

Utilization of Social Support: Analyzing Literature

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Introduction

Social support profile is associated with increased psychological well-being and in response to important life events. Social support aids in lowering problems related to one's mental health. Elderly individuals who had relationships where their self-esteem was elevated were less likely to have a decline in their health. social support helps people reduce psychological distress such as anxiety or depression. Social support functions as a problem-solving and emotion-focused coping strategy.

Several studies have been conducted based on social support. This paper addresses a description of social support, and a discussion of eleven studies that used social support.

Description of social support

Social support is the perception and reality of being cared for, having help available from other people, and most commonly, that person being part of a supportive social network.

Social support can be measured as the perception that an individual has help available, help already received, or the degree to which a person is integrated into a social network.

Support can come from many sources, such as family, friends, pets, neighbors, co-workers, and organizations.

Social support can be categorized and measured in several different ways.

There are four common functions of social support (emotional support, tangible support, informational support, and companionship support). Emotional support is the offering of empathy, concern, affection, love, trust, acceptance, encouragement, or caring. It is the warmth and nurturance provided by sources of social support. Tangible support is the provision of financial assistance, material goods, or services, also called instrumental support. Informational support is the provision of advice, guidance, suggestions, or useful information to someone. This type of information has the potential to help others problem-solving. Companionship support is the type of support that gives someone a sense of social belonging. This can be seen as the presence of companions to engage in shared social activities. It is also referred to as "esteem support" or "appraisal support".

Social support is studied across a wide range of disciplines including psychology, medicine, sociology, nursing, public health, education, rehabilitation, and social work. Social support has been linked to many benefits for both physical and mental health.

Social support

Many researchers utilized social support to guide their studies (Wallace, Driessnack, Bohr, and Tripp-Reimer, 2015; Gong and Mao, 2016; Jutagir, Gudenkauf, Stagl, Carver, Bouchard, Lechner, Glück, Blomberg, and Antoni, 2016; Adisa, Olajide and Fakeye, 2017; Li, Wu, Lin, Zou, Yang, Cheng and Guo, 2017; Shao, Liang, Shi, Wan and Yu, 2017; Zhao, Mao, Li, Zhou and Shen, 2017; Kamp, Luo, Holmstrom, Given, Wyatt, 2019; Langeveldt, Dada, and Boshoff, 2019; Wallace, Rodriguez, Walker, Dethlefs, Dowd, Filipi and Barrington, 2019; Sugiura, Nouchi, Honda, Sato, Imamura and Abe, 2020).

Wallace et al. (2015); Gong et al. (2016); Jutagir et al. (2016); Adisa et al. (2017); Li et al. (2017); Shao et al. (2017); Zhao et al. (2017). Kamp et al. (2019). Langeveldt et al. (2019); Wallace et al. (2019) and Sugiura et al. (2020). were completely dependent on the social support. Wallace et al.'s study (2015) conducted a study to explore the feasibility of using the Colored Eco-Genetic Relationship Map (CEGRM) adapted for eliciting information about how individuals with diabetes use their social networks through support their self-management efforts. However, Gong et al.'s study (2016) conducted a study to assess Health-Related Quality of Life (HRQoL) and to determine which factors, based on the Wilson and Cleary model, contribute to the prediction among Chinese Patients with Rheumatoid Arthritis (RA). While, Jutagir et al.'s study (2016) conducted a study for the diagnosis and treatment of breast cancer (BCa) that requires psychological adjustment and often involves an escalation of distress through several types of social support positively correlates with psychological adjustment to (BCa), negative support is associated with poor adaptation. Adisa et al.'s study (2017) conducted a study to assess available and desirable sources of social support between high blood pressure and type 2 Diabetics (T2D). Li et al.'s study (2017) conducted a study to assess the relationships between type D personality, disease perception, social support, and to investigate the effect of type D personality on quality of life (QoL) in continuous ambulatory peritoneal dialysis (CAPD) patients. Shao et al.'s study(2017) conducted a study to assess the effect of social support on glycemic control was sequentially mediated by self-efficacy and adherence. Zhao et al.'s study (2017) conducted a study to compare demographic characteristics and source of perceived emotional or social support across the frequency of amphetamine-type stimulant (ATS) use among female sex workers (FSWs). Kamp et al.'s study (2019) conducted a study to examine the relationship between two conceptualizations of social support (received and perceived availability of social support) and Inflammatory

Bowel Disease (IBD)-related self-management behaviors among emerging adults. Langeveldt et al.'s study (2019) conducted a study to measures of social support in raising a child with a disability through scoping review. Wallace et al.'s study (2019) conducted a study to explore the types and sources of social media adult support in diabetes diagnosis and self-management Processes. On the other hand, Sugiura et al.'s study (2020) conducted a study to identify various types of social support in an emergency disaster situation.

Wallace et al.'s study (2015) utilized social support through Diabetes Self-Management, using the Colored Eco-Genetic Relationship Map (D-CEGRM) that appears to be possible and useful in assessing social networks for adults with diabetes and how they are used to support tasks related to self-management. The information obtained through structured questions about social support in a way that may better address the research questions. However, Gong et al.'s study (2016) used the concept of social support to improve self-efficacy, relieve fatigue, delay the onset of disability, increase social support, and control disease activity through that improve the Health-Related Quality of Life (HRQoL) among Chinese Patients with Rheumatoid Arthritis (RA)of this population. While Jutagir et al.'s study (2016) using Perceived social support items scored on Likert through the Sources of Social Support Scale (SSSS) divides social support by the type of support and distinguishes between the sources of support within the type. Self-report emotional (listening), information (advice), instrumental (tangible assistance) and negative (arguing and criticism) support. The participants Rate each item on a 5-point Likert scale ranging from 1 (not at all) to 5 (lots) Items measuring the same type of support were averaged on the subscales, with higher scores indicating more support. Adisa et al.'s study (2017) does design and build tools for collecting data through a Question that is largely open and the closed questions are divided into five sections. (Section A) clarify the socio-demographic characteristics and average monthly

income. (Section B) assessed the participant's opinions on the need for a social support system and types of social support. (Section C) consists of questions that explore information about sources and types of social support of the system. (Section D) contained questions that explored the disease medication information. (Section E) consists of 4 validated questions in the Morisky Adherence Predictor Scale administered in Dichotomous response options (yes / no). Li et al.'s study (2017) used the instrument as assessment of social support through applicant assessed social support status via Social Support Rating Scale (SSRS), this scale comprised of three dimensions: objective support (behavior that directly helps the person in need), personal support (providing sympathy, care, love, and trust), and the degree of usefulness of social support (support that is given and received from a social network). Shao et al.'s study (2017) using Social Support Rating Scale (SSRS) designed by Xiao to collect data on social support in China, measures three dimensions of social support as objective support (i.e. actual or visual support), Subjective support (i.e., experience or emotional support, individual's feeling of respect satisfied in the community), and use of support (i.e. the acceptability of assistance) and 10 items of Likert scale that actively looking for support. Zhao et al.'s study (2017) using the perceived social support measurement is developed based on the existing literature on social support between female sex workers (FSWs) and Qualitative Data Participants were asked to respond to 12 items that reflected the social support. It was emotional support measured using 10 items, tangible support was measured using two items indicating financial support and other material support. The participants were also asked about the source of each social support item. Scores were totaled under each type of social support, with a higher score indicating a higher level of support. Kamp et al.'s study (2019) considered the relationship between two structures as affects the behavior of individuals in self-management, social support. Among the elderly, social support has been shown Improving self-management behaviors for individuals with chronic diseases, but this

relationship has not been examined with emerging adults (ages 18-29) who have inflammatory bowel disease (IBD). However, Langeveldt et al.'s study (2019) utilize measures of social support and ensure its accurate measurement, the direction can be provided for intervention by allowing professionals to detect and address social support available. Wallace et al.'s study (2019) categorizes four types of support: emotional, instrumental, informational, and appraisal. According to Emotional support that offers empathy, love, trust, and attention, Instrumental support that Provides tangible aids and services that directly help the needy person, Informational support that Provides advice, suggestions, and information that anyone can use to address problems, Appraisal support that provides useful information for self-assessment constructive feedback and confirmation. Sugiura et al.'s study (2020) used five questions, these question naire items pertaining to social support through Provision (helped, encouraged), and Receipt through (helped, encouraged, perceived) each requiring a yes or no answer, were listed as related to mutual support, these elements were concerned with whether the respondents assisted or encouraged others during the evacuation.

Additionally, most of the researchers were completely depended on the social support as Wallace, Driessnack, Bohr, and Tripp-Reimer, (2015); Adisa, Olajide and Fakeye, (2017); Wallace, Rodriguez, Walker, Dethlefs, Dowd, Filipi and Barrington, (2019). Whereas Wallace et al.'s study (2015), Adisa et al.'s study (2017), Wallace et al.'s study (2019) they do structured questions regarding social support for diabetes self-management.

Jutagir, Gudenkauf, Stagl, Carver, Bouchard, Lechner, Glück, Blomberg, and Antoni, (2016); Li, Wu, Lin, Zou, Yang, Cheng and Guo, (2017). Shao, Liang, Shi, Wan and Yu, (2017). they determine a scale of social support. Jutagir et al.'s study (2016) perceived social support items scored on Likert through the sources of social Support Scale (SSSS), Li et al.'s study (2017) assessed social support status via Social Support Rating Scale (SSRS), Shao et al.'s study (2017) using Social Support Rating Scale (SSRS) designed by Xiao to collect data on social support.

Gong and Mao, (2016); Jutagir, Gudenkauf, Stagl, Carver, Bouchard, Lechner, Glück, Blomberg, and Antoni,(2016); Zhao, Mao, Li, Zhou and Shen, (2017); Kamp, Luo,Holmstrom, Given, and Wyatt, (2019); Wallace, Rodriguez, Walker, Dethlefs, Dowd, Filipi and Barrington,(2019); Sugiura, Nouchi, Honda, Sato and Abe, (2020).they determine the type of social support. Gong et al.'s study (2016) measured by using the Medical Outcomes Study Social Support Survey (MOS-SSS), the multi dimensional scale consists of four subscales that measure tangible support, affectionate support, positive social interaction, and emotional-informational support. For each component, asked the patients to assess the availability of each type of support on 5 points. Jutagir et al.'s study (2016) divides social support the type of support as emotional (listening), information (advice), instrumental (tangible assistance), and negative (arguing and criticism) support. Zhao et al.'s study (2017) used the perceived social support measurement on between female sex workers (FSWs) and Qualitative Data Participants were asked to respond to 12 items that reflected the social support. It was emotional support measured using 10 items, tangible support was measured using two items. Kamp et al.'s study (2019) Process measure by Received Social Support for Socially Supportive Behaviors through Subscales a specific measurement types of support that received in the past four weeks: information support (guidance 14 items), emotional

support (14 items), tangible support (12 items), and the uses a 5-point Likert scale. Wallace et al.'s study (2019) determine the types of social support such as emotional support, automated support, informational support, evaluation support. Sugiura et al.'s study (2020) Provision (helped, encouraged), and Receipt through (helped, encouraged, perceived) each requiring a yes or no answer.

Langeveldt, Dada, and Boshoff, (2019) measure the social support of primary caregivers by sixteen studies were included in the review.

Discussion of Findings

The eleven studies discussed previously explicitly indicate the importance of using social support. The researchers in the previous studies discussed the reason for choosing social support to guide their works. Therefore, social support provides an effective assessment of the needs of individuals despite their health conditions. The strong assertion was placed on the importance of assessment of the effect of the individual's social support on any changes in their lives. The strong assertion was placed on the importance of assessment of the various social supports that can affect the individuals' to any changes in their lives.

The strong points of using social support were its ability to guide the directions of the studies, the ability to classify different types of social support through improving the ability to cope with stressful situations, alleviating the effects of emotional distress, promoting lifelong good mental health, enhancing self-esteem, lowering cardiovascular risks, such as lowering blood pressure, promoting healthy lifestyle behaviors.

(see table 1).

Summary

Social support has greatly influenced the profession of nursing. Social support focuses on the concept of a healthy lifestyle and social relationships. Nurses have a unique role to promote health in each type of social support. Social support is one of the most frequently used that guides nursing research. Eleven studies that utilized social support, three studies were conducted for structure question, three studies were conducted for the use of social support scale, six studies were conducted for the type of social support, one study for the review of the sixteen studies.

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Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Wallace, Driessnack, Bohr, and Tripp-Reimer, 2015.	Portland.	Explore the feasibility of using modified Colored Eco-Genetic Relationship Map (CEGRM) to elicit information About how diabetics use their social networks.	A cross-sectional survey design.	Structured questions regarding social support for diabetes self-management.	Obtaining information about participants' use of social networks, expanding the diabetes-CEGRM(D-CEGRAM)expanded on answers structured questions by identifying the positive and negative aspects of social support.
Gong and Mao, 2016.	China.	To assess Health-Related Quality of Life (HRQoL) and to determine which factors, based on the Wilson and Cleary model, contribute to the prediction of (HRQoL) among persons with Rheumatoid Arthritis (RA).	A cross-sectional design.	Measure by using the Medical Outcomes Study Social Support Survey (MOS-SSS), multidimensional the scale consists of four subscales that measure tangible support, affectionate support, positive social interaction, and emotional-informational support. for each component, asked the patients to assess the availability of each type of support on 5 points.	Subscales were significantly lower in (RA) patients compared to the general Chinese sample. Lower self-efficacy, increased fatigue, increased functional disability, decreased social support, being unemployment, and higher disease activity, more comorbidities, lower-income level, being female, living in rural areas, and being older directly or indirectly it is significantly and negatively related to (HRQoL).

Continued Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Jutagir, Gudenkauf, Stagl, Carver, Bouchard, Lechner, Glück, Blomberg, and Antoni, 2016.	Taylor & Francis.	To diagnosis and treatment of breast cancer (BCa) that requires psychological adjustment and often involves an escalation of distress through several types of social support positively correlates with psychological adjustment to (BCa), negative support is associated with poor adaptation.	Experimental design.	Perceived social support items scored on Likert through the sources of Social Support Scale (SSSS) divides social support to the type of support as emotional (listening), information (advice), and instrumental (tangible assistance), and negative (arguing and criticism) support.	Family is the biggest source of information and effective support for NHW Hispanic women. Hispanic originwomen reported higher negative support from male sources than the NHW women. The level of support from various sources may also depend on the time.
Adisa, Olajide and Fakeye, 2017.	Ibadan, Nigeria.	To assess available and desirable sources and types of social support between high blood pressure and type 2 Diabetics (T2D).	Cross-sectional questionnaire.	Do a design and build tools for collecting data through a question that is largely open and the closed questions are divided into five sections.	The support was greatly required for a governmental and non-governmental organization. Access to family support did not positively affect medication adherence during access to financial support affected marginally outcomes among hypertensive and (T2D) patients. The tendency to be able to afford treatment significantly affected adherence and outcomes, and the need for expansion social support system to ensure consistently better results.

Continued Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Li, Wu, Lin, Zou, Yang, Cheng and Guo, 2017.	China.	To assess the type D personality, illness perception, and social relationships support and investigation of the effect of a type D personality on quality of life(QoL) in Patients with continuous ambulatory peritoneal dialysis(CAPD).	Cross-sectional, observational study.	Assessed social support status via Social Support Rating Scale (SSRS), The scale is comprised of three dimensions: objective support, personal support, and the degree of usefulness of social support.	The strong association between type D personality, social support, illness perceptions, and (QoL) in (CAPD) patients. perception of disease and level of social support are the possible mechanisms to explain the association between type D and poor quality of life In (CAPD) patients.
Shao, Liang, Shi, Wan and Yu, 2017.	Guangzhou China.	To assess the effect of social support on glycemic control was sequentially mediated by self-efficacy and adherence.	Experimental design.	Using Social Support Rating Scale (SSRS) designed by Xiao to collect data on social Support in China. It measures three dimensions of Social support such as: objective support (i.e. actual or visual support), subjective support (i.e., experience or emotional Support, individual's feeling of respect/satisfied in the community), and use of 10 items of Likert scale.	Social support, self-efficacy, and adherence had significant associations with glycemic control. better social support was linked better patient self-efficacy was associated with improved adherence to medication, which was associated with improved blood sugar control and the relationship between social support and glycemic control were serially and fully mediated by self-efficacy and commitment.

Continued Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Zhao, Mao, Li, Zhou and Shen, 2017.	China.	To Explore the present case of amphetamine-type stimulant(ATS) use among female sex workers(FSWs) in Guangxi, China and various associations examined types of social support from various sources using (ATS).	Qualitative Data.	Use the perceived social support measurement on between (FSWs) and Qualitative Data Participants were asked to respond to 12 items that reflected the social support. It was emotional support measured using 10 items, tangible support was measured using two items.	Different types of social support from different sources can be either positively ornegatively associated with (ATS) use among (FSWs).
Kamp, Luo, Holmstrom, Given, and Wyatt, 2019.	University of Washington, Michigan State University.	To examine the relationship between two perceptions of social support (recipient and The perceived availability of social support) and self-management behaviors associated with adult Inflammatory Bowel Disease (IBD).	A convenience sample.	Process measure by Received Social Support for Socially Supportive Behaviors throughSubscales a specific measurement types of support that received in the past four weeks: information support (guidance 14 items) emotional support (14 items), tangible support (12 items). andthe uses a 5-point Likert scale.	Young adults who received high media support reported greater adherence to a medication when controlling biologics, time since diagnosis, and symptom frequency and feeling between adolescence and adulthood. No type of social support was associated with dietary modification.

Continued Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Langeveldt, Dada, and Boshoff, 2019.	There are sixteen studies were included in the review. Where the first author from south Africa, Second author from South Australia.	To identify and describe studies that have measured social support for caregivers raising a child with a congenital disability with specific indication of purpose, setting, participants, definition of social support provided and the measure of social support used. To describe the specific social support measures of the results in terms of the rationale of the authors for development Scale.	Sixteen studies were included in the review (A scoping review).	A review was conducted to determine the scope and description tools used to measure social support for primary caregivers (i.e. parents or grandparents) Raising a child (0-18 years old) with a congenital disability.	Sixteen studies were included in the review, of which nine were social support measures were identified. Attributes of the measures were searched from the papers are referenced and described in terms of their reported psychometric properties.

Continued Table (1): Summary of Studies That Utilized Social support

Authors/ years	Countries	Objectives	Approach/ design/ sample	Concepts used	Findings
Wallace, Rodriguez, Walker, Dethlefs, Dowd, Filipi and Barrington, 2019.	Latin America.	To explore the types and sources of social media Adult support in diabetes diagnosis and self-management Processes.	Qualitative interviews.	Types of social support such as emotional support, instrumental support, informational support, appraisal support.	Social support manifests itself differently, depending on the stage of diabetes experience. The types and sources of support available and needed can aid development community and clinical interventions for diabetes patients. Individual social support assessment in the context of the stages of diabetes, it can assist health care providers and public health practitioners to direct social support more effectively as an important determinant of health pursuit and Self-management behaviors.
Sugiura, Nouchi, Honda, Sato and Abe, 2020.	Australia.	To assess survival-oriented personality factors are associated with various types of social support in an emergency disaster situation.	Randomly sampled from the electoral registers.	Used five questions, these questionnaire items pertaining to social support through Provision (helped, encouraged), and Receipt through (helped, encouraged, perceived) each requiring a yes or no answer.	The respondents who were evacuated to avoid the tsunami, 21% reported that they helped And 54% encouraged another person during the evacuation, 12% of respondents received assistance, 42% encouraged by others, 54% considered themselves as such those receiving social support. Females reported receiving help more often and they had higher levels from perceived support. The effect of age was not significant for any type of support.