conceptually and operationally. On the one hand, research on subjective wellbeing has examined general, trait-like levels of satisfaction and happiness (Diener et al., 1995). Related work has focused on positive and negative affect and emotion also in relation to subjective well-being (Suh et al., 1998). On the other hand, research focusing on social relations and quality of life has employed scales more focused on mental health outcomes. Following criticisms for the narrow focus of such research on some psychological and well-being indicators (Shumaker and Hill, 1991) the present paper examined a wide range of psychological health indicators ranging from subjective wellbeing and happiness, psychological-type scales of psychological health and positive and negative emotion in everyday interaction. These are described in detail in the section following.

Another aim of this paper was to examine social support and well-being indicators at different levels of analysis. With few exceptions (see Wheeler et al., 1989; Nezlek, 2000), structural and functional aspects of social support have been typically tested at the cross-sectional level. Studies that use global or undifferentiated measures or proxy measures of social support may be limited in that they may not be sensitive to potentially important

differences in types of social support. Similarly, most of the research on wellbeing followed cross-sectional designs. This article is in keeping with classic views on the levels of analysis (Doise, 1986; Hinde, 1995) comparing information from one time surveys with data that come from studies that used event sampling methods to study social interactions nested within individuals and cultural contexts.

With regards to the specific cultural context that unites these studies, examining social support and well-being in the Greek society can be informative, given that most of the research has focused on highly individualistic cultural contexts. Greece is generally considered to be a more collectivist social context (Hofstede, 1983) and it is well documented that social support differs considerably on the individualism–collectivism continuum (Kim et al., 1994). People in individualist cultures exhibit higher need for affiliation (Hui and Villareal, 1989) and report more extensive social networks than persons in collectivist cultures. People in collectivist contexts may interact with fewer people but tend to have more intimate relationships (Wheeler et al., 1989) and ties with their close relatives are expected to be more diverse (Triandis, 1994; Georgas et al., 1997).

1.2. Summaries of Aims and Hypotheses

The main aim of this paper was to examine the associations between structural and functional aspects of social support and well-being indicators in the Greek society. It was expected that structural social support would have a weak relationship with a variety of well-being indicators. Conversely, and based on the available evidence from both Anglo-Saxon and some more collectivist social contexts, functional aspects of well-being were expected to have a strong relationship with well-being. It was also expected, based on previous cross-cultural comparisons, that Greek participants will report lower levels of structural social support and well-being. A general aim of the study was to compare indicators of social support and well-being in the three levels of analysis.

2. THE 3-STUDY DATA SETS

2.1. The European Social Survey

The first dataset was part of the most recent European Social Survey $(EES)^1$ (Jowell and the Central Coordinating Team, 2003). The study was carried out in 22 European countries, including Greece, and data were collected

from a total of 42,539 Europeans. Data from Greece were collected from 2566 participants with structured interviews in which the researcher was delivering the questions to participants. Sampling was representative of geographical areas, of gender (56.6% females), of age (range: 16-99 years, mean = 50.66, SD = 19.21), and of social status.

The measures of interest for the analyses in this paper were general questions of breadth of social networking, life satisfaction and happiness. One question asked participants to report frequency of social meetings with friends, relatives and co-workers ("How often do you socially meet with friends, relatives and co-workers?") using a 7-point scale (1 = never, 2 = less than once a month, 3 = once a month, 4 = several times a month, 5 = once a week, 6 = several times a week, 7 = every day). Two other questions asked participants to report level of life satisfaction and happiness ("Taking all things into account, how satisfied are you currently with your life?" and "Generally, how happy would you say you are?") using two 10-point scales, respectively. A demographic question about living with partner was also used as an indicator of structural support.

2.2. A Cross-sectional Study on Social Support and Well-Being Across the Life Course in Greece

The second dataset was from a community study (Kafetsios, 2002; Kafetsios and Sideridis, 2006) that employed a more psychological conceptualization and operationalization of social support and well-being. The study took place in Northern Greece in 2001 and 2002 and involved 222 participants (110 males). Sampling was opportunistic via student and friend networks. Participants' mean age was 34.6 years (SD = 12; range: 18–66 years). Forty one percent (41%) of the participants had completed secondary education, 37% had a University degree and 19% had a post-graduate degree. Seventy four percent (74%) of the sample were married or in a long-term, permanent relationship and 80% were in full employment, equally distributed among the different age groups.

Structural aspects of social support were assessed using two questions asking about frequency of interaction with acquaintances and close friends² during the past week. Structural (Part A – number of supportive persons) and functional (Part B – satisfaction with support received) aspects of social support were measured with the short form Social Support Questionnaire (SSQ, Sarason et al., 1987). This is a widely used measure of perceived social support. The internal consistency of the scale was good (Cronbach's $\alpha = .92$ and $\alpha = .89$ for the two parts).

Psychological well-being was assessed using (a) the Trait Form of the State-Trait Anxiety Inventory (Spielberger et al., 1970), a 20-item scale that assesses participants' vulnerability to anxiety experiences (Cronbach $\alpha = .84$) and (b) the General Health Questionnaire (GHQ, Goldberg, 1978), a 20-item scale that assesses the participants' current mental health (Cronbach's $\alpha = .72$). The GHQ assesses depression, state anxiety, somatic symptoms and social dysfunction with higher scores denoting poor mental health.

Irritability was assessed by asking how frequently during the last month participants felt nervous, elated, upset, calm or 'in a bad mood' in 4-point scales (Cronbach's $\alpha = .79$). Finally, happiness was assessed with one item, requesting participants to report how frequently they felt happy during the last month on a 4-point scale.

2.3. A Diary Study of Affect and Social Support in Everyday Social Interactions in Greece and the UK

The third study was part of a cross-cultural study on affect and social support in everyday social interactions in Greece and the UK (see Kafetsios and Nezlek, 2004). The study was conducted in Thessaloniki (Greece), Rethymno (Greece) and Cambridge (UK) between May 23 and May 31st in 2003 and was repeated again the same period in 2004 within the context of three universities to aid comparability of results. The Greek sample consisted of 50 student participants with a mean age of 22 years and 34% of who were males. The UK sample included 22 student participants with a mean age of 20 years and 33% of them being males. Data were collected on 1264 interactions in Greece (an average of 27.7 interactions per person per week) and 908 interactions in the UK (an average number of 39 interactions per participant per week).

The study involved participants keeping records of all the interactions they had during the period of seven days that lasted *for* more than 10 minutes each using a variant of the Rochester Interaction Record (RIR: Wheeler and Nezlek, 1977). The RIR asked information about the duration of the interaction and asked participants to indicate whether the person s/he interacted with was a family member, an acquaintance, a friend, a close friend, or a best friend.³ Participants were also instructed to rate their emotional experience during the interaction using 10 emotion terms – happy, enthusiastic, relaxed, attentive, active, anxious, distressed, sad, angry, and rejected⁴ – on 7-point bipolar scales with endpoints labelled "not at all" and "very much." They also rated their overall mood on a scale that ranged from -3 to +3 with endpoints labelled "positive" and "negative" and answered three questions on how supportive they felt the interaction was as a whole (on a 7-point scale). At the end of the week participants also completed the short form Social Support Questionnaire like in Study 2 (satisfaction part Cronbach's $\alpha = .93$).

3. RESULTS

3.1. Cross-Cultural Comparisons of Structural and Functional Aspects of Social Relations

Before examining the association between social support and well-being I first tested the prediction that structural aspects of social support differ as a function of the degree of individualism in the country as suggested by Wheeler et al. (1989). Study 1 and 3 allowed for such an examination as they involved cross-cultural comparisons (First level of analysis). The ESS allowed for direct comparisons of frequency of social interaction in the 22 European countries that were studied and Table I shows the average frequency of meetings in 22 European countries. In Greece participants reported the second lowest average frequency of social interactions among 22 European samples. Incidentally, participants in Greece also had the fourth lowest score in life satisfaction and happiness on a 10-point scale (mean = 6.26, SD = 2.38, and mean = 6.50, SD = 2.25, respectively) after Hungary, Poland, and Portugal among the 22 countries surveyed (European average for life satisfaction and happiness, mean = 7.03, SD = 2.26, and mean = 7.36, SD = 1.98, respectively).

To formally test for the observed differences on social networking in the 22 European countries, effect size analyses were performed (Cohen, 1988). This method was preferred over more conventional methods (e.g., one-way ANOVA with post-hoc tests) to guard against Type I error as a result of the large sample size. In 15 out of 21 comparisons, comparing Greek average ratings against that of the rest of the countries, the effect size exceeded the .50 level which Cohen (1988) considers as a medium effect size. In five cases the effect size exceeded the .80 level which is considered as considerably high.

The third study allowed comparisons of structural aspects of support in everyday social interactions using event-sampling methods. Table II shows the average frequency of interactions with relatives, friends and close friends in Greece and in the UK. The categories of 'Acquaintance' & 'Friend' were collapsed into one ('Friends') as well as those of 'Close and Best Friends'. As it can generally be observed, the average frequency of social interaction in Greece was lower than in the UK.

TABLE I

Average ratings of frequencies of social meetings in 22 European countries

Countries	N	Mean	SD	
Austria	2249	5.07	1.48	
Belgium	1896	5.15	1.50	
Switzerland	2037	5.25	1.29	
The Czech Republic	1354	4.43	1.54	
Germany	2917	4.87	1.41	
Denmark	1498	5.39	1.23	
Spain	1709	5.34	1.59	
Finland	2000	5.17	1.40	
France	1501	5.21	1.47	
United Kingdom	2049	5.08	1.47	
Greece	2560	4.15	1.76	
Hungary	1684	3.81	1.82	
Ireland	2040	5.06	1.44	
Israel	2486	5.36	1.50	
Italy	1203	4.83	1.70	
Luxembourg	1543	5.05	1.62	
The Netherlands	2364	5.29	1.35	
Norway	2036	5.75	1.29	
Poland	2105	4.31	1.65	
Portugal	1511	5.56	1.72	
Sweden	1998	5.32	1.30	
Slovenia	1516	4.57	1.63	
Total	42,255	5.00	1.58	

Note: Results are weighted for sampling representativeness.

TABLE II

Average number of interactions with family, friends and close friends in the UK and Greece per week

	UK (N=22)	Greece $(N = 29 - 50)^{a}$	
Family	9.5	5.0	$F(1, 49) = 7.9^{**}$
Acquaintance/Friends	13.9	11.6	F(1, 70) = .91 n.s.
Best/Close friends	15.4	11.1	F(1, 67) = 4.4*
Total average	38.8	27.7	$F(1, 49) = 12.05^{***}$

Note: *p < .05; **p < .01; ***p < .001. ^aNot all Greek participants reported interactions with family.

These findings on cross-cultural comparisons of structural aspects of social support between Greece and other European countries (especially Northern-European) concur with expectations about differences between individualist and collectivist societies discussed in the introduction.

3.2. Structural Aspects of Social Support and Life Satisfaction and Happiness: The European Social Survey Data

To test for the palliative effects of structural aspects of relating on well-being in the first study, two multiple regression models were examined using age, net income, living with a partner, and frequency of social meetings as predictors of life satisfaction and happiness. Net income was included in the model in order to ascertain that the observed associations between social networking and aspects of well-being do not reflect mere economic capability to maintain social relations. As can be seen in Table III, the two structural aspects of social support (frequency of social meetings and living with a partner) had unique moderate contributions to life satisfaction and happiness.

Following recent findings for a strong, differential effect of social support on well-being in later adulthood in Greece (Kafetsios and Sideridis, 2006), separate analyses were conducted for older and younger age groups (using the cutting off age of 35 years). The first group included 455 participants between the age of 16 and 35 (mean age: 27 years, SD = 5.6) and the second group included 1358 participants between the age of 36 and 68 years (mean age: 51.5 years, SD = 10.1). In both groups we observed the same direction of effects as in Table III.

Multiple regressions of two well-being indicators on structural aspects of

ral	ating	

	Life satisfaction	Happiness	
Age	06**	05**	
Net income	.11***	.11***	
Living with partner	11***	17***	
Frequency of social meetings	.18***	.23***	
R^2	.08	.12	
<i>F</i> (4, 1814)	36.08***	57.76***	

(controlling for age and net income)

Note: Living with partner was coded as 1 = married/living with partner, 2 = alone. **p < .01; ***p < 001.

TABLE IV

Multiple regressions analysis of psychological well-being on structural aspects of relating (controlling for age)

	Нарру	Anxiety	Irritability	GHQ
Age	.19**	36***	19*	13
Having a partner	.03	10	14	16*
Frequency of interactions with acquaintance	06	.15*	.02	02
Frequency of interactions with good friends	.24**	06	16*	09
Number of supportive persons	.02	02	.08	04
Satisfaction with social support	.10	05	01	.13
R^2	.10	.20	.09	.04
<i>F</i> (6, 198)	3.35***	7.43***	3.01**	1.84 ns

Note: GHQ = General Health Questionnaire. Having a partner was coded as 0 = No partner, 1 = having a partner. *p < .05; **p < .01; ***p < .001.

3.3. Structural and Functional Aspects of Social Support and Psychological Aspects of Well-being: A Community Study on Psychological Well-being

In the previous section I presented analyses on the effects of a structural measure of social support on life satisfaction and happiness from the ESS. Analyses in this section concern more specific quantitative aspects of social relations (frequency of interaction with acquaintances and close friends during the past week, having a partner, number of supportive persons) as well as a general indicator of functional social support (satisfaction with support).

Table IV reports the standardized regression coefficients from multiple regression analyses. In these analyses, four structural indicators and one functional indicator of social support were used to predict psychological well-being outcomes (happiness, anxiety, irritability, and psychological health). Age had a positive correlation with happiness, and a negative correlation with anxiety, irritability and general health. Having a partner, a structural aspect of social support similar to the one examined in the ESS data, had positive, albeit not at statistically significant levels, association with anxiety and irritability and a negative association with psychological health. Frequency of interaction with acquaintances had a positive association with anxiety but frequency of interaction with good friends had a positive association with happiness and a negative association with irritability. It should be noted that a separate stepwise regression showed that in predicting happiness, frequency of interactions with acquaintances became significant after controlling for having a partner or not. Also, a summative indicator of frequency of interaction was tested in a separate set of analyses but was not significant in most of the cases.

It is notable that neither number of supportive persons, nor satisfaction with support, contributed significantly to the overall regression models presented in Table IV.

There were some distinct age differences observed in the association of social support with anxiety and the GHQ (discussed in more detail in Kafetsios and Sideridis, submitted). Briefly, in the older age group satisfaction with social support (but not number of supportive persons) had a significant negative association with anxiety and mental health.

3.4. Structural and Functional Aspects of Social Support in Everyday Social Interactions

As observed in the previous analyses, structural aspects of social support such as frequency of social interactions tend to differ consistently between Greece (a more collectivist cultural context) and countries characterized by more individualist structuring of the self and social relations. Findings from the second study also suggest that some structural and functional aspects of support are unrelated to psychological well-being. The analysis in this section aimed to address and validate these results by examining structural aspects of social support and affective well-being in everyday social interactions. This approach followed recent work, and showed that positive and negative affect constitutes a potent indicator of well-being as they both correlate significantly with life satisfaction and happiness (Suh et al., 1998).

Event sampling methods, such as the one employed in the third study, have several methodological and statistical advantages over cross-sectional methods. For example, cross-sectional research has limitations to do with cross-contamination of measures. Using event-sampling methods of social interactions, such as the RIR, allows the examination of parameters of actual interactions with others. This use of self-report allows to more fully "understand others' imputation of meaning for what occurs in their lives" (Harvey et al., 1988, p. 100). In this study structural and functional aspects of social support were measured at the individual level, i.e., Level 2 of the multilevel analysis. It regarded the average number of friends and close friends, average duration of interacting with friends and close friends, and number of perceived supportive persons. Also affect and perceived satisfaction of social support at the level of everyday social interaction (Level 3) were assessed.

The data were analysed using Multilevel Random Coefficient Modelling (MRCM, using statistical package HLM: Raudenbush et al., 2004). Multilevel models like this present significant analytical advantages discussed in detail in Nezlek (2001). For example, ordinary least square regression methods used in some studies of daily social support (e.g., Cutrona, 1986) present serious shortcomings as they do not examine how associations between variables may vary across people. There is an increasing agreement that multilevel random coefficient modelling techniques provide the most accurate analyses of the types of multilevel data structures under consideration (e.g., Bryk and Raudenbush, 1992; Kenny et al., 1998).

Relationships between structural and functional aspects of social support and everyday affect in Greece were examined at Level 2 (the person level) with the following model:

$$\beta_{0j} = \gamma_{00} + \gamma_{01} (\text{Count Friends}) + \gamma_{02} (\text{Count Close Friends}) + \gamma_{03} (\text{Duration Friends}) + \gamma_{04} (\text{Duration Close Friends}) + \gamma_{05} (\text{Number of Supportive Persons}) + \gamma_{06} (\text{Satisfaction with Social Support}) + u_{0j}$$

In these models, variables were grand mean centred (Bryk and Raudenbush, 1992). Separate models were calculated to predict affective outcomes in everyday social interaction: positive emotions, negative emotions, anxiety and mood. Distinguishing positive, negative emotions and anxious affect (anxiety, distress) was the result of an exploratory factor analysis (principal components) which revealed three main factors accounting for 46% of the variance in everyday emotions. Mood was measured with a single question.

Results from all four analyses showed that none of the structural indicators of social support added significantly to the model. Also, in three out of four models satisfaction with social support had very small (and not statistically significant) contributions to positive and negative emotions and mood. However, in the case of the anxious emotions outcome, satisfaction with social support had a statistically significant positive association with anxiety ($\beta = .04$, p < .01).

3.5. Cross-Cultural Comparisons of Functional Aspects of Social Support in Everyday Social Interactions

The third dataset also included information of satisfaction with social support at the social interaction level, i.e., Level 3 of the multilevel analysis.

It regarded the degree to which each social interaction in Greece and the UK was perceived as satisfactory. This allowed a direct comparison between the two countries. It should be noted that the report format (contextualized assessments of satisfaction with social support) added validity to the study results.

The association between mean satisfaction with social support ratings and country (UK = 1, Greece = 2) were examined at Level 2 (the person level) with the following model:

$$\beta_{0i} = \gamma_{00} + \gamma_{01}$$
(Country) + u_{0i}

The results from the MRCM analyses suggested that country had a significant effect on mean support ratings in everyday social interactions. The coefficient at Level 2 was significant ($\beta = -.07$, p < .01) suggesting that participants in the Greek sample had significantly lower satisfaction in everyday interactions.

4. DISCUSSION

This paper utilized data from three different studies to examine associations between structural and functional aspects of social support and well-being at three levels of analysis: cross-cultural (Level 1), individual (Level 2), and social interaction (Level 3). The results from the three studies suggest that structural and functional aspects of social support in Greece may not have the same functions as usually observed in the international literature.

With regards to the associations of structural social support on well-being, analyses from a large representative survey demonstrated that frequency of social relations had a moderate positive relationship with happiness. This finding was partly supported by results in the second study that utilised psychological indicators of well-being as outcome variables. In that study, frequency of interactions with good friends (but not acquaintances or total number of interactions) was positively associated with happiness and inversely associated with anxiety. Frequency of interactions with acquaintances had a moderate positive association with anxiety, something that concurs with findings that social support does not always have positive effects (Rook, 1984). However, in the third study, quantitative aspects of everyday interactions were not associated with positive or negative affect during the interpersonal exchanges. This finding is consistent with the general social interaction literature that shows frequency of social interactions not to have an effect on positive/negative emotion or mood (Nezlek, 2000, 2001).

Cross-cultural comparisons of structural social support indicators between Greece and other European countries showed significant differences. Responses to a summative question about frequency of social meetings with friends, relatives and colleagues were among the lowest in 22 European states. Results from the third, everyday social interaction study also supported that finding by showing that average number of interactions per week with relatives, friends and close friends was significantly lower in Greece than in the UK. These findings support the counterintuitive observation that in more collectivist cultural contexts people have fewer interactions than in more individualist cultures (Wheeler et al., 1989). One could not fail to notice that ratings of frequency of social networking from a representative study was particularly low given that other South-European countries (Spain, Portugal) are characterised by distinctively higher levels in the frequency of social interaction as these data suggest.

Whereas there was evidence of the effects of structural social support on well-being, results from the second and third studies found weak associations between indicators of functional social support (i.e., perceived satisfaction with social support) and well-being indicators (happiness, anxiety, or distress). This kind of associations was found both at the individual and social interaction levels of analysis (Level 2 and Level 3, respectively). In students' everyday social interactions (study 3), satisfaction with social support was not related to either mood or positive/negative emotion in everyday social interactions. Surprisingly, satisfaction with social support was positively associated with anxiety and distress. In the cross-sectional community study (study 2), when results were examined for the older age group (ages between 36 and 68) satisfaction with social support was predictive of lower anxiety and better general health but this was not found for the younger age group. Furthermore, age was overall positively associated with happiness and inversely related with anxiety, irritability and distress. These results are in keeping with Carstensen's socio-emotional selectivity theory (Carstensen et al., 2000) and evidence that older generations are characterised by lower levels of anxiety and neuroticism (Twenge, 2000) and provide support to it from a more collectivist context.

Overall, perceptions of social support in Greece do not seem to have the salutary function observed in other cultural contexts and this was verified using both cross-sectional and event-sampling methodologies. The rather weak, overall effects of satisfaction with social support on well-being were not anticipated given results from recent studies that demonstrate independent effects of social support on well-being in student samples (Priel and Shamai, 1995; Larose and Bernier, 2001; Moreira et al., 2003). However, a

few studies on related topics in Greece in the past decade seem to concur with these results (Georgas and Dragona, 1989; Thorpe et al., 1992; Papadatou et al., 1994; Pomaki and Anagnostopoulou, 2003). Results from cross-cultural comparison of functional aspects of social support in everyday interaction from the third study suggest that at least in the younger age group, social interactions in Greece are less satisfactory than in more individualist cultural contexts such as the UK.

Nevertheless, one should be careful not to dismiss possible positive effects of social support in younger age groups since alternative explanations for the effects of invisible support could not be excluded (e.g., Bolger et al., 2000). Given that the measures employed in these studies only addressed perceptions of social support, future research should examine perceived, received and implicit sources of social support and their effects on wellbeing.

Finally, there was an inconsistency between the findings of the ESS study (Study 1) and those of the two other studies that deserve elaboration. In the first study, frequency of social meetings (a structural social support indicator) had moderate effects on happiness and satisfaction and this was not observed (at least so strongly) in the two other studies. One possible explanation would be that answers to the particular question in the ESS study reflected both frequency and diversity of social networks. Psychological research has demonstrated the importance of diversity of social networks on health (Cohen et al., 1997) and this aspect should be distinguished from mere frequency of interactions. It is also known that results based on single item questions are inherently problematic especially when they request participants to implicitly estimate behaviours that took place over some period of time.

The comprehensive analyses put together here have some further limitations. Most notably, the first and the second studies involved participants from a wide age range whereas the third study was limited to a younger age group. Hence, results about the effects of structural and functional support in social interactions cannot generalise beyond the particular age group and future research is called to extend these findings.

With methodological caveats taken into account, information from all three studies and levels of analysis (cross-cultural, individual and social interaction) paints a rather bleak picture of the effects of social ties in wellbeing in contemporary Greek society. Some structural and functional indicators of social support are lower than in more individualist cultures in Europe and the effects of those on well-being seem to be marginal and concerning primarily older persons. It is possible that younger Greeks' psychological health is not affected by social support. Explanations for this could be sought to changing cultural practices in the Greek society (Georgas, 1989). In the last 20 years Greek society's transition from collectivism to more individualist economic and social structures was swift and changes in the norms of social behaviour may have changed quicker than general perceptions have. For example, casual observations of changes in everyday life and behaviour suggest that socially imposed gatherings (family, community celebrations) have significantly subsided, without giving way to an individually based arrangement of social space, as at the symbolic level Greeks still seem to operate as a collectivist culture (norms and pressures for ingroup- and outgroup differentiation and family-led patterns of behaviour). Future social and psychological research should explore the validity of these informed observations and the implications for social relations and well-being across the life course.

Surely, the results of these analyses have important implications for the planning of social policy in Greece as they resonate with notions of social capital and well-being. Social capital, a concept familiar to policy makers, incorporates notions of social relationship and the integration of the person in wider structures (Kawachi and Berkman, 2000).

NOTES

¹ From the Norwegian Social Science Data Services as the data archive and distributor of the ESS data (http://ess.nsd.uib.no)

² Terms in Greek: gnostos/i=acquaintance; poly stenos/i filos/i=close friend.

³ Terms in Greek: Melos oikogenias = family member; Gnostos/i = acquaintance; Filos/ i=friend; Kalos/i filos/i = best friend; Poly stenos/i filos/i = close friend.

⁴ Terms in Greek: eftihis=happy; lipimenos/i=sad; thymomenos/i=angry; enthousiasmenos=enthusiastic; agxomenos=anxious; piesmenos/i=distressed; halaromenos/i=relaxed; prosilomenos/i=attentive; eho aporifthi=rejected; drastirios=active.

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