

晚年生活壓力、社會支持 與老人身心健康

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本研究從社會支持授受問題、以及社會支持「種類」及「來源」兩方面的特殊性 (specialization) 問題,來探討面臨晚年生活壓力的老人們人際關係網絡裡的各種社會支持對他們身心健康產生的影響。使用之資料為 1989 年臺灣省家庭計畫研究所在全臺灣地區實施完成之「臺灣地區老人保健與生活問題」調查,60 歲以上老人之有效樣本共 4,049 份。主要變項包括:性別、年齡、婚姻狀態、子女數、教育程度及收入六種人口變項,罹病程度及日常生活依賴度兩種持續性生活壓力變項,與配偶、子女及親友間授受的工具性及情感性社會支持變項,憂鬱度、生活滿意度及自覺不健康情形三種身心健康變項。綜合分析結果,我們發現:(1)所有分析結果均顯示,持續性生活壓力對老人身心健康的不良影響相當強;(2)階層複迴歸分析結果顯示,在控制了生活壓力後,社會支持,尤其是情感性社會支持的提供或接受對老人身心健康仍有良好的促進作用,特別是老人提供給子女或親友的情感性社會支持,相形之下更為重要;(3)多變項共變數分析結果顯示:比起緩衝模式,直接模式似乎較適於用來解釋「生活壓力—社會支持授受—身心健康」之間的關係;而且,這三大類變項間的關係,因社會支持的種類及來源而不同;(4)以聯立方程式驗證我們設定的因果模型後,不但更進一步清楚顯示老人與子女的情感性社會支持授受處於愈不平衡的狀態、或老人與親友的情感性支持授受處於愈平衡的狀態時,老人的身心健康情形愈良好;同時亦再次凸顯「支持種類與來源之交互作用」之重要性。

關鍵詞: 社會支持授受、生活壓力、社會支持特殊性、身心健康、老人

Stressor in Late Life, Social Supports, and the Mental and Physical Health of the Elderly

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ABSTRACT

This study examines the influences of various kinds of social support on mental and physical health of elderly persons who are confronted with stressor in late life from discussing the issues of providing-receiving support and support specialization—types and sources of support. Data were from 4,049 elderly persons in Taiwan 60 years of age and older in household register, which obtained from '1989 Survey of Health and Living Status of the Elderly in Taiwan' by the Taiwan Provincial Institute of Family Planning. The main variables included six demographic variables (gender, age, marital status, number of children, degree of education and income), two continuing life stressor variables (degree of disease and activities of daily living), instrumental and emotional support those which the elderly received from and provided to spouse, children and relatives and friends, and three health variables—depression, life satisfaction and perceived health. In summary, (1) the results of all analyses indicated that the life stressors had strong negatively influences on mental and physical health of the elderly; (2) the results of hierarchical regression analyses indicated that emotional support, particularly emotional supports those the elderly provided to children or relatives and friends, promoted their health when controlling the impact of life stressor; (3) the results of multivariate

analyses of covariance indicated that the Direct hypothesis was appropriate to explain the relationships among the life stressor, providing-receiving support and health rather than the Buffer hypothesis, and those relationships differed by various types and sources of support; (4) the results of simultaneous equation model indicated that the inequity of emotional support relationships with children or the equity of emotional support with relatives and friends was positively related to the health of the elderly, and also conspicuously showed that the importance of type-by-source interaction of social support once again.

Key Words: providing-receiving support, life stressor,
specialization of support, mental and physical health,
the elderly.