THE RELATIONSHIP BETWEEN SOCIAL SUPPORT AND SUBJECTIVE WELL-BEING ACROSS THE LIFESPAN

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The aim of this study was to examine how social support measured as the subjective assessment of social support adequacy given by family, friends or significant others contributes to well-being (happiness, life satisfaction and domain satisfactions) across the life span. The study was conducted on a representative sample of the Croatian adult population ($N = 1.000$). For the purpose of analyses the sample was divided into three age groups: 18 to 40 years, 41 to 60 years, and 60+ years. The results were analyzed by means of multiple group structural equation modeling, which was performed separately for two measures of subjective well-being (SWB – a general measure of life satisfaction and happiness, PWI – domain satisfactions). The results showed that in all three age groups, among three sources of social support only the perceived social support from friends was significantly related to both subjective well-being measures. Participants who perceived adequate social support from friends expressed higher levels of subjective well-being.

Keywords: social support, subjective well-being, age differences

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INTRODUCTION

Subjective well-being is a multidimensional construct that refers to individuals' subjective evaluations of their lives (Diener, 2006). It includes cognitive evaluations, such as life satisfaction, and emotional responses to life events. Life satisfaction

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refers to an individual's reflective assessment of their life as a whole, or some specific aspect of life (i.e., health, work, social relationships). Emotional responses to life events can be both positive and negative, and researchers are primarily interested in long-term moods such as happiness, which refers to feeling more pleasant than unpleasant emotions most of the time (Diener, Suh, Lucas, & Smith, 1999).

In recent years, several national and international statistical offices have started producing subjective well-being data, together with standardized economic indicators, as measures of national progress (Brezzi & Ramirez, 2016). The national levels of subjective well-being depend mostly on GDP per capita, healthy years of life expectancy, social support, perceived freedom to make life decisions, generosity, and absence of corruption and violence (Helliwell, Layard, & Sachs, 2017). Countries with higher levels of subjective well-being are western industrial countries with all European Union countries in the top half. According to the *World Happiness Report*, Croatia was in the period 2014–2016 placed as the 77th happiest country among 155 world countries (Helliwell, Huang, & Wang, 2017).

At individual level, many factors related to one's sense of well-being have been examined. The most studied ones were gender, age, income, employment status, education level, marital status, personality, health, and individual and social behavior. Research suggests that people who have jobs, higher income, who are satisfied with their health, are married and have harmonious interpersonal relationships tend to be happier than their counterparts (for review see Diener & Ryan, 2009; Blanchflower & Oswald, 2011; Sirgy, 2012; Steptoe, Deaton, & Stone, 2015). When it comes to age, research has shown mixed results. While in richer countries studies identified a U-shaped relation between age and subjective well-being (Schwandt, 2013), in poorer and transition countries older people tend to report lower levels of happiness and overall life satisfaction than other age groups (Deaton, 2008; Kudo et al., 2007; Pinquart & Sörensen, 2000). Research in Croatia showed also lower levels of subjective well-being among older citizens (Kaliterna Lipovčan & Burušić, 2014).

Social relationships and activities have been identified as key elements contributing to individual health and well-being across the lifespan (Antonucci, 2001; Cohen, 2004; Lincoln, 2014; Wagner, Lüdtke, Roberts, & Trautwein, 2014). People with rich and satisfying relationships report feeling happy and satisfied with their lives (Diener & Oishi, 2006; Diener & Seligman, 2002). In the context of social relationships, one of the important predictors of subjective well-being is social support. Defined as "having someone to count on in times of trouble",

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social support was, together with income and healthy life expectancy, found to be one of the three most important factors contributing to differences in national levels of subjective well-being (Helliwell, Layard, & Sachs, 2016).

Cohen (2004) defines social support as a social network providing emotional, informational and instrumental resources. This complex and multidimensional construct has been described and measured in different ways, depending on the categories in which authors organize support. Barrera (1986) emphasizes that social support can be organized into three categories: social embeddedness, perceived social support, and enacted support. Similarly, Krause (2001) distinguishes between social embeddedness (frequency of contact with others), received support (amount of tangible help actually provided by social network members), and perceived support (subjective evaluations of supportive exchanges). Additionally, social support can be quantitative (measured as the number of friends that one can contact in crisis) and/or qualitative (perception of social support adequacy). There are different sources of support: support from family, friends, and significant others. Further, social support can be subjective (the belief that a person can receive support if needed, as well as the degree to which a person is satisfied with the available support) and/or objective support (actual, received support) (Antonucci, 1985; Barrera, 1986; Sarason, Sarason, & Pierce, 1990; Vaux, 1988; Zimet, Dahlem, Zimet, & Farley, 1988).

Quality of social support and broader social relationships are important predictors of subjective well-being (Cohen, 2004; Lincoln, 2014; Siedlecki, Salthouse, Oishi, & Jeswani, 2014). Siedlecki et al. (2014) consider two possible ways in which satisfying relationships are beneficial; one is that individuals with satisfying relationships can obtain support when they need it, while those without satisfying relationships cannot, and the other is that the expectation of being able to rely on someone when needed is comforting, and thus contributes to one's sense of well-being. Cohen & Wills (1985) suggested two theoretical models in which social support can affect subjective well-being: as a general positive effect of support (main effect model), and as a process of support protecting a person from potentially harmful effects of stressful events (buffering model). Each model points to a different process through which social support may affect subjective well-being depending on the measures of social support.

Because of the complexity of both social support and subjective well-being constructs, findings on their relationship vary, in part because of the variations in researchers' conceptualizations and operationalization of these constructs, and be-

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cause different facets of social support can have varied relations with different aspects of subjective well-being. For example, diverse features of social relationships and social support (i.e. larger social networks, positive family relationships, contact with friends, enacted and perceived support, given and received support) were found to be associated with lower depression (Newsom & Schulz, 1996), greater life satisfaction and happiness (Newsom & Schulz, 1996; Pinquart & Sörensen, 2000; Siedlecki et al., 2014), and general well-being (Thomas, 2010). However, there are studies showing negative effects, i.e. increased depression or negative affect (Lakey, Orehek, Hain, & VanVleet, 2010; Lee, Netzer, & Coward, 1995) or no effect of social support on life satisfaction (McCamish-Svensson, Samuelsson, Hagberg, Svensson, & Dehlin, 1999).

The importance of social support for one's well-being also depends on the source of the social support and on the individual's age. Different age groups do not have unique needs and desires for social support from their social networks (Segrin, 2003). From early childhood onwards, social networks (first family, then friends and romantic partners/spouses) provide individuals with physical protection, social guidance, self-definition, and more, leading to both cognitive and affective gains throughout the life span (Carstensen, 1991). Through young and middle adulthood close social relations expand due to increase in family size and social roles of a person (Antonucci, Akiyama, & Takahashi, 2004). However, as people get older, their social interactions decrease. Carstensen's socio-emotional selectivity theory (1991) explains this as a volitional selection process that begins earlier in life and culminates in old age, by which people selectively reduce their social networks with age, focusing their time and energy only on intimate, emotionally supportive social contacts (i.e., family and close friends). These differences in social interactions at different life stages suggest that there may be differences in how various types of social support (i.e., from different sources) are related to well-being across the life span.

Some studies show that in young adulthood perceived social support from friends is more strongly related to their well-being than is social support from family (e.g. Lee & Goldstein, 2016), while others show the importance of perceived family support for one's life satisfaction, and friends' support for positive affect (e.g. Brannan, Biswas-Diener, Mohr, Mortazavi, & Stein, 2013). In the middle-aged and elderly, interactions with and social support from family members become more important for their well-being, especially spouses/partners' support (e.g. Walen & Lachman, 2000), or quality of contact with adult children (Pinquart & Sörensen, 2000). How-

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ever, in some research social support (i.e., contact frequency and mutual support) from friends was found to be more important than family support for enhancing well-being of the elderly (Li, Ji, & Chen, 2014), while in other research either family or friends' support was unrelated to their well-being (McCamish-Svensson et al., 1999).

Not many studies investigated age as a moderator of relationship between social support and subjective well-being. Those that did show that social support is generally the most strongly related to life satisfaction (George, Okun, & Landerman, 1985) or reduced symptoms of depression (Segrin, 2003) of young adults, compared to middle-aged or elderly. However, the results of Segrin's (2003) study also showed that all participants, regardless of their age, benefit in terms of less depression and loneliness from perceived social support from friends. On the other hand, Siedlecki et al. (2014) showed that the relations among different social support variables and aspects of well-being (i.e., life satisfaction, positive and negative affect) do not differ across age, suggesting that social support has a similar effect on subjective well-being across age (Siedlecki et al., 2014).

The aim of this study was twofold: (1) to examine the contribution of perceived social support from various sources (family, friends and significant others) to subjective well-being (happiness, life satisfaction and domain satisfactions); (2) to examine whether the relative contribution of social support from family, friends and significant others to subjective-wellbeing is equivalent across the age groups.

METHOD

Participants and procedure

The data were collected within the project *Pilar's barometer of Croatian society* (2015) in spring 2015, on a multi-staged, proportionally stratified sample that included all Croatian counties. The selection of settlements and number of sample points depended on their share in the strata, and all units within each strata were randomly selected. In each sample point, households were selected using a systematic random procedure from a list of addresses, while respondents within households were selected using the first birthday method. By this procedure, 102 settlements (143 sample points) were chosen to conduct the survey. If for any reason it was not possible to contact the person at the given address, another household at the same micro-location was chosen.

A representative sample of 1000 adult Croatian citizens (52% women), with a mean age of 47.71 years ($SD = 17.75$, $TR =$

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18 - 88), participated in the survey. The majority of the participants finished high school (53.1%), were married (54.5%), employed (43.6%), and with approximate monthly income per household member between 1.500 and 4.000 HRK (200-530 EUR; 52.2%). For the purpose of this study, participants were divided into three age groups: 18 to 40 years ($M = 28.77$, $SD = 6.47$, $N = 375$), 41 to 60 years ($M = 51.04$, $SD = 5.71$, $N = 368$), and 60+ years ($M = 70.83$, $SD = 6.82$, $N = 254$).

Measures

The survey questionnaire included the following measures:

The Multidimensional Scale of Perceived Social Support (MSPSS; Zimet et al., 1988), which consists of 12 items measuring participants' perception of support from three sources: (1) MSPSS--Social support from family (4 items, e.g. "My family really tries to help me.2); (2) MSPSS-Social support from friends (4 items, e.g. "I can count on my friends when things go wrong.") and (3) MSPSS-Social support from significant other (4 items, e.g. "There is a special person who is around when I am in need."). Participants are asked to indicate their level of agreement on a 7-point Likert scale from 1 = *very strongly disagree* to 7 = *very strongly agree*. The total score for each subscale is calculated as the mean of respective items. Cronbach's alphas in this study were 0.92 (support from significant other) to 0.94 (for both support from family and from friends).

Adapted International Well-Being Index (Cummins, Eckersley, Pallant, van Vugt, & Misajon, 2003), its subscale *Personal Well-being Index* (PWI), which consists of seven items assessing participants' satisfaction with seven life domains – standard of living, health, relationships, security, future security, achievement in life and community connectedness. Participants are asked to rate how satisfied they are with each domain, on a scale from 0 = *no satisfaction at all* to 10 = *extremely satisfied*. Correlations between domains range from 0.31 to 0.69. The total score representing the participant's subjective well--being is calculated as the mean of all responses. Cronbach's alpha for the total scale in this study was 0.89.

Happiness was measured by one-item rating ("Taking all things together, how happy would you say you are?") on a scale from 0 = *extremely unhappy*, to 10 = *extremely happy*.

Life satisfaction was measured by one-item rating ("How satisfied are you with your life as a whole?") on a scale from 0 = *extremely dissatisfied*, to 10 = *extremely satisfied.*

Socio-demographic questions included age, gender, level of education, marital status, employment of the participants, and their approximate monthly income per household member.

Data analyses

First, we conducted confirmatory factor analyses (CFA) to evaluate measurement models of the MSPSS and the PWI. Then, we examined the models' invariance across the three age groups using a multiple group CFA. Finally, we performed multiple group structural equation modeling (SEM) to determine (and compare) the contribution of the three perceived sources of social support to one's well-being in the three age groups. CFA and SEM were performed in M plus 7 (Muthén & Muthén, 1998–2015).

The parameter estimates were obtained using the maximum likelihood method. The model fit was evaluated using recommended absolute, comparative and parsimonic fit indices – RMSEA (Root Mean Square Error of Approximation), CFI (Comparative Fit Index), and SRMR (Standardized Root Mean Square Residual). The commonly used measure of model fitness, χ^2, is highly sensitive to sample size, and was therefore used for descriptive purposes only. Values of RMSEA ≤ 0.08, CFI > 0.90, and SRMR < 0.08 were used as cut-offs for determining acceptable model fit (Hu & Bentler, 1999; Schermelleh-Engel, Moosbrugger, & Müller, 2003).

The three-factor model of the MSPSS, with a few modifications (correlated residuals between the pairs of items), showed good fit to the data ($\chi^2 (48) = 542.07$, RMSEA = 0.06, CFI = 0.99, SRMR = 0.02), as did the one-factor model of the PWI, also with a few modifications (i.e. correlated residuals) ($\chi^2 (7) = 34.62$, RMSEA = 0.06, CFI = 0.99, SRMR = 0.02).

Measurement invariance analyses were conducted using a "step-up" strategy, starting with the lowest level of invariance (configural) and testing progressively for a higher one (metric, than scalar), by comparing nested models. Configural invariance implies the same factor structure in each group, metric invariance implies equal factor loadings, and scalar invariance implies both equal factor loadings and intercepts across groups. If full measurement invariance does not hold, partial measurement invariance is tested, in which some parameters are allowed to vary across groups. If (partial) metric invariance is supported, structural relationships between constructs can be examined, and if (partial) scalar invariance is supported, means across groups can be compared. Significant differences between the nested models are evaluated using ΔCFI with a cut-off of 0.01 (Chen, 2007).

For the MSPSS, the full scalar invariance was supported across the age groups (reasonably good configural model fit, $\chi^2 (141) = 484.41$, RMSEA = 0.08, CFI = 0.97, SRMR = 0.03, without a significant drop in model fitness for metric (ΔCFI = 0.004) and scalar model (ΔCFI = 0.003)). For the PWI, a partial

scalar invariance was supported (configural model fit, χ^2 (21) = 67.07, RMSEA = 0.08, CFI = 0.99, SRMR = 0.02, without a significant drop in model fitness for metric (ΔCFI = 0.002) and modified scalar model (ΔCFI = 0.009)).

Taken together, these results allowed us to examine age mean differences in MSPSS and PWI, as well as to compare structural relationships between MSPSS and PWI across the age groups.

RESULTS

Descriptive statistics are presented in Table 1. Gender and age differences were checked for all the variables; while none of the gender differences were statistically significant, age differences were found on both the predictor and the outcome variables. The oldest age group perceived less support from friends than the youngest age group ($F(2, 993) = 6.47, p = 0.00$) and less support from a significant other than the other age groups ($F(2, 993) = 7.40, p = 0.00$). The youngest age group had significantly higher average results on all three measures of subjective well-being than the other two age groups ($F_{PWI}(2, 993) = 10.28, p = 0.00$; $F_H(2, 982) = 20.04, p = 0.00$; $F_{IS}(2, 993) = 6.47, p = 0.00$).

⟳ TABLE 1
Means and standard deviations for the study variables, by age

	Total		18-40		41-60		60+	
	M	SD	M	SD	M	SD	M	SD
PWI-Personal well-being index	6.42	1.90	6.94	1.76	6.20	1.78	5.99	2.09
Happiness	6.99	2.20	7.53	2.10	6.75	2.04	6.53	2.42
Life satisfaction	6.61	2.23	6.99	2.13	6.41	2.14	6.32	2.42
MSPSS-Social support from family	5.90	1.24	5.94	1.21	5.95	1.20	5.75	1.34
MSPSS-Social support from friends	5.66	1.24	5.82	1.14	5.63	1.26	5.45	1.34
MSPSS-Social support from significant other	5.85	1.27	5.99	1.22	5.88	1.26	5.59	1.32

	1	2	3	4	5
1 PWI-Personal well-being index	-				
2 Happiness	0.69**	-			
3 Life satisfaction	0.67**	0.79**	-		
4 MSPSS-Social support from family	0.29**	0.26**	0.25**	-	
5 MSPSS-Social support from friends	0.34**	0.30**	0.25**	0.59**	-
6 MSPSS-Social support from significant other	0.30**	0.29**	0.23**	0.72**	0.69**

Note. **$p < 0.001$.

☊ TABLE 2
Correlations between study variables on a total sample

Correlational analyses showed high positive correlations between the three measures of subjective well-being, as well as high positive correlations between the perceived social support from the three sources. Also, all three aspects of perceived

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social support were significantly positively related to the measures of subjective well-being, ranging in size from low to medium, with the highest correlation between the social support from friends and a personal well-being index ($r = 0.34$), and a lowest between social support from significant other and life satisfaction ($r = 0.23$).

Considering the high correlation between happiness and life satisfaction, and the theoretical consideration of the two as the affective and cognitive aspects of subjective well-being, respectively, these two variables were used as manifest indicators of the latent subjective well-being variable (SWB). According to Diener et al. (2017, p. 2) "we cannot obtain a full assessment of SWB by simply measuring one facet of this larger construct; several components must be measured to provide a rounded account of SWB." Therefore, we measured affective (happiness) and cognitive (life satisfaction) components of SWB and used it as one variable in subsequent analyses.

The contributions of the perceived social support from the three sources to PWI (Model 1) and SWB (Model 2) were investigated using SEM. Moreover, multiple group SEM were performed to examine age differences in the relationship between social support and subjective well-being.

⟳ FIGURE 1
Model 1 – Final SEM model of the relationship between social support and subjective well-being measured by PWI (PWI_1 = standard of living, PWI_2 = health, PWI_3 = achievement, PWI_4 = relationships, PWI_5 = security, PWI_6 = community connectedness, PWI_7 = future security)
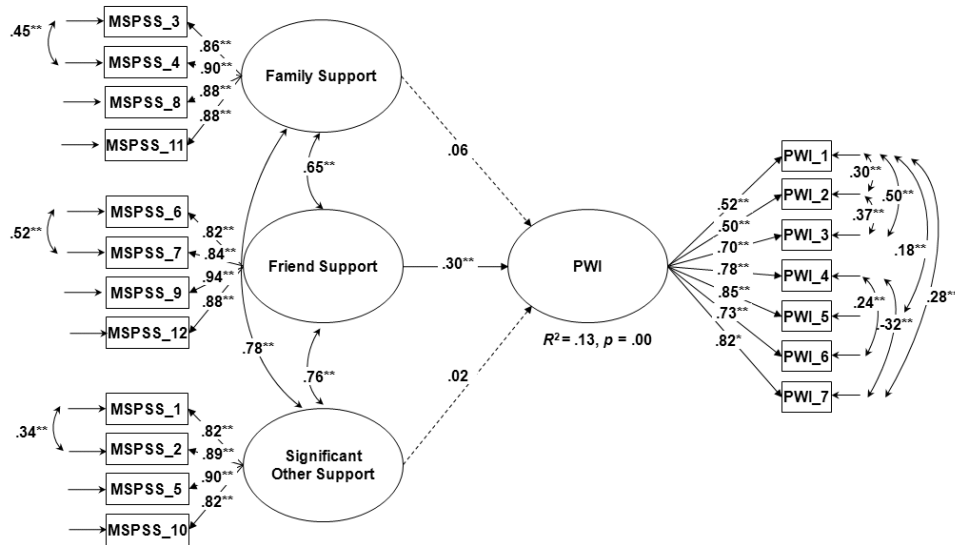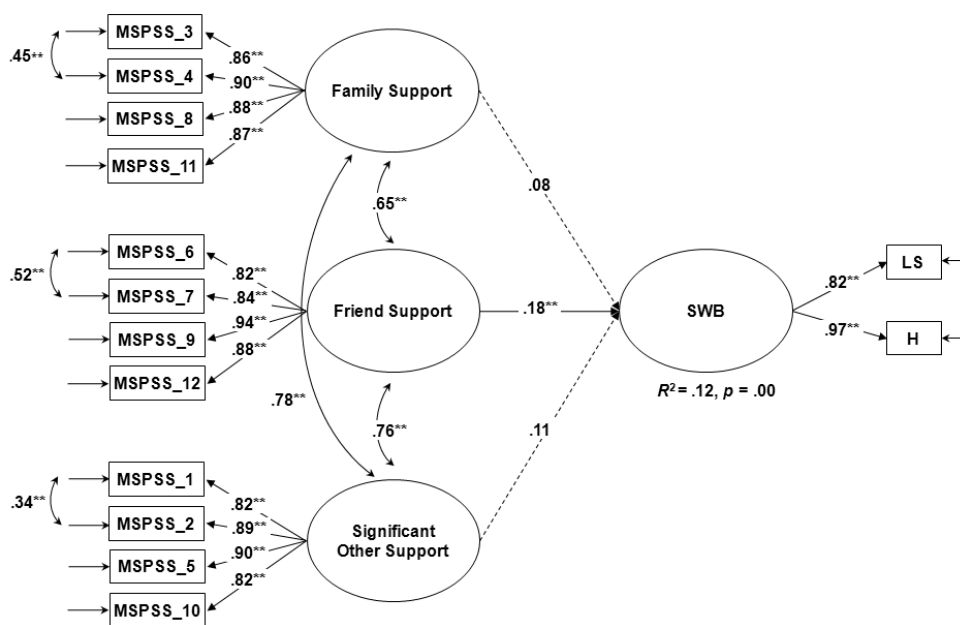

Note. Standardized parameter estimates are shown. **$p < 0.001$

Both models fit the data well across the total sample (Model 1: $\chi^2 (136) = 435.05$, RMSEA = 0.05, CFI = 0.98, SRMR = 0.04; Model 2: $\chi^2 (68) = 226.18$, RMSEA = 0.05, CFI = 0.99, SRMR = 0.02). However, not all regression coefficients were significant.

The only significant predictor of the subjective well-being, represented by either PWI or SWB, was the perceived social support from friends.

Next, multiple group SEM were conducted. Multigroup models also showed good fit to the data (Model 1: χ^2 (245) = 696.16, RMSEA = 0.07, CFI = 0.97, SRMR = 0.06; Model 2: χ^2 (465) = 1182.70, RMSEA = 0.07, CFI = 0.96, SRMR = 0.07), without the significant drop in the model fitness after constraining regression coefficients to be equal across the three age groups (Model 1: ΔCFI = 0.001; Model 2: ΔCFI = 0.000). Thus, the results indicated that there are no age differences in the observed relationship between social support from the three sources and subjective well-being; in all age groups only the perceived social support from friends was significantly related to subjective well-being. Therefore, models for the total sample were kept as final and are shown in Figure 1 and Figure 2.

Note. Standardized parameter estimates are shown. **$p < 0.001$

DISCUSSION

The aim of this study was to examine how perceived social support from different sources (family, friends and significant others) is related to well-being across the life span. The study was conducted on a representative sample of Croatian citizens in spring 2015.

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As shown by descriptive analyses (Table 1), Croatian citizens in general felt moderately happy ($M = 6.99$) and satisfied with their lives ($M = 6.61$), with younger participants showing significantly higher levels of subjective well-being in terms of happiness, life satisfaction and domain satisfactions (represented by Personal well-being index) than middle-aged and older participants. Decline in various measures of subjective well-being with age was found also in previous research conducted in Croatia (Eurofound, 2014; Kaliterna Lipovčan & Burušić, 2014; Kaliterna Lipovčan & Prizmić Larsen, 2006) as well as in research conducted in other transitional countries (Deaton, 2008; Guriev & Zhuravskaya, 2009; Kopnova & Rodinova, 2015). Analyzing the data of the European Social Survey (ESS) Kopnova and Rodionova (2015) showed that the main reason for lower well-being in the older age groups in transition countries was lower satisfaction with financial situation. Taking into account that the average old age pension in Croatia is 39.5% of the average salary (Nestić, 2011), it is not surprising that the older population constantly show lower levels of well-being than other age groups.

When speaking of social support from various sources, this study showed that Croatian citizens perceived relatively high levels of social support from all three sources, family ($M = 5.9$), significant others ($M = 5.8$) and friends ($M = 5.7$), if we take into account that the theoretical range of social support ratings were from 1 to 7. There were no differences between age groups in perceived social support from family, but the oldest age group perceived less support from friends than the youngest, and less support from significant others than both youngest and middle age groups. These findings are in line with the socio-emotional selectivity theory (Carstensen, 1991) by which older people selectively reduce their social networks, focusing their time and energy on intimate, emotionally supportive social contacts, mostly with partners/spouses and/or family members. According to this theory, with increasing age perceived limitations on time lead to reorganizations of goal hierarchies, thus older people's motivation is to regulate their emotional experience in order to maximize positive and minimize negative affect (Carstensen, Isaacowitz, & Charles, 1999). This process could lead to relatively high levels of well-being in older adults, despite their experience of multiple losses at that age. However, the results of our study showed lower levels of well-being in older adults than younger ones. This can be partly explained by the above-mentioned unfavorable financial situation of older people in Croatia, and partly by the relatively young age ($M = 70.83$ years) of participants belonging to the older-age group in our study. Individuals focus on emotional goals when they perceive time as lim-

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ited (Carstensen, Fung, & Charles, 2003), which doesn't happen necessarily at the age of 71.

The results from correlational analysis (Table 2) showed in general that all three sources of social support were positively, but not highly, associated with various aspects of subjective well-being (happiness, life satisfaction, domain satisfactions), with correlation coefficients ranging from 0.23 to 0.34. For the subsequent analyses, examining contributions of the perceived social support to the subjective well-being, we decided to use life satisfaction and happiness ratings together as one general measure of SWB (Diener et al., 2017), and Personal Well-Being Index (PWI) as a general measure of domain satisfactions. In order to determine and compare the contribution of the perceived social support from three sources (family, friends, significant others) to the well-being (SWB and PWI), across the three age groups, the multiple group structural equation modelling was performed. The results showed that in all three age groups, among three sources of social support only the perceived social support from friends was significantly related to both SWB and PWI. Therefore, we can conclude that, irrespective of age, perceiving adequate social support from friends was associated with higher levels of well-being. Similar results, but examining psychosocial problems and not well-being, were obtained in the study of Segrin (2003). On a sample of 325 adults ranging in age from 19 to 85 years, while examining age as a moderator factor in the relationships between different sources of social support and psychosocial problems, he found that "all participants appeared to benefit equally from friend social support, regardless of their age" (Segrin, 2003, p. 328). The same results, i.e. no evidence to indicate age as a moderator between social support and psychosocial problems, were obtained for perceived social support from friends as well as for number of contacts with friends. Age differences in predicting well-being by different types of social support were also not found in the study of Siedlecky et al. (2014), however, the authors didn't analyze sources of support, but different types of support (social embeddedness, enacted and perceived support).

Friends as a source of social support were found in different studies especially important for the older population. Older adults experienced lower negative affect on days when friends were the main providers of emotional support in the study of Scholz, Kligel, Luszczynska, and Knoll (2012), and reported a higher ratio of positive to negative affect on days they were satisfied with the amount of support received from friends (Montpetit, Nelson, & Tiberio, 2017). In the study of Montpetit et al. (2017), it was found that support from friends

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had its main effects on daily well-being when advice and emotional support were needed, while family support had effects on well-being when older adults perceived others as available to provide assistance. Pinquart and Sörensen (2000) found that contact with friends was more strongly associated with well-being than interactions with adult children, while Li et al. (2014) found that social support from friends was more significant in enhancing positive affect than family support for the elderly.

The literature suggests that friends play a particularly vital role in terms of reassurance of worth relative to family (Montpetit et al., 2017). Pinquart and Sörensen (2000) pointed to the four possible reasons why support from friends may be more important for the well-being of the elderly than relationships with family, but all the reasons can apply to the whole population, regardless of age. First, friendships are voluntary, while family relationships may be maintained in part because of cultural norms and obligations. Second, friends are typically members of the same group and often share personal characteristics, cohort experiences, and lifestyles. Third, friends are usually a source of enjoyment and socializing, while within family people share also demanding tasks, such as care for other family members. Fourth, relationships with friends are usually of high quality because it is easier to disengage from unsatisfactory friendship than from unsatisfactory family. Therefore, receiving emotional support from friends may build self-esteem and subsequently well-being more than obligatory family relationships (Pinquart & Sörensen, 2000). Results from our study support this assumption. In favor of the importance of socializing with friends in Croatian society speaks also the finding that among various leisure activities practiced by Croatian citizens, visiting friends or relatives and going to bars or clubs are, besides watching TV, the most frequent leisure activities in the population aged 18-60 years (Brajša-Žganec, Merkaš, & Šverko, 2011). More frequent engaging in these activities was found to contribute significantly to the subjective well-being of Croatian citizens.

The present study, however, has some limitations. First of all, its cross-sectional nature does not allow us to make causal predictions. A longitudinal study would enable better understanding of the relationships between various social support measures and measures of well-being. Another limitation is that we measured only the perceived support from various sources, and not the actual support. The distinction between results obtained using global measures of perceived social support and perceptions of support in actual social interactions is emphasized in some cross-cultural studies (e.g. Kafe-

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tsios & Nezlek, 2012) and therefore, to better understand the relationship between social support and well-being, different measures of social support should be used together in future studies. Also, the measures of subjective well-being used were general measures such as life and domain satisfactions and happiness, while in the future study we could also include measures of positive and negative affect, as there are findings in the literature of varied relationships between aspects of social support and different indicators of well-being. In addition, the results of our study might be culturally specific. Croatian society can be characterized as a traditional one, with patriarchal attitudes in familial and social relations (Grandits, 2010), which could affect obtained results. Studies with different cultural background are needed in order to establish generalized relationships between social support and well-being.

CONCLUSION

The results of this study point to the conclusion that, regardless of age, among various sources of perceived social support, the perceived support from friends is the most important for the subjective well-being of Croatian citizens. This does not mean that other sources of social support (family and significant others) are not important, as they were also associated with well-being measures; these results show that among different sources, friends' support was relatively the most important. The main strength of the research is that it was conducted on a relatively large and representative sample of Croatian citizens, allowing generalized conclusions for the society. The practical implication of these results is that people should maintain good and satisfying relationships with friends in order to enhance their well-being. This is especially important for the elderly, as their social networks tend to shrink with advanced age. In order to increase and maintain higher levels of well-being, the elderly should be encouraged to socialize more with friends and expand their social networks.

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Odnos socijalne podrške
i subjektivne dobrobiti tijekom života

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Cilj ovog istraživanja bio je ispitati kako percepcija socijalne podrške dobivene iz različitih izvora (obitelj, prijatelji, značajni drugi) pridonosi subjektivnoj dobrobiti (sreći, životnom zadovoljstvu i zadovoljstvu pojedinim područjima života) tijekom života. Istraživanje je provedeno na reprezentativnom uzorku punoljetnih hrvatskih građana (N = 1000). Za potrebe statističkih analiza uzorak je bio podijeljen u tri dobne skupine: 18 do 40 godina, 41 do 60 godina i 60+ godina. Rezultati su analizirani pomoću multigrupnog strukturalnog modeliranja (SEM) provedenog za dvije mjere dobrobiti zasebno (SWB – generalizirana mjera sreće i životnog zadovoljstva te PWI – zadovoljstvo različitim životnim područjima). Rezultati su pokazali da je u svim dobnim skupinama, između tri izvora socijalne podrške, jedino percipirana socijalna podrška prijatelja bila značajno povezana s oba indikatora dobrobiti. Sudionici koji su percipirali veću i adekvatniju socijalnu podršku od prijatelja iskazali su više razine subjektivne dobrobiti.

Ključne riječi: socijalna podrška, subjektivna dobrobit, dobne razlike

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