

Financial and Informational Social Support for the Residents of the České Budějovice Region

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Abstract

Social support is a highly discussed topic not only abroad but also in Czech literature. The entry focuses on the topic of social support experienced by selected residents of the České Budějovice Region and presents the results of the conducted survey that included 700 respondents in total. The objective of our entry is to describe the subjective assessments of different dimensions of social support of selected residents. The questionnaire focused on three areas of social support: financial (instrumental) support, daily activities support, and information support. The results describe significant relations between these areas of social support and other selected questions. A statistically significant relation was however detected between financial support and sex, in which women receive help more frequently than men. Financial support is more often demanded by persons younger than 30. Older persons were more likely to receive such help. There was however discovered a statistically significant relation for socio-economic status and subjective assessment of quality of interpersonal relations.

Keywords: financial support, social support, social integration, social determinants of health

Introduction

Despite the fact that the term “social support” is relatively new according to Mareš (2002), there -are several definitions in the literature (f.e. Čeněk, Smolík and Vykoukalová, 2016) that focused on this topic. Caplan (1974) describes social support as a system of formal and informal relations via which people gain resources to cope with stressful situations.

According to Cobb (1976), social support is defined as information that lead people to the assumption that they are loved, respected, and belong to a network of social relations.

In the Czech Republic, Křivohlavý (2001, p. 94) focuses on the topic and states that social support in the broader sense is defined as help that is provided by other people to a person who is in a stressful situation. Social support, according to Krpoun (2012), can also be understood as help or support that an individuum receives in situations that they understand as difficult. Such situations do not only have to be stressful situations but also common everyday moments that the majority of us experience regardless of vocation, health, or age (Krpoun, 2012).

Social integration of a person into the social structure is a significant determinant for their mental health and well-being (Šolcová and Kebza, 1999). Via social connections with others, groups, and the society, an individuum gains access to social support, meaning a sort of social fund from which individuals can gain resources if needed – a system of social relations via which people get access to help when trying to accomplish goals and fulfil demands (Šolcová and Kebza, 1999). The support resources are part of the social network of individuals (Šolcová and Kebza, 1999). These resources are primarily family, close friends, neighbors, coworkers, the community, and professionals (Kebza, 2005). Social support is an important issue in socially segregated areas and it's close connected to public health (Kozubik et al., 2018, Kozubik et al. 2019).

Social support can be divided into several categories. According to Křivohlavý (2001), social support can be categorized into three categories: a) the macro level, meaning state-wide social and economic support, or help across state borders, e.g. for areas impacted by natural disasters. Urban and Kajanová (2013) mention the example of help from social services, the system of social security, etc. The second level is the meso level that according to Křivohlavý (2001) includes help of a certain social group to one of its members or to some of their neighbors that are not part of the group but are in need – e.g. members of a sports team helping another member, etc. The last level is the micro level, on which a person is helped by a person closest to them (social support as part of a dyad – a couple of people: e.g. a mother helping her child, a spouse helping the other spouse, etc. (Křivohlavý, 2001). Slezáčková (2012) differentiates between anticipated social support (when we expect that our loved ones will help us in need) and gained social support, meaning social support/help that we have already received.

Support can be also divided into individual types. House (1981) divides support into informational, emotional, instrumental, and evaluation. Emotional support is conducted among loved ones, friends, people who have an intimate relationship (Morelli et al., 2015), in which they create a space for sharing ideas and facts (Tichon, Shapiro, 2003). Instrumental support is characterized by providing material help (Morelli et al., 2015), information, and recommendations that can lead to overcoming the difficult situation, or to finding an alternative solution (Mareš, 2002). The last category mentioned by House (1981) is evaluation as support that Mareš (2002) calls the feedback support, in which the persons reflect on their behavior or acts being appropriate or not.

The importance of social support of people is also evidenced by the fact that social support according to Wilkinson and Marmot (2005) determines health and the health condition of people. Social support and good social relations significantly contribute to health. Good social relations can lower the level of physiological reactions to stress. On the other hand, people who have less social and emotional support from others are more likely to receive less mental support, tend to suffer from depression more often, and can have more complications during pregnancy, and a higher level of disability due to chronic illnesses (Wilkinson and Marmot, 2005). The positive influence of social support on individual health is also discussed by e.g. Kaplan and Toshima (1990), or Šolcová and Kebza (1999), Uchino (2004), and many others. They discuss the relation between low social support and the occurrence of a number of illnesses or vice versa – social support being a protective factor from illnesses if the social network functions well. According to Cohen, Underwood, and Gottlieb (2000), social support is a key factor of illnesses occurring, progressing, and potential curing of mental diseases.

The objective of the entry is to describe the subjective assessment of several dimensions of social support for the residents of the České Budějovice Region. The entry primarily focuses on the topic of social support – primarily on financial (instrumental) support, informational support, and support during everyday activities. Financial support is to be taken into consideration from the perspective of its impact on the health of individuals since according to Šolcová and Kebza (1999), social economic status is an important and often overlooked stress bumper. Wilkinson and Marmot (2005) perceive it as one of the social determinants of health. Similarly to Šolcová and Kebza (1999), they also state that social economic status enables access to financial sources and education – e.g. in situations where financial funds are a prerequisite to receiving the best medical care and legal help. Education broadens the possibilities of using solving approaches when cognitively evaluating and managing stressful situations.

Methods and Data

The research was conducted via a survey, which made use of a self-designed questionnaire consisting of primarily closed scale questions focusing on areas including various aspects of using health and social services, information technology, and social support. This article results from the area focused on social support. Social support was investigated within the survey at three levels: financial support, informational support, and support during everyday activities. The questions regarding the support were then tested in relation to selected socio-demographic variables such as age, household size, age, or socio-economic status, and then also in relation to mapping questions. The specific wording of individual questions including variants of possible answers is presented within the results of this article.

The representative research sample consists of quota sampling (f.e. Disman, 2002) The quotas were determined based on sociodemographic indicators, i.e. gender and age, by random selection from among approached residents of the city České Budějovice and

neighboring municipalities who were older than 15. The amount of the respondents was N=700. In České Budějovice, there were 77,000 inhabitants in the age group in question at the time of the study. Thus the research sample comprised 1% of the population. The data matrix was statistically processed in the SPSS program. Social support was processed via the Chi-squared test, the p-value was 95%.

Results

Financial (instrumental) support

The area of financial support was researched via the question: “In the case that you need financial support, do you have someone who can help you?” The respondent then could choose between the answers Yes and No, and then could select the type of person they can turn to and evaluate their readiness to help on a 5-tier scale (never – always). 46.7% of the respondents stated that they can always or usually turn to their parents or children, 27.1% to their relatives, 18.3% to their friends. The other suggestions, such as neighbors, the municipality, or private providers were selected only seldomly. It seems that getting financial help is in close connection with interpersonal relations. However, during the statistic evaluation, there was detected no significant statistical relation ($p=0.296$) between financial support and evaluating one’s own relations. A statistically significant relation was however detected between financial support and sex ($p=0.001$; PearsonChi-Square = 11.567), in which women receive help more frequently than men, see Table 1.

Tab. 1: Sex * temporary financial support

| | | temporary financial support | | total |
|-------|-------|-----------------------------|-----|-------|
| | | yes | no | |
| sex | man | 128 | 135 | 263 |
| | woman | 228 | 138 | 366 |
| total | | 356 | 273 | 629 |

Source: Authors.

It is also clear that this form of support is more often demanded by persons younger than 30 ($\text{sig.}=0.000$; PearsonChi-Square = 17.441), as shown in Table 2.

Tab. 2: Age * temporary financial support

| | | temporary financial support | | total |
|-------|-----------------|-----------------------------|-----|-------|
| | | yes | no | |
| age | younger than 30 | 159 | 77 | 236 |
| | 31-50 | 105 | 101 | 206 |
| | 51 and older | 94 | 95 | 189 |
| total | | 358 | 273 | 631 |

Source: Authors.

A statistical significance was not proven in the case of socio-economic status ($p=0.082$), nor the size of the household ($p=0.407$). No relation was also found for the question “How do you manage your income?” ($p=0.942$).

Support during everyday activities

This area was researched via the question “Do you receive help during common everyday activities (e.g. house chores)?” in which the respondent could choose from three answers: yes, no, and no but I would like to. During the statistical testing, there was discovered a significant relation between age and sex. Older persons were more likely to receive such help (sig.=0.002; PearsonChi-Square = 27.827), see Table 3, women were too (p=0.030; PearsonChi-Square = 12,388).

Tab. 3: Age and support during everyday activities

| | | yes | no, but I would like to | no | total |
|--------------|------------------------|-----|-------------------------|-----|-------|
| age | younger than 30 | 22 | 15 | 208 | 246 |
| | 31-50 | 35 | 21 | 156 | 212 |
| | 51 and older | 40 | 28 | 134 | 202 |
| total | | 97 | 64 | 499 | 660 |

Source: Authors.

Tab. 4: Sex and support during everyday activities

| | | yes | no, but I would like to | no | total |
|--------------|--------------|-----|-------------------------|-----|-------|
| sex | men | 28 | 27 | 228 | 283 |
| | women | 68 | 37 | 271 | 376 |
| total | | 96 | 64 | 499 | 659 |

Source: Authors.

There was however discovered a statistically significant relation for socio-economic status (p=0.748), and subjective assessment of quality of interpersonal relations (p=0.063).

Informational support

The informational component of social support was surveyed via the question “When you need someone to talk to, share your opinions, or gather some information, do you have someone to talk to?” The question was tested with an insignificant result with the variable of evaluating the quality of interpersonal relations (p=0.668), socio-economic status (p=0.437), or age (p=0.910). One significant relation was detected – sex (p=0.004; PearsonChi Chi-Square =17,078), see Table 5.

Tab. 5: Sex and informational support

| | | yes | no | total |
|--------------|--------------|-----|-----|-------|
| sex | man | 165 | 117 | 282 |
| | woman | 268 | 102 | 370 |
| total | | 433 | 219 | 652 |

Source: Authors.

Discussion

Expert literature discusses gender differences in distribution and using social support. Women seek out social support more often but also provide it more often (Fort and Murariu, 2018). It is more important for women and also influences more their life satisfaction. The situation is similar also in the results of our research, which show that the financial aspect of social support was more often provided to women than men. This is mostly conditioned by a lot of factors that are based in gender relations (Nelson and Burke, 2002).

When it comes to age, other research mostly focuses on specific influences of social support in different age groups. Support is the most important for the elderly, for whom it can lower the risk of depressive states (Stafford, Antonucci and Zaninotto, 2017). This was also confirmed by our research since support during everyday activities was significantly higher for the older age group. It also depends on the influence of the environment in which the elderly person lives (Stafford, Antonucci and Zaninotto, 2017). In the case of a home setting is the influence of social support bigger, if they live in a facility for the elderly, then the environment has a negative influence (Chruściel et al., 2018).

The influence of social support for adolescents is mostly influenced by their interpersonal relations – relations with their nuclear family and their peers at school. They are aware of primarily emotional social support, both potential and given. Adolescents do not seek out help of professionals when they are depressed, they rather focus on people that they trust and who are close to them. Trust is one of the main prerequisites for adolescents seeking out social support. The reason is primarily fearing that their problems will not be perceived as severe enough or as too severe (Camara, Bacigalupe and Padilla, 2017). When it comes to the age category, we only found out a statistically significant relation only for financial social support, which was more often used by the respondents younger than 30.

Siedlecki et al. (2013) focused on the relation between social support and how individuals are satisfied with their own lives. According to the study, it was detected that despite different social goals across different age groups of adults (older than 20) and the number of friends being lower as people age, the relation between social support and one's own satisfaction has not been significantly different.

The relation between social support and socio-economic status has not been discussed too often. In their study, Stringhini et al. (2011) compared the relation between social support and socio-economic status for the genders. Men with higher socio-economic status receive better social support. For women, there was detected no connection between social support and socio-economic status. Huurre et al. (2007) discuss the connection between social support and socio-economic status, primarily for women with lower socio-economic status who receive a lower level of social support. They also state that social support for people with a lower socio-economic status has a larger influence on their depression. However, our research has not found any significant relation between socio-economic status and selected areas of social support.

Conclusion

The objective of the entry was to identify and describe selected categories of social support, primarily focusing on financial and informational social support. The authors also researched relations between these variables (financial and informational support) and other categories (age, sex, sources of financial support, etc.).

The results show that the most common sources of financial support is provided by family members; a significant variable when providing financial support is sex (women receive this kind of support more often) and age (persons younger than 30 more commonly use this kind of support). When it came to informational social support, there was not identified a significant statistical dependence between social economic status or age but was identified for the category "sex".

The implemented research could be limited by the fact that the questionnaire was in its first stage distributed based on the availability via the researchers and then by using the snowball method in which additional respondents were recruited from contacts of already participating respondents. Due to this fact, the research sample potentially did not include the entire socio-economic spectrum which may have impacted the results.

For potential consequent research, it would be crucial to look for statistically relevant connections for financial social support and the following categories: socio-economic status and the level of subjective evaluation of poverty. The goal of such research would be to prove the connection between subjective evaluation of poverty and socio-economic status.

References

- CAMARA, M., G. BACIGALUPE and P. PADILLA, 2017. The role of social support in adolescents: are you helping me or stressing me out? *International Journal of Adolescence and Youth*, **22**(2), p. 123-136. doi: 10.1080/02673843.2013.875480
- CAPLAN, G., 1974. *Support systems and community mental health: Lectures on concept development*. New York: Behavioral Publications, p. 267, ISBN 978-0-87705-119-0.
- ČENĚK, J., J. SMOLÍK and Z. VYKOUKALOVÁ, 2016. *Interkulturní psychologie: Vybrané kapitoly [Intercultural psychology: selected chapters]*. Prague: Grada, p. 312. ISBN 978-80-247-5414-7.
- CHRUŚCIEL, P. et al., 2018. Differences in the perception of social support among rural area seniors—A cross-sectional survey of Polish population. *International Journal of Environmental Research and Public Health*, **15**(6), p. 1288.
- COBB, S., 1976. Social support as a moderator of life stress. *Psychosomatic Medicine*, **38**(5), p. 300-314. doi: 10.1097/00006842-197609000-00003

COHEN, S., L. U. GORDON and B. H. GOTTLIEB, 2000. *Social support measurement and intervention: A guide for health and social scientists*. Oxford: Oxford University Press. doi: 10.1093/med:psych/9780195126709.003.0002

DISMAN M., 2002. *Jak se vyrábí sociologická znalost [How sociological knowledge is made]*. Prague: Karolinum, p. 374. ISBN 978-80-246-0139-7.

FORT, I. and A. MURRARIU, 2018. *The paths between gender, barriers, social support, coping efficacy and vocational indecision*. Online, available from <https://hal-amu.archives-ouvertes.fr/hal-01791439/document>

HOUSE, J. S., 1981. *Work stress and social support*. Reading, Mass: Addison-Wesley Pub, 156 p. ISBN 0201031019.

HUURRE, T. et al., 2007. Does social support affect the relationship between socioeconomic status and depression? A longitudinal study from adolescence to adulthood. *Journal of Affective Disorders*, **100**(1-3), p. 55-64.

KAPLAN, R. M. and M. T. TOSHIMA, 1990. The functional effects of social relationships on chronic illnesses and disability. In B. R. Sarason, I. G. Sarason, & G. R. Pierce (Eds.), *Wiley series on personality processes. Social support: An interactional view* (pp. 427-453). Oxford, England: John Wiley & Sons. ISBN 978-0-471-60624-6.

KEBZA, V., 2005. *Psychosociální determinanty zdraví [Psychosocial determinants of health]*. Prague: Academia, p. 264. ISBN 80-200-1307-5.

KOZUBIK, M., J. P. VAN DIJK and D. F. BOBAKOVA, 2019. Aspects of illness and death among Roma-have they changed after more than two hundred years? *International Journal of Environmental Research and Public Health*, **16**(23). doi: 10.3390/ijerph16234796

KOZUBIK, M., J. P. VAN DIJK and B. ONDRASKOVA, 2018. Roma housing and eating in 1775 and 2013: a comparison. *International Journal of Environmental Research and Public Health*, **15**(4), p. 588. doi: 10.3390/ijerph15040588

KŘIVOHLAVÝ, J., 2001. *Psychologie zdraví [Health psychology]*. Prague: Portál, p. 200, ISBN 978-80-262-0978-2.

KRPOUN, Z., 2012. Sociální opora: Shrnutí výzkumné činnosti v české a slovenské oblasti a inspirace do budoucnosti – nadané děti [Social support: Summary of research activities in the Czech and Slovak area and inspiration for the future - gifted children]. *E-Psychologie*, **6**(1), p. 42-50.

MAREŠ, J., 2002. *Sociální opora u dětí a dospívajících II. [Social support in children and adolescents II.]* Hradec Králové: Nucleus, p. 151. ISBN 80-86225-19-4.

MAREŠ, J. and S. JEŽEK, 2005. *Dotazník sociální opory u dětí a dospívajících [Social support survey in children and adolescents]*. Prague: Institut pedagogicko-psychologického poradenství ČR. ISBN 80-86856-08-9.

MORELLI, S. A. et al., 2015. Emotional and instrumental support provision interact to predict well-being. *Emotion (Washington, D.C.)*, **15**(4), p. 484-93. doi: 10.1037/emo0000084.

NELSON, D. L. and R. J. BURKE, 2002. *Gender, work stress, and health*. Washington, DC: American Psychological Association, p. 260. ISBN 978-1-55798-923-9.

SIEDLECKI, K. L. et al., 2013. The relationship between social support and subjective well-being across age. *Social Indicators Research*, **117**(2), p. 561-576. doi: 10.1007/s11205-013-0361-4.

SLEZÁČKOVÁ, A., 2012. *Průvodce pozitivní psychologií: nové přístupy, aktuální poznatky, praktické aplikace [Guide to positive psychology: new approaches, current knowledge, practical applications]*. Prague: Grada, 304 p. ISBN 978-80-247-3507-8.

ŠOLCOVÁ, I. and V. KEBZA, 1999. Sociální opora jako významný protektivní factor [Social support as a significant protective factor]. *Československá Psychologie*, **43**(1), p. 19-38. doi: 10.5507/pol.2013.004.

STAFFORD, M., T. C. ANTONUCCI and P. ZANINOTTO, 2017. Joint trajectories of spousal social support and depressive symptoms in older age. *Journal of Aging and Health*. doi: 10.1177/0898264317747077.

STRINGHINI, S. et al., 2011. P2-291 Structural and functional measures of social support, socioeconomic position and mortality. The British Whitehall II Study. *Journal of Epidemiology & Community Health*, **65**(Suppl 1). doi: 10.1093/aje/kwr461.

TICHON, J. G. and M. SHAPIRO, 2003. With a little help from my friends: children, the internet and social support. *Journal of Technology in Human Services*, **21**(4), p. 73-92. https://doi.org/10.1300/J017v21n04_05

UCHINO, B., 2004. *Social Support and Physical Health: Understanding the Health Consequences of Relationships*. NEW HAVEN; LONDON: Yale University Press. Online, available from www.jstor.org/stable/j.ctt1nq4mn

URBAN, D. and A. KAJANOVÁ, 2013. Sociální opora jako sociální determinanta zdraví u romských komunit [Social support as a social determinant of health in Roma communities]. *Zdravotníctvo a Sociálná Práca*, **8**(4), p. 26-30.

WILKINSON, R. G. and M. G. MARMOT, 2005. *Fakta & souvislosti: Sociální determinanty zdraví [Facts & connections: social determinants of health]*. Kostelec nad Černými lesy: Institut zdravotní politiky a ekonomiky, 55 p. ISBN 978-80-86625461.

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