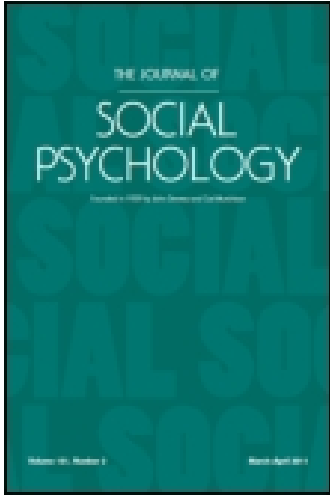


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Life Events, Social Support, and Depression Among Taiwanese Female Homemakers

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ABSTRACT. Eighty-five female homemakers in a Taiwanese city were surveyed. Multiple regression analysis indicated that age, life events, and social support were related to depression symptomatology. Younger homemakers reported more depressive symptoms than their older counterparts did. Life events were related to depression, and social support acted as a buffer against depression.

NEARLY HALF THE MARRIED WOMEN in contemporary Taiwan are not employed outside the home. These homemakers have multiple roles (including those of wife, mother, housekeeper, nurse, teacher, and cook) and often work from dawn to dark, but their contribution is seldom acknowledged by Chinese society, which often shows them contempt and even hostility. This situation has remained relatively unchanged for centuries, but in recent decades, as more Taiwanese women pursue careers outside the home, they have experienced a crisis that has threatened their sense of self-worth and their identity. The present study explores the relationships between these homemakers' stress, social support, and depression.

Research on life events has consistently demonstrated a reliable and meaningful, if modest, connection between life stress and psychological distress (Dohrenwend & Dohrenwend, 1981; Nufeld, 1989; Rice, 1992). One popular explanation for this connection, the vulnerability model, states that the relationship varies with both personal and social characteristics (Cohen & Wills, 1985; Dohrenwend & Dohrenwend); the vulnerability model conceptualizes stress as a multifactorial process, with personal dispositions and social situational variables influencing the stressors' pathogenic effects.

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A competing proposition, the additive model, posits that, independent of the stress factor, personal and social factors may have main effects on psychological well-being. The additive model has received substantial empirical support because although researchers have failed to identify significant interactions in the life stress–psychological distress relationship, they have found meaningful main effects (Cohen & Edwards, 1989; Lu, 1990; 1991; 1994).

In recent years, there has been considerable research interest in the relation between social support and physical and psychological health (Cobb, 1976; Gore, 1978; Henderson, 1981), some of it involving structural measures of social networks (Berkman & Syme, 1979; Husaini, Neff, Newbrough, & Moore, 1982). In a study on women and depression, Brown and Harris (1978) found that an intimate bond with a boyfriend or husband helped shield women from depression when they were exposed to stressful life events, regardless of the presence of other vulnerability factors. However, social network measures do not predict responsiveness to stressors and therefore can provide only indirect evidence of support (Cohen & Wills, 1985; Turner, 1983), that is, the existence of an intimate relationship between two people (e.g., marriage is not a guarantee of the existence of supportive behaviors). Thus, another type of measure might provide a more accurate measure of support actually received (Barrera, Sandler, & Ramsey, 1981).

Brown and Harris (1978) found that working-class women are more likely than middle-class women to suffer from depression. Because the former do not necessarily face more stressful events than the latter do, the large difference in the incidence of depression between the two groups can only be attributed to a class difference in vulnerability. One of my goals in the present study was to determine whether this factor would be valid in a Chinese society. (A homemaker's social class was operationalized as the family's annual income and the woman's educational attainment.)

Age has sometimes been found to relate to affect: Braun (1977) found that younger respondents reported higher levels of both positive and negative affect. Although older homemakers may adhere to traditional sex role and values, their younger, better educated counterparts may be more susceptible to social changes and, hence, experience more internal conflict.

In the present study I explored the mental health status, and especially the depression symptomatology, of a largely neglected population, female homemakers. I also investigated the predictive power of social support and some demographic variables in the context of stress–depression. Finally, I compared the vulnerability model and the additive model, using a Chinese sample.

Method

Participants

The data were from a larger ongoing study on Taiwanese female homemakers in Kaohsiung city. Eighty-five homemakers were randomly selected from one down-

town district. The participants' average age was 37.7 years ($SD = 8.3$), with a range of 38. All the participants were married.

Measures

The demographic variables were the participants' level of formal education, the number of children they had, history of severe illness (physical and mental), and annual family income.

Twenty severe life events were selected from Holmes and Rahe's (1967) Social Readjustment Rating Scale, adjusting for the homemakers' life circumstances. Events included a "significant decrease in family income (over 20%)," "being attacked or robbed," and the "death of a family member."

The socially supportive behaviors scale of Barrera et al. (1981) was used to measure the amount of support (tangible, informational, and emotional) actually received.

I used Zung's (1965) Self-Rating Depression Scale (SDS) because it measures depressive symptomatology rather than clinical depression. This scale has been shown to have acceptable reliability and validity (Zung, 1971).

Results

Regarding educational attainment, 18.8% of the women had a primary school education; 24.7%, a middle school education; 43.5%, a high school education; and 12.9%, a college or university education. Thus, most of the homemakers had an average level of education.

Regarding family income, 82.3% of the families' incomes ranged between (New Taiwan dollars) NT\$300,000–700,000 (US\$12,000–28,000), 3.6% earned less than NT\$300,000 (US\$12,000), and 14.1% earned more than NT\$700,000 (US\$28,000). Thus, the families in the present study were in the middle economic range.

Pearson correlation coefficients were computed between demographic variables, life events, social support, and depression. Among the demographic variables, only age was negatively correlated with depressive symptomatology ($r = -.25, p < .05$). Although homemakers reported relatively few life events in the past year, both life events and social support were correlated with depression, and in the expected directions ($r = .24, p < .05$ and $r = -.36, p < .001$, respectively). However, these correlations were modest at best.

To test the predictive power of demographic factors, life events, and social support, I conducted a hierarchical regression analysis of depression. In Step 1 I entered age, education, and income into the equation, to control for their potential effects. Life events were entered in Step 2, social support was entered in Step 3, and the interaction between life events and social support was entered in Step 4.

Of the demographic variables, age was negatively related to depression ($\beta = -.23, p < .05$), whereas education and income were not correlated with depres-

sion. Life events were positively related to depression ($\beta = .24, p < .05$), and social support was negatively related to depression ($\beta = -.33, p < .01$). Together these three variables accounted for 24% of the variance in depression. However, the product-moment term of interaction between events and social support was not statistically significant.

Discussion

I used Zung's (1965) Self-Rating Depression Scale (SDS) to measure depressive symptomatology. Although the scale had been revised and tested in Taiwan (Miao, 1976, 1977), the samples had consisted of college students. Thus, lacking a norm for community mental health status, I was unable to determine the homemakers' absolute mental health status. Nevertheless, according to Zung's clinical observation, the cutoff point for diagnosing cases of depression is 50, and none of the homemakers were in this category. Consequently, the present study concerned psychological distress (rather than psychiatric morbidity) and the correlates of depressive symptoms among the homemakers.

Age was the only significant correlate among the demographic variables that were tested. Younger housewives reported more depressive symptoms, consistent with the findings of previous research on affect—that younger people experience higher levels of and more intensity of both positive and negative affect (Braun, 1977). From a historical and social perspective, this evidence may indicate a cohort effect. One possibility is that, as more young, educated women pursue careers outside the home, those who remain at home have a more immediate reference for comparison. Another possibility is that in recent decades there have been fundamental changes in attitudes and values in Taiwan, causing younger women to feel alienated from and even to reject their traditional female role of homemaker. Thus, younger homemakers may feel trapped and hence experience more distress.

The homemakers' education and family income was not related to depression, but because level of education in Taiwan is noticeably correlated with age, its effect may have already been embedded in the age-depression relationship. Regarding family income, most Taiwanese families are reasonably affluent, a fact that was reflected in the data from the present sample. Thus, the respondents' incomes may not have differed enough to allow for the demonstration of an income effect. At any rate, the distinction between the working class and the middle class in Taiwan in terms of economic status may not be very relevant. Hence, future researchers might examine other indicators of social class, such as husband's education and occupation, or degree of urbanization.

Life events were found to be related to depression among the homemakers, consistent with previous findings (Brown & Harris, 1978). However, the homemakers seemed to lead relatively uneventful lives, with, on average, only one life event occurring in the space of a year. This relatively low degree of exposure to life stress can still result in considerable distress, however. Because homemakers

do not work outside the home, and some do not leave the house often, the life events they do experience may have a considerable impact on their emotional health.

Social support was negatively related to depression and had a main effect rather than an interactive effect with stress. Social support was positively related to mental health, regardless of the level of stress experienced. Although researchers have repeatedly confirmed that social support is a resistance factor in stress (Veiel & Baumann, 1992), there is reason to believe that social support is more important to women (especially homemakers) than to men. Possibly because of biological, childrearing, cultural, and sociological factors, women value, actively seek, and participate in social relationships more than men do (Argyle, 1991). Thus, social support may be women's most valuable resource in fighting stress. Other possibilities are that homemakers are usually the social coordinators in families and that the support and help homemakers derive from their immediate relationships provide a sense of validation.

A note of caution in interpreting the present results is necessary. This study was based on a cross-sectional design and was intended to test the relationships among stress, social support, and depression among Taiwanese female homemakers. As such, the present study is not appropriate for use in making causal inferences but rather for identifying potential directions for future research.

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