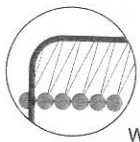


determinism and the growing consensus that development is a process where nature and nurture cannot be seen as separate components.



Think it over

Returning to the Forrest Gump question of whether life is determined by fate or whether we just blow around on the wind like a feather, how much are you controlled by your genes and how much by social learning? How far does early learning fix your personality? Can you use your own cognitive abilities to build and develop your own self-concept?

Your view of personality and your view of levels of explanation should guide you to an answer. Many people will conclude that we are all influenced by genetics, by social context, by early learning. One idea suggests that the great thing about being human is that we get to make our own decisions – we have the last word on where our lives are going. Humans have evolved the ability to solve problems. The answers you come up with will finally determine your personality and life.

Still, if you are Forrest Gump, you might not bother with problem-solving. Then you can let your life float around on the breeze some of the time, and be fixed by events the rest of the time.

Transition and change in life

The interaction of biological and social processes may influence our individual development. Language and cognitive development enable us to become self-aware. Around the ages of 14 to 19, most people are likely to develop a concept of who they are (*self-concept*). This self-awareness is also described as an *identity* by authors who wish to emphasise the social context of self-awareness.

Although individuals develop an understanding of themselves, this understanding is always open to change and development. A range of expected and unexpected events might mean that an individual's self-concept has to change.

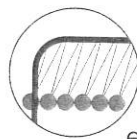
There is a saying, associated with Buddhism, that the only certain thing in the world is that there will always be change and something that changes. Change can be exciting and desirable. Life would become boring and stressful if you had to spend every day doing exactly what you had done the day

before. Just a change in the weather – the first snow of winter, perhaps – can create a feeling of excitement. However, while some change makes life interesting, too much change can create stress. Throughout life we have to cope with changes in our social relationships, our social context and in society as a whole.

There is a range of life events, creating a need for personal change, which affect many individuals. In children and adolescents the list might include:

- coping with the arrival of a new brother or sister
- coping with changes in family structure – new step-parents
- starting at a new school
- coping with moving house
- making friends
- changing friends
- coping with new coursework and exams
- choosing a career
- making relationships; breaking up and changing relationships.

These changes may be experienced as exciting, or as things that just happen. These changes might also be experienced as upsetting, destabilising changes which destroy a person's sense of security, understanding of him- or herself and his or her social role.



Think it over

Think about the list above. Can you remember feeling stressed by any of the events? How did you cope? How did the experience influence your understanding of yourself at the time?

Many of the changes described above involve a *loss* or a letting go of some attachments. We may have liked our friends and the life at our first school. Moving to a new school takes all that away from us. Gradually losing touch with old friends; having to find new friends may involve a loss. Sometimes it may feel as if a part of ourselves is lost – the loss can cause a threat to our sense of self.

Older people who receive social care support are often very vulnerable to the threats associated with loss. Some of the life-event threats which face elders include:

- loss of partner (bereavement)
- loss of socially valued role – not being needed by children or work colleagues
- loss of health – restricting activities, illness and loss of enjoyment of life

- loss of hearing and vision, restricting satisfaction with life
- loss of mobility – restricting social contact and satisfaction with life
- loss of body image – self-labelling as unattractive
- fear of loneliness
- fear of pain
- fear of loss of control over own lifestyle and decision-making
- fear of dying

These life-event threats are not simply unpleasant or unwanted events. For some people, these events may remove any sense of capability or of being a person who can cope.



Case study: An example of loss

Mrs Kershaw is 84 years old, and her husband died two years ago. Mrs Kershaw feels that she no longer has a meaningful social role. Her children do not visit her very often and do not seem to need her. She often feels that she is just a burden, both to her children and other neighbours who collect her shopping.

Mrs Kershaw has a heart condition which means that she cannot get out easily. Because she cannot walk far, she feels that she is unable to visit her friends who live several streets away. She has cataracts on both eyes which means that reading is becoming increasingly difficult. She can no longer enjoy her books. Despite the fact that she could have an operation, she feels that everything is coming to an end. She used to have an estimation of herself as competent and capable (we could call this high 'self-efficacy'). Mrs Kershaw feels that her life has changed; she can no longer guess or understand what she is capable of and feels stressed. She no longer feels that 'she is the person she used to be'.

A combination of losses may cause older people to become threatened, or a single event may be the focus for disruption. Eric Erikson (1963) saw the main challenge for older people as being the need to keep a sense of meaning of life. In Erikson's terms, this was called *ego-integrity*, keeping a sense of self together. If this challenge was lost then a sense of despair and a lack of purpose in life might follow.

Holmes and Rahe (1967) set out to try to catalogue just how much change different life-events involved. They came up with an index of how much readjustment different life events might call for (Figure 10.18). Barrie Hopson (1986) states that this

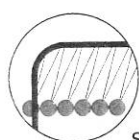
general index was found to be consistent across European countries and with the cultures of Japan, Hawaii, central America and Peru. Naturally, the amount of work needed to readjust to a life event differs for each individual. Each person has particular vulnerabilities, strengths and weaknesses. The Holmes–Rahe scale is no more than a general

Life event	Value
Death of partner	100
Divorce	73
Marital separation	65
Going to prison	63
Death of a close family member	63
Personal injury or illness	53
Marriage	50
Being dismissed at work	47
Marital reconciliation	45
Retirement	45
Change in health of family member	44
Pregnancy	40
Sexual difficulties	39
Gaining a new family member	39
Business or work adjustment	39
Change in financial state	38
Death of a close friend	37
Change to different line of work	36
Change in number of arguments with partner	35
Mortgage larger than one year's net salary	31
Foreclosure of mortgage or loan	30
Change in responsibilities at work	29
Son or daughter leaving home	29
Trouble with in-laws	29
Outstanding personal achievement	28
Partner begins or stops work	26
Begin or end school	26
Change in living conditions	25
Revision of personal habits	24
Trouble with boss	23
Change in work hours or conditions	20
Change in residence	20
Change in schools	20
Change in recreation	19
Change in religious activities	19
Change in social activities	18
Mortgage or loan less than one year's net salary	17
Change in sleeping habits	16
Change in number of family get-togethers	15
Change in eating habits	15
Holiday	13
Major festival, e.g. Christmas	12
Minor violations of the law	11

Figure 10.18 The Holmes–Rahe life-event scale

overview originally researched in the USA in the 1960s. The value scale suggests that on average the death of a partner involves ten times the change, and perhaps the threat, that being caught for speeding does. Changing to a new school is half as stressful (on average) as a new sibling being added to the family.

The Holmes–Rahe scale may be a useful list of changes and transitions which might happen to adults. But it is important to remember that few people are ‘average’. In your own personal life you may rate some issues as far more or less stressful than the scale suggests.



Think it over

If the average person (in the 1960s) found being dismissed at work (sacked) half as stressful as the death of a partner, what sort of variation might exist between individuals? Could some individuals find the loss of a partner less stressful than the loss of their job? What are statistical averages or means? (See Chapter 26.)

Change and our sense of self

As we grow and develop, our learning, socialisation, group and social experiences enable us to construct a concept of self. In a perfect life, change would only happen at our own pace and it would be just the right kind of change to keep us from boredom.

As change happened we would make minor adjustments to our sense of who we were.

This construction of a personal idea of self may be like constructing a house of cards (Figure 10.19). You need a level surface with enough friction to stop the cards from falling. Bit by bit you can build your structure. If a small piece falls – that's OK, you can catch it before it does too much damage to the rest of the structure. You can start again. But suppose a breeze blows through the window, or someone knocks the table, the whole structure may collapse. It will take a bit of time to rebuild now.

Self-concept may be like a house of cards, in that it is vulnerable to sudden unwelcome changes. If it has to be rebuilt, it will be a painful and emotionally costly task. A house of cards is just a pastime. Trying to cope without an effective idea of who you are might mean that life isn't worth living.

Expected and unexpected change

Some changes such as marriage, the birth of



(a) The construction of self takes time and effort



(b) A sudden change can destroy our sense of self



(c) Reconstruction takes time

Figure 10.19 The construction of self may be like building a house of cards

children, or ageing, are expected and predictable. Other changes such as bereavement and facing one's own death are predictable in the loose sense that everyone understands that neither ourselves nor our friends are immortal. When bereavement or terminal illness happen, however, many people experience them as unexpected and unpredictable. Other changes, or *life events*, such as being a victim of crime, sudden disability or illness, and the breakdown of relationships are often unexpected and unpredictable.

If major life events feel under our control, then change may be exciting. If we cannot plan for or control the events, then we may become distressed. Certain unpredictable events such as redundancy, serious illness or disability, divorce and bereavement, are always likely to cause stress and insecurity to individuals who experience them. Even promotion at work and marriage can create tension in people. Why does change cause upset and tensions?

Change can:

- create uncertainty
- alter a person's self-concept
- create a need for new learning
- create a sense of loss
- use up time, money and emotional resources.

Uncertainty

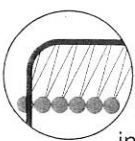
When children start at a new school, they may not know what to expect. Will they get lost in the building? Will the staff be friendly? Most of all, will the other children like them? Will they get on and make friends? There are so many questions, and no one knows how the future will work out. Uncertainty can create worry.

There is uncertainty when a person decides to marry or live with a partner. Partners may think they know one another well, but how can they be sure that their partner won't change? How can they be sure they will both stay in love? How can they be sure they won't fall out – many people do fall out and one in three marriages ends in divorce!

Having children can create uncertainty. What does it take to be good parents? What does it cost to get what is needed for the children? Will the parents like their children? Will the children like their parents? Will the children strain the relationship?

Almost every form of change raises questions about the future. When we don't know the answers, it can create stress.

Self-concept



Think it over

The way we see ourselves is partly due to the way our friends, relatives and other important people see us. When we change friends, change relationships, or change jobs or school, then the people we mix with will change. New people might see us differently. New people might treat us differently. Our ideas of our skills, our social status or our importance might have to change. You may have been brilliant at a previous job, and seen yourself as clever. When you change jobs, new people might work in different ways. The new people might not see you as clever. Your concept of yourself might have to drop in value in your new job.

For example, a man may think of himself as a really sociable and outgoing person. If he and his partner start

a family, they may have to stay in and care for the children. The man may have to change the way he thinks about himself. Marriage creates a partnership and so one partner (the husband, for example) cannot expect to take every decision and control every part of his life as he did when he was a single person. He may have to change his self-concept if he is to have a successful partnership.

Issues like redundancy, serious illness and bereavement may wreck an individual's self-concept.

The need for new learning

When children start at a new school, there is a vast amount to learn about the school and the people in it. New names, new places to find their way around, new customs, new teachers, and so on. Starting a new job will be similar. Having children involves a vast amount of learning; learning to care, as well as all the practical issues like feeding and bathing children. Moving home may mean learning about do-it-yourself, plumbing, decorating, finance and so on. Redundancy, serious illness or bereavement might mean learning a whole new lifestyle.

Many people enjoy learning at their own pace in their own way. Major life-event changes may not allow everyone time or the chance to go at their own pace. Individuals become stressed with the amount of learning and adapting that they have to do.

A sense of loss

Changing schools might mean losing contact with friends. Leaving home may mean an individual will not see parents, brothers and sisters so much. Having children may mean a couple has less time to spend with friends, and maybe less money to spend on themselves. Changing jobs means the loss of old work friends. Moving home means losing routines, people and views that an individual used to know. Serious changes like redundancy, sudden disability or bereavement can involve multiple losses.

Major life changes can create a serious sense of loss. A person might also feel threatened or attacked by what has happened. It takes a great deal of mental work to recover and make up for serious losses in life.

Use of time, money and emotional resources

It takes time to learn a new job, to make new relationships, to look after children, and so on. Time

is a limited resource. Having children, moving home, leaving home, or getting married may also use a lot of money. These events may also be emotionally draining. Going through planned life changes can be costly on time, money and emotional commitment.

Unplanned changes such as redundancy, serious illness, divorce and bereavement may also involve extra expenditure, extra work and extra emotional involvement in order to sort things out. This time an individual is spending his or her time and money to sort out things that are unwanted!

Coping with change

The Holmes–Rahe scale places loss of partner at the top of the table of changes and transitions. Bereavement is described as a process, because it involves making sense of a loss and constructing a new sense of self. Bereavement is not just a matter of feeling sad because someone has died.

When two people have been partners for some time and one dies, what will the surviving partner have lost? Naturally, the surviving person has lost someone he or she was attached to and loved. He or she will grieve for this person. There may be a whole list of other losses as well. The surviving partner will have also perhaps lost:

- the main person he or she talked to
- the main person who gave advice
- his or her sexual partner
- the person who made social events work well
- a person to go out with
- the main person who provided emotional support
- the focus of domestic life
- a source of protection
- a source of income.

Loss of a loved one might seriously upset a person's life and lifestyle. Grief is not just about missing a person, it may also be about having to reorganise a sense of self.

Bowlby (1969) believed that humans, and indeed many animals, would form close emotional attachments during their lives. He described three phases of grief:

- 1 When an attachment is broken (perhaps by death), the first reaction is the pain of separation and a desperate desire to find the lost person again. During this first phase, the individual is unable to change. A person has to let go of his or her past assumptions and expectations which are focused on the lost partner before change is possible.
- 2 The bereaved person will experience anger and despair. This phase involves developing a degree of detachment from the dead partner. During this phase a grieving person's sense of self may become disorganised.
- 3 The grieving person reorganises his or her sense of self and expectations and habits, and starts to rebuild his or her life and identity. This rebuilding or reconstruction is, perhaps, like reconstructing the house of cards after it has fallen down.

Going through a bereavement involves coping with a massive amount of unwelcome change. At first, the individual cannot let go of the attachment to the lost loved one. Letting go involves coping with new ways of understanding self and lifestyle. The journey through a process of grieving ends when an individual is able to reconstruct his or her sense of self.

Colin Murry Parkes (1975) described a process of grieving based on his observations and studies of grief. He explained grief as a life crisis or a major time of transition and change for an individual. Going through a change involves a need for psychological work and this takes time and effort. Parkes wrote, 'As the old assumptions about the world prove ineffective and a fresh set of assumptions is built up, so the old identity dissolves and is replaced by a new and different one'. (Page 129.) Much of the pain and sorrow associated with loss may really be connected with our tendency to resist change. Again, Parkes wrote, 'Resistance to change, the reluctance to give up possessions, people, status, expectations – this I believe, is the basis of grief'. (Page 25.)

Naturally, each person experiences the struggle of grief differently; but there may be some general components of coping with change that can be identified.

Initially, many people experience *shock* and numbness when they are first confronted with loss. This phase may involve an inability to accept the reality of the loss, let alone trying to change.

A reaction of *searching* for the lost person may follow (sometimes literally searching faces in a crowd). Perhaps the mind can cope with the news of the loss, but not with its meaning. A feeling that, 'Yes, I know that he is dead, but that won't stop me from meeting him again.' Emotions of anger and guilt may actually help someone begin to become detached from the lost love. A phase of experimenting with defences, of beginning to try to cope with change, may occur before it is possible to gain a new identity. Parkes referred to the 'beginning to cope' phase as

mitigation. The final phase of developing a new sense of self is called *reconstruction*.



Case study: Coping with grief

Jack had been married for 22 years when his partner unexpectedly died of a heart attack. They had been very close. When Jack was first told about the death he showed little reaction. Friends had to persuade Jack not to go to work the next day. Jack had said that it would give him something to do, take his mind off things. Later, at the funeral, Jack said that he felt frozen inside and that he did not want to eat. It was some weeks later that Jack said he felt better because he could talk to his partner, sitting in a chair late at night. Jack admitted that he never saw his partner, he just felt her presence.

As time went on, Jack said that he felt he could have done more to prevent the heart attack – if only he had noticed some signs, if only they hadn't smoked. Jack felt angry with their local doctor. His partner had seen the doctor only two months before. Surely, if the doctor was any good, she should have noticed something! On occasions, Jack just became very angry and bitter about how badly everything had gone; perhaps he was to blame?

Months later, Jack explained that he had sorted his life out a bit. Whereas his partner used to organise things, he had now learned to cope alone. He explained that he spent time with a close friend, 'a shoulder to cry on' as he put it.

After a year and a half, Jack still misses his partner but he now says that the experience has made him stronger, 'It's as if I understand more about life now. I feel – if I could cope with this loss – well, there isn't much I can't cope with.' Jack has now become involved with the local voluntary support group for people who are bereaved. He says that helping others has helped him, 'It has given me new meaning and purpose in life. I think everything in life has a purpose – things are meant to happen to you. I had a good life before and now I've got a new life to lead.' Jack says that 'life feels OK now.'

Jack's first reactions might suggest that he couldn't take in the full implications of the loss. He relied on denial to cope. The sense of his partner could be a real thing or it could be a protective fantasy. The anger and the guilt could be a sign that Jack is struggling to come to terms with the loss. He is mentally involved in trying to make sense of himself and accept some change. Jack's 'sorting out' might

indicate that he has now accepted the reality of the loss. Jack is now making changes to some areas of his life and self-perception. Finally, Jack has resolved the loss. A new sense of self now gives Jack some fulfilment in life. Jack has reconstructed his sense of self. Jack still misses his partner, but can lead a fulfilled life despite those feelings.

You may have thought of other ideas: it is possible to see many different things in a real-life situation. What is important is to recognise that bereavement and change is a process. People have to find their own way through it at their own pace. There are no forms of advice or special skills which can 'cure' people or 'solve' their problems.

A general way of understanding change

Bereavement is just one example of change. Holmes and Rahe identified 43 other changes which might require some mental effort and some coping strategies. Positive life experiences, such as promotion at work, moving house or pregnancy, are included in the Holmes–Rahe scale because even positive life events require mental work and coping strategies. Just because something is welcome and exciting, it doesn't mean that there is no social readjustment. Coping with any transition or change may involve some stress. Barrie Hopson (1986) identifies a general way of understanding 'transitions' or change in life.

Hopson proposes that there are seven phases that people often go through when facing identity change (Figure 10.20). Hopson believes that these phases apply equally to situations involving a sudden shock or where there is a slow growing awareness and that change is inevitable. Whenever people have to cope with large-scale change or transition it may be possible to identify phases of:

- **Immobilisation** This first phase involves being unable to cope, so failure to respond may result. Immobilisation can include a denial that change will happen. The individual may feel 'frozen up'.
- **Minimisation** This involves denial and deflection defences. One way of trying to cope with change is to trivialise it or pretend that it won't matter.
- **Depression** When people become aware of the full need for change, depression may set in. Anger, frustration and helplessness may also occur at this time. Self-esteem may be threatened as people take the full implications of change on board.
- **Letting go** This involves accepting the need to

change, accepting a new reality. Optimism may become possible.

- **Testing** This stage of self-testing may involve trying out new behaviours and experimenting with new lifestyles. Hopson claims that this stage may involve a tendency to see life in a stereotyped way.
- **Search for meaning** This stage involves understanding the whole process of transition and change.
- **Internalisation** The seventh and final stage involves the reconstruction of expectations, ways of behaving and ways of understanding self.

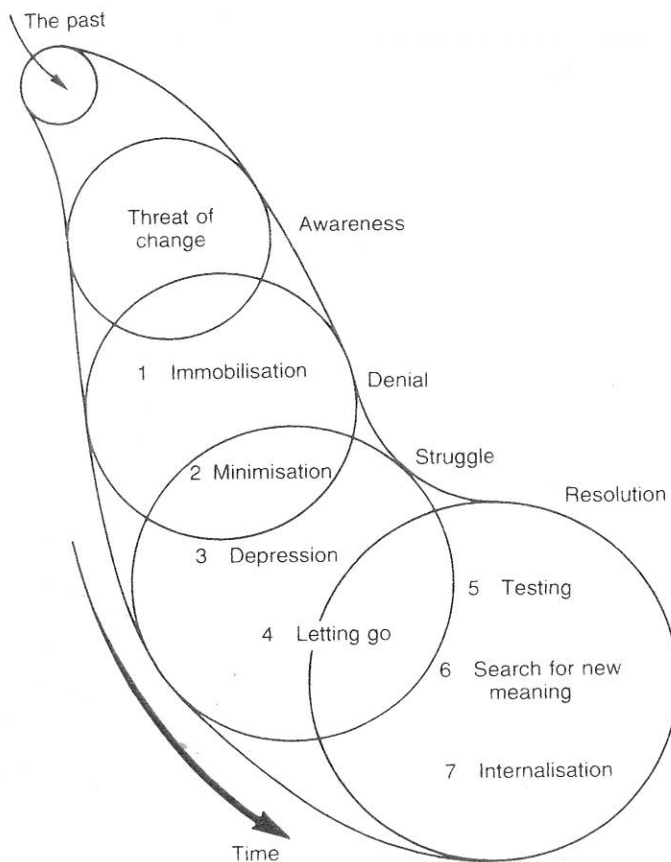


Figure 10.20 The seven phases of coping with change

Hopson sees the morale of people going through transition at its lowest point during the third stage (depression). So, going through a transition involves the feeling that things are getting worse until the light at the end of the tunnel is seen during stage four (letting go).

Methods of support for coping with change

Individuals with a clear self-concept will use their own mental and intellectual abilities to help them cope with major life change. People who choose to get married or to change job will think about planning for the change. People may sit down and check through (evaluate) their time and money resources, if they are planning on starting a family.

People faced with unexpected changes will sometimes go through a process of shock which prevents them from using planning and evaluation skills. Even so, many people will try to use their own imagination, and their own knowledge, planning and evaluation skills to cope with unexpected life changes. Few people have to struggle with major life changes entirely on their own. Most people will have family or friends they can turn to. As well as relatives, partners, people at work and other relationships, some people can turn to community figures, religious leaders, and so on. Active Christians may be able to get help from their church leaders or community. Muslims may receive support from their mosque and community. Hindu and Sikh communities will support their members. Some people live in areas where their own local neighbourhood creates a supportive community.

Where life changes involve legal, financial or medical issues, people may seek professional help. A person going through divorce might seek legal help with sharing out joint property. He or she might want medical advice for stress-related illnesses, financial advice to help plan the future or advice from specialist support groups.

Talking

Individuals may think more clearly when they can talk a problem through with other people. There is an old saying, 'A problem shared is a problem halved'. Sometimes a person may feel much better for talking something over, because people can reflect on issues and understand more when they talk to others and use others as a sounding board. Another saying is, 'I know what I think, when I hear what I say'. Talking helps some people to make sense of the changes that they are going through – 'it's good to talk!'

Carers can develop special supportive conversational skills which can help people going through major changes or difficulties with relationships. Supportive skills are explained in the Chapters 4, 5 and 6.

Networks

Many people have social networks which can provide help in times of need. In this context, a network is a range of individuals or organisations which are linked. When a person needs help, he or she may be able to contact a range of friends – an *informal network*. A formal network might involve relatives or members of the community who have an obligation to help. Within an organisation there may be a formal network of people who provide supervision or personnel services. There might also be a range of individuals who will offer informal advice and support to individuals who are facing change or transition.

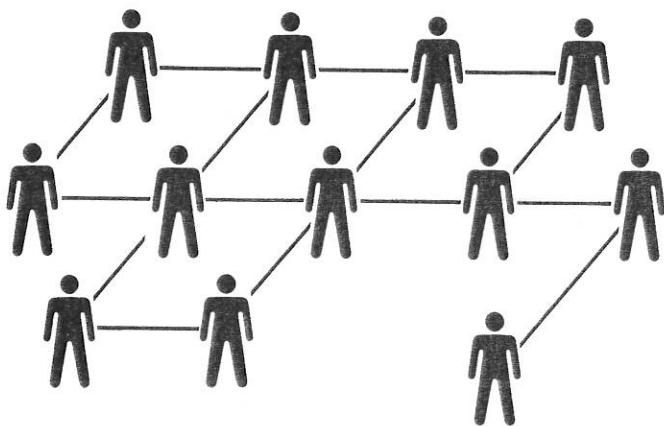


Figure 10.21 A network is like a web of contacts – people who can offer advice

Advice

Some life changes can be planned for, for example, marriage, changing jobs or moving house. Sometimes family, friends and work colleagues can give useful advice and information which will help individuals to plan. Colleagues might tell each other about new routines at work, give advice on how to get on with a supervisor, explain how to fill in forms, and so on. Friends could give advice on, for example, where to hold a wedding reception, or purchase services for a wedding.

Improving self-concept

Other people can support individuals in feeling positive about themselves. Being with and talking to other people can create a sense of belonging – a feeling that an individual is a member of a group and is 'worth something'. Conversation may be a very important kind of help for people who are struggling to cope with redundancy, disability or bereavement. Individuals often need to feel valued and supported.

The opinions or views of other people can guide us when we have to change and develop our concept of self. Change means that a bereaved person, for example, is no longer a partner in a joint relationship. Changing back to being a single person can be a hard and painful task. Other people's support may be very important to help come to terms with bereavement.

People learn by observing how others cope. If they belong to families, social or community groups, they may have the opportunity to watch others coping with marriage, having children, moving home, becoming ill, and so on. It is possible to observe others' successes and mistakes. By imitating other people's ways of coping, it may be possible to manage change and transition. Understanding how others cope may save individuals from feeling confused or frightened.

Specialist help

Professionals and others can provide specialist help. Doctors may be able to prescribe drugs that help with stress or illness. Solicitors may provide legal solutions to problems. The Citizens' Advice Bureau can advise us on a wide range of special services in the community, such as how to obtain equipment to assist a person with a disability. Relate, the marriage

Practical help

When people have to move home, they might need help to pack and unpack belongings. Friends and relatives might give this help for free. Friends might expect help in return when they need 'a hand'. People may help others with decorating, with plumbing, and so on. People who are starting a family may know others who will baby-sit for free – people they can trust. A network of friends and relatives may provide practical help. Friends might provide advice when individuals look for work. Families usually support their members in hospital. Families often provide accommodation when relationships with a partner breakdown. Family and friends usually provide support following divorce or bereavement. Family and friends might even protect individuals who are in conflict with others.

guidance agency, provides guidance and counselling services for people who are having difficulties in their relationships.

Victim Support provides advice and emotional support for victims of crime.

Many individuals will get the help and support they need from support groups. These include groups like Cruse, a bereavement care group which provides counselling, advice and opportunities for social contact for all bereaved people. Many individuals can undertake the mental work needed for coping with change more easily if they have a group to talk things out with. Friendships, or social groups, may often be needed in order to work out our own understandings of life.

The National Council for Voluntary Agencies publishes the *Voluntary Agencies Directory*, which provides an up-to-date catalogue of local and national groups providing support services. Books, health education guidance notes and information leaflets on where to go for help can also provide a starting point for someone who feels the need to find a new group or individual to give support in coping with change.

The Benefits Agency may be able to provide financial support to individuals who are entitled to benefits.

Social support and health

Mildred Blaxter (1990) published the results of a national survey into health and lifestyles. She reported that, 'self-perceived stress was strongly associated with poorer health of every kind.' (Page 104.) She notes, 'Social loss or social isolation are particular forms of stress which have been shown to be particularly dangerous to health. "Life-events" such as widowhood or other bereavement, divorce, job changes, unemployment, migration, even moving from one home to another, are all associated with increased risk of morbidity (disease) or mortality (death).' (Page 103.) One key factor, which appears to be vital in protecting people from the effects of stress, is having close social support networks. Friends, family, partners and community links, all seem to act as a buffer against stress. Michael Argyle (1987) writes, 'Many studies...have found that distress is caused by stress. This effect is, however, greatly reduced or minimised if there are supportive relationships. This is known as "buffering".' (Page 25.)

So friends and supportive relationships may protect an individual against stress. They may be vital to

maintain self-esteem and, perhaps, self-concept or identity when these are threatened. Relationships may be critical when our sense of self is threatened. According to Argyle, a key issue is the quality of support. See also Chapter 4, page 88.

Argyle noted that both males and females found conversations with females to be 'pleasanter, more intimate – to involve more self-disclosure' and to be more 'meaningful' than conversations with men, when this was researched in the early 1980s. This may be an interesting and important aspect of gender role socialisation.

Blaxter (1990) reported that, 'Family relationships and close bonds have been shown to be strongly protective, perhaps through effects on self-esteem and feelings of control...Certainly, the relationship between social networks and health has been found to be so strong that it can be used predictively in relation to mortality.' So it seems that people with poor social support may be at more risk of dying from an illness than those with close relationships. Argyle quotes a study of 7000 people in California during the 1970s (Berkman and Syme, 1979). Those with supportive social networks had a much lower death rate even after initial health, health practices, obesity, smoking, drinking and social class had been taken into account. In terms of support marriage produced the strongest protection, with friends and relatives then offering more protection than belonging to churches or other organisations.

A study reported by Wojtas (*Times Higher Education Supplement*, 22 October 1993) found that 'coronary patients with a wide network of friends were more likely to survive a heart attack, and that car ownership, which indicates a higher income and more likelihood of socialising, also raised the chances of survival.' This study, by staff at Nottingham University, looked at 1300 suspected heart-attack patients between 25 and 84 years of age. Those who were socially isolated (poor contact with family and friends, not members of any club or religious group) were '49 per cent more likely to die following recovery from a heart attack than those with social support'. In addition 86 per cent of car owners survived compared with 74 per cent of those without a car. The study suggests that moderate affluence (wealth) and good social support are important aspects of preventative health.

But how do relationships make a difference to a person's physical health? Argyle (1987) writes,

One way in which stress is bad for health is that it impairs the immune system, the natural

defence against disease... Social support could restore the immune system, by its power to replace negative emotions like anxiety and depression, and their accompanying bodily states, by positive emotions. A second way in which relationships may affect health is through the adoption of better health practices... Those who have good relationships are able to cope with stress by seeking help and social support. Those without are more likely to use other means of coping, like smoking and drinking. (Page 184.)

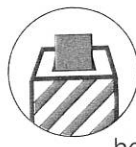
Slaxter's study (1990) provides evidence that there is a positive relationship between marriage, or living

with a partner, as compared to being single. This relationship was particularly significant for men and, indeed, older men. For men especially, living alone was associated with more illness and poorer psychological and social well-being. The number of social roles a person had (roles like parent, worker, regular worshipper) also related to measures of good health. Although these general findings from a survey cannot be used to make predictions for individual health and happiness, it does appear that partners, friends, family and community social links help protect people from stress. People with close supportive relationships may have useful resources to fall back on when they encounter life-event threats. Socially isolated people may lack a buffer to protect themselves against the anxiety, strain and threat that change may cause.

Effects of a major life change	Methods of support (professional and informal)
Uncertainty	Friendship networks Providing information and advice. Counselling
Change to self-concept	Skilled conversation, counselling and support
A need for new learning	Guidance by learning from others' experience
A sense of loss	Supportive conversation Counselling Membership of voluntary groups
Using up of time, money and emotional resources	Providing practical help Financial help Professional advice on financial issues or entitlement to benefits

Figure 10.22 A summary of methods of support for people experiencing major life changes.

Evidence collection point



To complete Element 4.1:

- 1 Produce a report which broadly explains how individuals cope with both expected and unexpected change and transition in their lives. Explore both expected and unexpected change in the lives of two individuals. This may involve a small-scale piece of research or a case study exploring how two people have coped with different types of change.
- 2 Produce a report which explains three different methods of support used by individuals during times of transition and change. This report might link with the research for (1) above.