
SOCIAL SUPPORT AND SUCCESSFUL AGING: AN INTERGENERATIONAL COMPARISON

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ABSTRACT

The objective of the present study is to find out the intergenerational similarities and differences in social support and successful aging in joint families. The current research is based on a survey design in which data was collected from three generations (grandparents, fathers, mothers, grandchildren) living together. The final sample comprised 1080 participants with a distribution of 270 grandparents, 270 fathers, 270 mothers, and 270 grandchildren. Social support was assessed by using the MacArthur Battery of Social Support with four dimensions, including received emotional support, received instrumental support, perceived demand and criticism, and provided support. In contrast, successful aging was assessed by using the Successful Aging Scale. Findings show a strong positive relationship between received emotional support, received instrumental support, perceived demand, and criticism, and provided support and successful aging of grandparents, fathers, mothers, and grandchildren. Results also indicate significant mean differences in study variables except for instrumental support for grandparents, fathers, mothers, and grandchildren. Multi-group analysis revealed pairwise comparison for the modeled path. Findings show fathers receive greater emotional support and have better successful aging; both fathers and mothers reported greater provided support, whereas grandchildren reported receiving greater demand and criticism than other groups.

KEYWORDS*Social Support, Successful Aging, Intergenerational Relationship, Joint Families***INTRODUCTION**

Successful Aging (SA) is a multi-dimensional concept that has gathered immense

attention in the past few decades. Successful aging was once conceptualized as merely the absence of diseases or longevity but is now theorized on numerous well-being dimensions. Although aging is still conceptualized negatively, relying on biological dimensions, successful aging has positive characteristics focusing on social and psychological aspects. As Hendrie et al. (2006) explained, one of the critical public health goals is to identify the psychosocial factors other than biological factors to enhance one's successful aging. The last two decades of research (Gallardo-Peralta et al., 2020, Glow et al., 2007, Kim & Park, 2017; Li et al., 2014; Parslow et al., 2011, Seeman et al., 2001) has emphasized psychosocial factors, including social networks and emotional support, as significant protective factors. Social support serves as a buffer, thus reducing the impacts of stressful events, terminal diseases, loss of loved ones while increasing overall well-being. Having a supportive social network improves one's physical (Ashida & Heaney, 2008) and psychological health (Bélanger et al., 2016), thus improving successful aging. Social networks, specifically family members, have a strong influence on the successful aging of all age groups. Findings have indicated a strong positive relationship between the availability of social support and successful aging (Cho et al., 2015). This societal integration takes place within a family upon which the whole social life of an individual revolves. In intergenerational families, individuals are interdependent over family members; thus, there is a multi-dimensional support flow (Bélanger et al., 2016).

LITERATURE REVIEW

The life course perspective has explained the importance of the 'linked lives' paradigm, emphasizing that the interconnectedness of living together leads to aging successfully. In intergenerational families, family members are bonded with each other depending upon their roles and needs. This interdependence might have positive and negative effects, as receiving social support from one's social network results in positive outcomes. According to life course perspective, expectations and demands from each generation have a significant impact on the behavioral consequences of other generations. For instance, the financial support provided by the middle generation to first and third generations is positively associated with the satisfaction of all the generations. The reason behind the satisfaction of the middle generation relies on fulfilling their obligation towards their elderly parents and young children, whereas receiving financial support by the first and third generations is associated with greater satisfaction. So based upon the literature, it is hypothesized that there is a positive relationship between social support dimensions (emotional & instrumental) and successful aging. On the other hand, increased expectations and demands are linked with adverse outcomes. So it is hypothesized that demands and criticism are negatively associated with successful aging in grandparents, fathers, mothers, and grandchildren. Similarly, reciprocity theory focuses on the differences in the exchange of social support dimensions within an intergenerational family. This theory assumes that the

elderly of first-generation receives instrumental support from the middle and third generation, and try to provide emotional assistance and advice to both generations, thus avoiding feeling dependent and consequently balancing support exchange. Studies suggest that grandparents receive greater practical and financial support from the third and second generation, respectively, whereas grandchildren receive greater emotional and financial support from their elderly. On the contrary, females of the middle generation reported greater demands and criticism from the elderly generation and increased expectations from their children. Moreover, Chan et al. (2010) found that parents tend to provide greater assistance to their adult children and receive emotional and instrumental support only when they are ill or old. This imbalance in support exchange is more evident in the case of instrumental support especially financial support. So, the following hypothesis states a significant difference in receiving instrumental and emotional support and demand and criticism between grandparents, fathers, mothers, and grandchildren.

Although mixed literature is available on receiving emotional and instrumental support in intergenerational families; yet all agree upon the mutual exchange of these support systems and suggest that, for all the generations, provided support is as vital as receiving (Lowenstein, 1999). The studies focusing on the upward exchange of support found that children tend to report greater support provision to parents than their parents report receiving (Mandemakers & Dykstra, 2008). In contrast, downward support exchange studies from parents to children reported mixed findings depending on the type of support. Results suggest that elderly parents provide more support to their children than receiving either emotional or instrumental support (Grundy, 2005), considering it their responsibility. In contrast, adult children reported greater provided support, primarily instrumental support when parents need it, considering it their filial obligation (Silverstein, Gans, & Yans, 2006). In Asian societies, daughters-in-law reported greater support provided to their in-laws' parents than their biological parents, than those living in the United States who offer greater assistance to their parents than their parents-in-law (Kim, 2002). So, it is hypothesized that will be a significant difference in the support provided to others between grandparents, fathers, mothers, and grandchildren.

The general pattern emphasizes that receiving support from children leads to increased well-being of parents. In contrast, providing support to their adult children and grandchildren is also associated with higher well-being for grandparents (Thomas, 2010). Literature has suggested that receiving support from one's immediate family is linked with well-being and better quality of life. Empirical studies show mixed literature regarding the effects of support exchange on one's overall well-being. Some studies found that receiving support from adult children has a negative impact on grandparents' well-being because they view their dependence on their family members

negatively, whereas some studies found opposite findings. Numerous findings suggest that receiving support from adult children and grandchildren has a positive impact on grandparents' well-being as for them, receiving support from family is psychologically gratifying. Some studies have also reported no significant effect of support exchanges on the elderly's well-being (Dwyer, Lee, & Jankowski, 1994).

Similarly, for the middle generation, providing support to elderly parents and younger children has beneficial impacts on their well-being because supporting family members is associated with their self-actualization. It provides them with greater gratification and satisfaction, thus increasing successful aging. For the younger generation receiving support from family members is crucial. Adolescents are a time of storm and stress, and greater criticism from family often leads to anxiety and frustration. On the other hand, high perceived support from parents and grandparents results in positive outcomes, thus improving overall successful aging. Although receiving and providing positive support is essential for all three generations, the paths and dimensions are different for grandparents, fathers, mothers, and grandchildren. So based on the past literature (Cho et al., 2015; Gallardo-Peralta et al., 2020, Kim & Park, 2017; Li et al., 2014), a latent variable model is conceptualized, that receiving different forms of social support (emotional support, perceived instrumental support, & perceived demand/criticism) directly affects support provided to the family members and indirectly affects one's successful aging where the provided support acts as a mediator. This exchange of social support is related to one's increased well-being, so the model extends hypothesizing that giving support to the family members directly and positively affects one's successful aging. Furthermore, it is hypothesized that the modeled paths are different for four groups (grandparents, fathers, mothers, & grandchildren). So the next hypothesis states that perceived emotional support, perceived instrumental support, and received demand/criticism from family members affect one's successful aging directly and indirectly via the provided support differently in grandparents, fathers, mothers, and grandchildren.

RESEARCH OBJECTIVE

1. The objective of the present study is to find out the intergenerational similarities and differences in social support and successful aging in joint families.

RESEARCH QUESTIONS

1. What is the relationship between social support dimensions (emotional, instrumental, demand & criticism, provided support to others) and successful aging?
2. What is the difference between social support dimensions (emotional, instrumental, demand & criticism, provided support to others) and successful aging among three generations?
3. How do perceived emotional support, perceived instrumental support and received

demand / criticism from family members affect one's successful aging among three generations?

RESEARCH METHODOLOGY

Sample and Procedure

The sample of the current study was comprised of joint families having three generations (grandparents, parents, & grandchildren). Initially, 380 families with all three generations living together and no fatal medical condition were approached personally. Only 375 families out of 380 agreed to participate in the study, whereas the response rate was 83%. (310 families approximately). Out of 310 families, only 270 forms were included in the analysis. The excluded 40 forms have a missing set of a family member (i.e., 17 missing forms of grandparents, 18 missing forms of fathers, four missing forms of mothers, and one missing form of grandchildren). Data was collected from Lahore, Sialkot, Gujranwala, and Rawalpindi. Though all the scales were translated to the Urdu language, the first author made the appointment at their home, who herself read questionnaires to collect their responses for those who were illiterate. So the final sample of the current study consisted of $N = 1080$ participants with a distribution of 270 grandparents (123 grandfathers & 147 grandmothers), 270 fathers, 270 mothers, and 270 grandchildren (84 grandsons & 186 granddaughters). Age range of grandparents were between 63 and 100years ($M = 76.14$; $SD = 7.98$), fathers were 36 to 65years old ($M = 49.31$; $SD = 5.97$), mothers were 31 to 62years old ($M = 44.92$; $SD = 5.41$) and grandchildren were 18 and 28years old ($M = 19.95$; $SD = 2.15$).

Instruments

Along with a detailed demographic sheet, each family member has to respond on the following instruments.

MacArthur Battery of Social Support

The MacArthur Battery included assessments of respondents' social networks (structural & support characteristics). In the current study, items related to support characteristic were included. Measures of support characteristics comprised frequency of emotional support, instrumental support, demand/criticism, and provided support. Summary measures were based on the participants' responses to items that were asked separately for three categories of social network (grandparents, fathers, mothers, & grandchildren). Four Likert-type responses ranging from 0 (never) to 3 (frequently) were used. The battery was translated (in Urdu) using the back-translation method Beaton, Bombardier, Gullemin, & Ferraz, 2000) for the first time. Psychometric properties were established on all the three populations' support measures separately. Cronbach's alpha was high for the study sample for all populations as indicated in Table 1.

Successful Aging Scale (SAS)

The Successful Aging Scale (Reker, 2011) with 3 subscales measuring healthy life style, adaptive coping, and engagement with life, is a 14 item scale. The scale is 7 point Likert-type ranging from 1 (strongly disagree) to 7 (strongly agree). Alpha reliability coefficients of the original composite scale and its components were high ranging from .72 to .84. Higher scores on the SAS represent high successful aging. The scale was first time translated (in Urdu) using the back translation method (Beaton, Bombardier, Gullemmin, & Ferraz, 2000) after taking permission from the author

Psychometric properties were established on all the three populations separately. Item 1 of healthy life style scale was deleted due to negative corrected item total correlation which improved the reliability of subscales. Alpha reliability coefficient was high for the study sample for all populations as indicated in Table 1.

DATA ANALYSIS AND RESULTS

The analyses consisted preliminary statistics including psychometric evaluation of measures, descriptive data, bivariate correlations, and ANOVA using SPSS 21. Before proceeding to the final analysis, the appropriateness of the data was checked. Findings of skewness and kurtosis indicated that data was normally distributes except for emotional support (in fathers) and successful aging and its two subscales i-e., healthy life style and engagement with life (in mothers, & grandchildren) as indicated in Table 1.

Table 1: Alpha reliability, kurtosis, and skewness of study variables.

Var	Grandparents (N=270)			Fathers (N=270)			Mothers (N=270)			Grandchildren (N=270)		
	<i>skew</i>	<i>kurt</i>	<i>α</i>	<i>skew</i>	<i>kurt</i>	<i>α</i>	<i>skew</i>	<i>kurt</i>	<i>α</i>	<i>skew</i>	<i>kurt</i>	<i>α</i>
ES	-1.5	2.02	.81	-2.3	6.53	.79	-1.49	2.78	.74	-1.22	1.05	.73
IS	-0.9	0.32	.72	-1.1	1.43	.70	-0.68	-0.13	.67	-0.79	0.267	.68
D/C	2.7	-0.77	.82	-0.12	-0.42	.73	-0.25	-0.31	.74	-0.38	-0.38	.78
PS	-0.8	0.27	.71	-1.1	-0.98	.71	-1.3	2.2	.69	-0.90	0.64	.70
SA	-1.38	2.87	.89	-1.14	2.60	.81	-1.66	5.74	.81	-1.68	5.71	.85
HLS	-1.8	3.81	.82	-0.98	1.49	.72	-2.08	8.29	.68	-2.04	6.47	.80
AC	-1.24	2.37	.73	-1.03	1.36	.67	-1.37	3.26	.69	-1.52	3.93	.74
EwL	-1.28	1.94	.83	-1.70	4.86	.72	-1.63	4.26	.77	-1.60	4.86	.78

Note: ES= Emotional Support, IS= Instrumental Support, D/C= Demand & Criticism, PS= Provided Support, SA= Successful Aging, HLS= Healthy Life Styles, AC= Adaptive Coping, EwL=Engagement with Life, skew=skewness, kurt= kurtosis * $p < .05$, ** $p < .01$, *** $p < .000$

Pearson product-moment correlation was calculated for all the three generations (grandparents, fathers, mothers, & grandchildren) among all the study variables in Table 2.

Table 2: Correlation matrix of study variables

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19
1.GP ES	-																		
2.GP IS	.59**	-																	
3.GP DC	-.20**	-.07	-																
4.GP PS	.26**	.38**	.04	-															
5.GP SA	.11	.20**	-.08	.28**	-														
6.F ES	.26**	.28**	-.03	.03	.04	-													
7.F IS	.25**	.34**	.00	.12	.24**	.47**	-												
8.F DC	-.02	-.01	.27**	.03	-.04	.02	.15*	-											
9.F PS	.17**	.12*	-.15*	.12	.11	.22**	.24**	-.01	-										
10.F SA	.10	.20**	-.04	.14*	.25**	.16**	.14*	-.16**	.32**	-									
11.M ES	.09	.16*	-.06	.16**	.13*	-.02	.02	.04	-.01	-.02	-								
12.M IS	.08	.16**	-.06	.26**	.17**	-.12	-.02	.04	-.06	-.04	.54**	-							
13.M DC	.04	-.01	-.04	.03	-.05	.06	.00	-.14*	.00	.06	.10	.07	-						
14.M PS	.04	.04	-.11	.09	.08	-.16*	-.11	-.05	-.10	-.07	.12	.29**	.15*	-					
15.M SA	.03	.05	.01	.00	.08	-.07	.05	.01	-.01	-.04	.15*	.17**	-.22**	.16**	-				
16.GCES	.13*	.16**	.04	.10	.09	.30**	.25**	-.01	.08	.15*	.07	-.05	-.01	-.11	-.06	-			
17.GC IS	.10	.23**	.11	.16**	.11	.19**	.32**	.04	.20**	.13*	.06	.04	.00	-.13*	.02	.51**	-		
18.GC DC	-.04	-.02	.26**	.00	-.13*	.01	-.01	.31**	.00	-.06	-.04	-.10	-.06	-.12	-.07	.12	.07	-	
19.GC PS	.08	.19**	.10	.14*	.03	.16*	.20**	.13*	.20**	.10	.04	.06	-.04	-.12	-.07	.11	.34**	.12*	-
20.GC SA	.08	.16**	-.13*	.09	.39**	.17**	.16**	-.20**	.17**	.33**	.09	.13*	.08	-.02	-.09	.18**	.20**	-.13*	.16**

Note: GP= Grandparent, F=Father, M=Mother, GC=Grandchildren, ES=Emotional Support, IS= Instrumental Support, DC= Demand and Criticism, PS= Provided Support, SA= Successful Aging
* $p < .05$, ** $p < .01$

Findings indicated small to moderate bivariate correlations among study variables but in expected directions. In grandparents, instrumental support ($r = .20$, $p = .001$) and provided support ($r = .28$, $p = .000$) are positively related with successful aging. In fathers, emotional support ($r = .16$, $p = .009$), instrumental support ($r = .14$, $p = .019$), and provided support ($r = .32$, $p = .000$) are positively associated with successful aging; whereas demand and criticism ($r = -.16$, $p = .009$) was negatively associated with successful aging. Similarly in mothers, emotional support ($r = .15$, $p = .015$), instrumental support ($r = .17$, $p = .006$), and provided support ($r = .16$, $p = .008$) are positively associated with successful aging; whereas demand and criticism ($r = -.22$, $p = .000$) was negatively associated with successful aging. Moreover, in grandchildren, emotional support ($r = .18$, $p = .003$), instrumental support ($r = .20$, $p = .001$), and provided support ($r = .16$, $p = .008$) are positively associated with successful aging, whereas demand and criticism ($r = -.13$, $p = .028$) was negatively associated with successful aging. Analysis of variance (ANOVA) was performed to investigate the mean differences in study variables between grandparents, fathers, and mothers as shown in Table 3.

Table 3: Means, Standard Deviation, and ANOVA for study variables across grandparents, fathers, mothers, and grandchildren (N=1080)

Var	Grandparents (N=270)		Fathers (N=270)		Mothers (N=270)		Grandchildren (N=270)		<i>F</i> (3,1076)	η^2	Post-hoc
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>			
ES	2.60	.51	2.67	.48	2.52	.52	2.52	.54	5.21***	.014	F>M, GC
IS	2.44	.53	2.42	.52	2.37	.52	2.33	.56	2.38	.007	-
D/C	1.12	.77	1.44	.67	1.52	.71	1.56	.73	20.63***	.054	F, M> GP
PoS	12.15	2.75	12.85	2.31	12.28	2.62	11.31	3.01	15.09***	.040	F> GP, GC M>GC
SA	69.03	11.67	74.77	8.54	72.58	8.78	71.55	10.11	15.71***	.042	F>GC, GP GC>GP M>GP
HLS	17.33	3.33	18.47	2.09	18.24	2.39	17.83	3.00	8.96***	.024	F, M>GP F>GC
AC	21.69	4.11	23.04	3.46	22.73	3.63	22.52	4.02	6.23***	.017	F, M>GP
EwL	26.84	5.60	29.82	4.05	28.63	4.52	28.44	4.70	17.89***	.047	F>M, GC

Note: ES= Emotional Support, IS= Instrumental Support, D/C= Demand & Criticism, PoS= Provided Support, SA= Successful Aging, HLS= Healthy Life Styles, AC= Adaptive Coping, EwL=Engagement with Life

* $p < .05$, ** $p < .01$, *** $p < .000$

Findings indicate that significant generational differences were observed on emotional support ($F=5.21, p<.000$), demand and criticism ($F=20.63, p<.000$), provided support ($F=15.09, p<.000$), successful aging ($F=15.71, p<.000$), and its subscales (healthy life style ($F=8.96, p<.000$), active coping ($F=6.23, p<.000$), engagement with life ($F=17.89, p<.000$)). Post-hoc comparison indicates that fathers ($M=2.67, SD=.48$) receive greater emotional support than mothers ($M=2.52, SD=.52$) and their children ($M=2.52, SD=.54$). Grandchildren ($M=1.56, SD=.73$) receive greater demand and criticism as compared to mothers ($M=1.52, SD=.71$), fathers ($M=1.44, SD=.67$), and grandparents ($M=1.12, SD=.77$). Moreover, fathers ($M=12.85, SD=2.31$) reported greater provided support as compared to grandparents ($M=12.15, SD=2.75$) and grandchildren ($M=11.31, SD=3.01$). Whereas, mothers ($M=12.28, SD=2.62$) reported greater provided support than their children ($M=11.31, SD=3.01$). Furthermore, fathers ($M=74.77, SD=8.54$) reported higher successful aging as compared to grandparents ($M=69.03, SD=11.67$) and their children ($M=71.55, SD=10.11$); whereas mothers ($M=72.58, SD=8.78$) reported higher successful aging than grandparents ($M=69.03, SD=11.67$).

A multigroup structural equation model was used to find out the similarities and differences between three generations (grandparents, parents, & grandchildren) comprised of four groups (grandparents, fathers, mothers, & grandchildren). The multigroup technique helps in identifying the population heterogeneity along with structural invariance via invariance of covariance (Deng & Yuan, 2015).

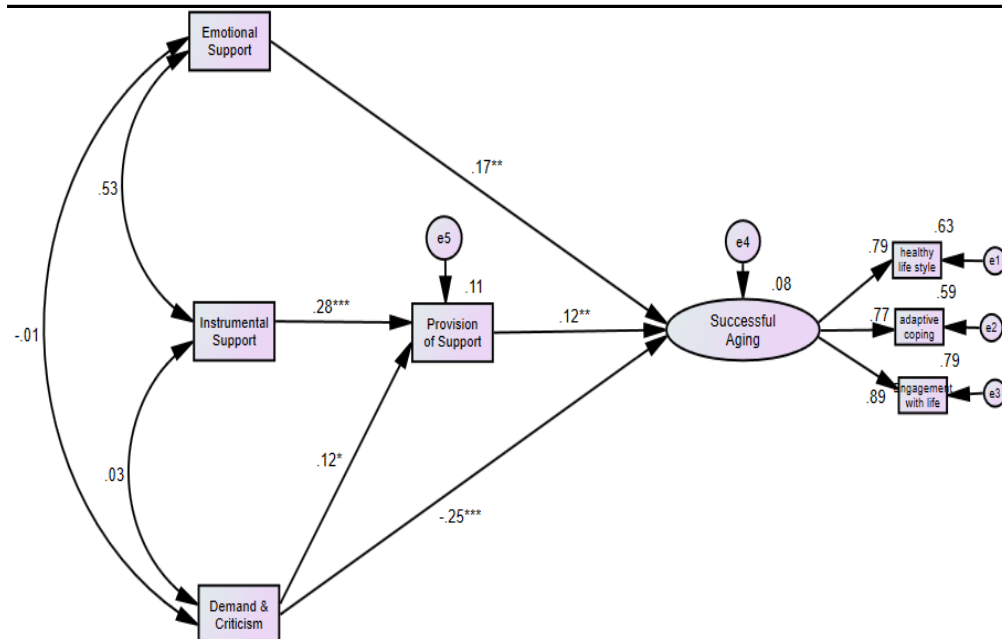


Fig 1: Latent variables model predicting successful aging by social support

The hypothesized model (M1) for the whole sample to find out the effect of emotional support, instrumental support, demand and criticism, and provided support on successful aging separately for all the three generations. Latent variable model was generated in which successful aging was estimated as latent construct using its all three dimensions including healthy lifestyle, active coping, and engagement with life as shown in figure 1.

The results for the model for fit i-e CFI, IFI, and NFI <.95, and RMSEA <.05 except χ^2/df that was greater than 3. Although the $\chi^2/df < 5$ is acceptable and is highly dependent on sample size (Schumacker & Lomax, 2004) and in the current study the sample for hypothesized measurement model was 1080.

Table 4: Model fit indices of the relationship between social support and successful aging across generations

	χ^2 (df)	$\Delta\chi^2$ (Δdf)	CMIN /df	NFI	CFI	IFI	RMS EA
M1 Overall- Hypothesized	20.54(8)	-	3.56	.986	.990	.990	.049
M2 Overall respecified	32.93(10)	12.39 (2)	3.29	.984	.989	.989	.046

M3 Multi-group Hypothesized	56.35(32)	-	1.76	.947	.988	.989	.027
M4 Multi-group respecified unconstraint	70.77(40)	14.42 (8)	1.77	.967	.985	.985	.027
M4a (Grandparents)	29.52(10)		2.95	.956	.970	.970	.085
M4b (Fathers)	11.74(10)		1.17	.976	.996	.996	.025
M4c (Mothers)	21.40(10)		2.14	.952	.973	.974	.065
M4d (Grandchildren)	8.13(10)		0.82	.985	1	1	.000
M5 with restricted regression weights	127.00(61)		2.08	.941	.968	.969	.032
M6 with restricted regression weights and covariances	153.61(70)		2.194	.929	.960	.960	.033
M7 with restricted regression weights, covariances, and measurement error variance	266.54(94)		2.835	.876	.926	.916	.041

The hypothesized model (M1) was re-specified based on the literature and estimates. The final measurement model (M2) along with the multigroup unconstrained model (M4) and constrained models (M5) used for multi-group analysis are reported in Table 4 along with the model fit.

The chi-square difference test was used to assess the statistical significance of differences in the modeled relationships between constructs across four groups. Initially, the unconstrained model (M4, where paths were allowed to vary freely across four groups) was tested which resulted in $\chi^2 = 70.768$, $df = 40$. After that, this M4 was constrained (M5) and tested which resulted in $\chi^2 = 127.004$, $df = 61$. The chi-square difference test was performed for the unconstrained model (M4) and constrained model (M5) and difference test was found to be significant ($\Delta\chi^2 = 56.23$, $\Delta df = 21$, $p = .000$). This implies that model is not invariant at group level, that there is moderation and the four groups differ in terms of modeled relationships.

Table 5 presents the standardized results for the unconstrained model of overall as well as four groups. The estimates show the standardized direct and indirect effect of emotional support, instrumental support, demand and criticism on successful aging by provided support as a mediator for overall sample, grandparents, fathers, mothers, and grandchildren. Findings indicate that instrumental support has direct effect on provided support for grandparents ($\beta = .38$, $p = .012$), fathers ($\beta = .26$, $p = .009$), mothers ($\beta = .30$,

$p=.016$), and grandchildren ($\beta=.34, p=.008$); whereas demand/criticism has a positive effect on provided support for mothers only ($\beta=.12, p=.014$). Though the expected sign was negative for demand/criticism and provided support but the positive sign indicate the cultural impact where demand and criticism for females as mother, wife and daughter-in-law ends up greater provided support. Moreover, direct effects of emotional support and demand/criticism on successful aging were observed for mothers ($\beta=.17, p=.021$; $\beta=-.25, p=.007$ respectively) and grandchildren ($\beta=.18, p=.010$; $\beta=-.18, p=.006$ respectively) only. Indirect effects of instrumental support on successful aging were observed for grandparents (indirect $\beta=.11, p=.007$), fathers (indirect $\beta=.08, p=.005$), mothers (indirect $\beta=.06, p=.009$), and grandchildren (indirect $\beta=.06, p=.009$); whereas indirect effects of demand/criticism on successful aging were observed for mothers (indirect $\beta=.02, p=.008$), and grandchildren (indirect $\beta=.02, p=.029$) only.

Table 5: Path analysis predicting successful aging from social support in GP, F, M, & GC.

	<i>Direct Effect</i>		<i>Indirect Effect</i>		<i>Total Effect</i>	
	β	p	B	p	β	p
<i>Overall</i>						
PS \leftarrow IS	.32	.001	0	-	.32	.001
\leftarrow D/C	.05	.072	0	-	.05	.072
SA \leftarrow PS	.24	.001	0	-	.24	.001
\leftarrow ES	.10	.001	0	-	.10	.001
\leftarrow IS	0	-	.08	.001	.08	.001
\leftarrow D/C	-.09	.015	.01	.062	-.08	.047
<i>Grandparents</i>						
PS \leftarrow IS	.38	.012	0	-	.38	.012
\leftarrow D/C	.06	.344	0	-	.06	.344
SA \leftarrow PS	.29	.004	0	-	.29	.004
\leftarrow ES	.11	.967	0	-	.01	.967
\leftarrow IS	.00	-	.11	.007	.11	.007
\leftarrow D/C	-.06	.418	.02	.250	-.04	.602
<i>Fathers</i>						
PS \leftarrow IS	.26	.009	0	-	.26	.009
\leftarrow D/C	-.06	.437	0	-	-.06	.437
SA \leftarrow PS	.30	.015	0	-	.30	.015
\leftarrow ES	.08	.152	0	-	.08	.152
\leftarrow IS	.00	-	.08	.005	.08	.005
\leftarrow D/C	-.11	.09	-.02	.341	-.13	.039
<i>Mothers</i>						
PS \leftarrow IS	.30	.016	0	-	.28	.016

← D/C	.12	.014	0	-	.12	.014
SA ← PS	.20	.016	0	-	.20	.016
← ES	.17	.021	0	-	.17	.021
← IS	.00	-	.06	.009	.06	.009
← D/C	-.25	.007	.02	.008	-.23	.008
<i>Grandchildren</i>						
PS ← IS	.34	.008	0	-	.34	.008
← D/C	.10	.057	0	-	.10	.057
SA ← PS	.19	.003	0	-	.19	.003
← ES	.18	.010	0	-	.18	.010
← IS	.00	-	.06	.002	.06	.002
← D/C	-.18	.006	.02	.029	-.16	.013

ES= Emotional Support, IS= Instrumental Support, D/C= Demand & Criticism, PS= Provided Support, SA= Successful Aging, GP=Grandparents, F=fathers, M=Mothers, GC= Grandchildren

DISCUSSION

To find out differences between different groups, pairwise parameter comparisons in AMOS 22.0 were used (Henrique & Matos, 2015). Therefore, critical ratios for differences were examined to assess the z-scores for six pairwise comparisons (Graca et al., 2015). The path of instrumental support to provided support in grandparents is more pronounced than in fathers ($z=2.158$, $p<.001$); whereas the path from demand/criticism to provided support is less pronounced in fathers when compared with mothers ($z=2.183$, $p<.001$) and grandchildren ($z=1.938$, $p<.05$). The connection from provided support to successful aging is stronger for grandparents than mothers ($z=2.064$, $p<.001$); whereas from emotional support to successful aging is stronger for grandchildren than grandparents ($z=1.671$, $p<.05$); whereas from demand/criticism to successful aging is stronger for fathers than mothers ($z=1.685$, $p<.05$). These differences can also be seen in Table 5.

To find out mediated path differences in four groups 'MyModMed' plugin by Gaskin (2016) was used. Findings indicate that the path from instrumental support to successful aging by provided support is stronger for grandparents than for fathers ($Estimate=.357$, $p=.02$); and mothers ($Estimate=.398$, $p=.01$). Similarly, the path from demand/criticism to successful aging by provided support is stronger for mothers than for fathers ($Estimate=.096$, $p=.037$); and is stronger for grandchildren than fathers ($Estimate=.103$, $p=.04$).

The present study examining association, similarities, differences among study variables and modelled path across grandparents, fathers, mothers, and grandchildren

revealed interesting findings. Preliminary analysis suggests that all the study variables in all the four groups are normally distributed with appropriate alpha reliability coefficients. The findings of bivariate correlation and model comparison show significant positive relationship between perceived emotional support and successful aging, and; whereas positive relationship between perceived instrumental support, provided support, and successful aging for all the groups. The findings also show significant negative relationship between demand/criticism and successful aging for all the groups except grandparents. The present findings are aligned with the past findings of Cho et al., (2015), Gallardo-Peralta, et al. (2020), and Kim and Park (2017) who found the positive associations between social support and successful aging. These findings are also consistent with the social convoy model of social relations, explaining that presence of social networks and support system help in promoting wellbeing and successful aging. The support system either receiving love, care, advice or demands and criticism; all influence the individual wellbeing through behavioral and psychosocial pathways. Even the stress process theory (Pearlin, 1999) suggests that social support serve as a resource for coping which reduces the effect of strains and argument on individuals' wellbeing thus promoting successful aging. Although, the relationship for perceived emotional support, demand/criticism and successful aging was not evident for grandparents, that can be a cultural variation. The reason for the non-significant findings for grandparents might be the reason that in old age, emotional support is often associated with negative affect (Keyes, 2002) and they perceive that they are giving more than they are receiving. So the findings results in partial acceptance of first hypothesis.

The findings of the study reported significant mean differences on all the study variables for grandparents, fathers, mothers, and grandchildren except for instrumental support. The findings are in accordance with the past findings that middle generation has more obligations and responsibilities towards their parents and their children as well (Baek, Song, & Jang, 2018). And both parents provide more support both emotional as well as instrumental to their younger children than the other way round (Hogan, Hao, & Parish, 1990; Suitors et al., 2006). The interesting finding in the current study is also the higher demand/criticism received by fathers, mothers, and grandchildren in comparison to the grandparents. The explanation for this findings is the cultural variation that in societies like Pakistan, grandparents are considered the backbone and blessing for the family and it is considered bad to argue with them. These are the moral values that are taught to the youngsters that they have to remain silent in front of their elders. Furthermore, fathers reported high successful aging in comparison to the grandparents and grandchildren; and grandparents reported less successful aging than mothers and grandchildren. The explanation for these findings is the age factor that middle generation is more actively engaged in life activities, cope actively, and have healthy life style in comparison to elderly and youngsters (Li et al., 2020).

Regarding to group comparison, findings revealed that the effect of instrumental support on provided support is greater for grandparents than fathers. The possible explanation for this difference is the social exchange theory that people maintained their relationship based on social exchange, thus maintain an equitable relationship. Elderly people feels an imbalance in social exchange based on fewer resources than the middle generation; so when they receive some instrumental support from family they try to maintain this imbalance by providing support according to their capacity. Similarly, the effect of demand/criticism on provided support is greater for fathers than mothers and grandchildren. Interestingly, the effect of demand/criticism on provided support is negative for fathers as compared to grandparents, mothers, and grandchildren. The explanation might be the cultural variation, that in Pakistan, fathers are the sole breadwinner and the whole family depends on the fathers; even if the other family members are earning. So, increased demand/criticism has destructive impacts on the wellbeing, thus decreased provided support.

The effect of emotional support on successful aging is greater for grandchildren than grandparents; as adolescents is the time where grandchildren need emotional understanding and support that results in their better adjustment and wellbeing. Whereas, grandparents want to maintain active relationships with other family members and involved in physical activities while helping family members; this provided support helps them feel good about themselves and thus aging successfully. As the findings indicate that the effect of provided support on successful aging is stronger for grandparents than mothers. In Pakistan, grandparents are more concerned about staying independent and not relying on family members as compared to middle generation. So when grandparents provide support to their family members it provides them with greater actualization and gratification. Moreover, the effect of demand/criticism on successful aging is greater for fathers than mothers. The possible justification for this findings is that though middle generation has more responsibilities than the first and third one but with-in middle generation there are greater expectations from the male members. Fathers have to provide instrumental and emotional support to parents, children and their counterpart along with earning. So a little criticism might have a profound negative impact on their successful aging.

Findings show a strong positive relationship between received emotional support, received instrumental support, perceived demand and criticism, and provided support and successful aging of grandparents, fathers, mothers, and grandchildren. Results also indicate significant mean differences in study variables except instrumental support for grandparents, fathers, mothers, and grandchildren. Multi-group analysis revealed pairwise comparison for the modeled path. Findings show fathers receive greater emotional support and have better successful aging; both fathers and mothers reported greater provided support; whereas grandchildren reported receiving greater demand

and criticism in comparison to other groups.

RECOMMENDATIONS

Firstly, the study is cross-sectional in nature whereas a longitudinal study is required to get a comprehensive view of support on successful aging. Secondly, the study has focused on perceived emotional and instrumental support, and demand/criticism received from family, whereas the future studies can focus on both actual and perceived support.

This study will help family therapists in understanding the similarities and differences in support and successful aging of different generations; and planning interventions that focus on family involvement. Moreover, the current study will add investigated links to the literature helping future researchers to explore more about these relationship from different perspective.

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