

How Does Social Participation Influence Older Adults' Well-being? The Mediating Role of Depression

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ABSTRACT

The present study explores the mediating role of depression in the relationship between social participation and well-being. A sample of Chinese older adults ($N=266$) at an older adults' care center completed the Social Participation Questionnaire, the Center for Epidemiologic Studies-Depression Scale, and the Psychological Well-being Scale. Results showed that social participation was positively associated with well-being and depression. Depression was also positively correlated with well-being. Hierarchical multiple regression analyses revealed that depression partially mediated the relationship between social participation and well-being. These findings contribute to our understanding of the relationship between social participation and well-being in elderly people by emphasizing depression as a critical mediating mechanism.

KEYWORDS

Social participation; Well-being; Depression; Older adults

1 Introduction

With the increasing aging of the population in China, the well-being of older adults is getting more and more attention and well-being is also regarded as an important index of measuring older adults' life experience and spirit evaluation. Social participation, as one of the essential elements of an individual's social function, can provide role support to maintain the self-concept and facilitate individuals' well-being^[1]. Social participation refers to individuals' engagement in activities that allow them to interact with people in society or the community^[2] and its relationship with well-being have been integrated into research in terms of ageing and disability^[3]. In terms of mental health, social participation is beneficial to older adults' subjective well-being^[4]. Despite the fact that prior research consistently demonstrates a positive correlation between social participation and well-being of the elderly, the underlying mechanism remains unclear. Previous study found that social participation does not always improve well-being^[5]. The correlation between social participation and well-being will possibly be influenced by individuals' emotion state and depression is one of the most possible factor. Among a variety of ways in which depression can be eliminated, social participation is one of the most efficient. Studies have demonstrated that social participation can prevent mental health problems like depression among the elderly^[6]. Moreover, subjective well-being is thought to be a sign of mental health and depression is found to have a detrimental effect on older adults' well-being^[7]. Apart from the mechanisms of the relationship between social participation and well-being are unclear, no evidence can be found regarding the correlation between well-being and depression of the elderly in Mainland China. For the purpose of filling in this research gap, a conceptual framework will be established to illustrate the relationship among social participation, depression, and well-being, and examine the mediating role of depression between Chinese older adults' social participation and well-being.

2 Literature Review

2.1 Social Participation and Elderly's Well-being

Generally speaking, social participation refers to people's participation in activities that provide contacts with others in the community or society^[2]. Such a concept has been discussed since the 1960s and it involves a range of activities such as personal (e. g. neighborhood connections) or communal (e. g. voluntary work, religious) activities^[2]. Some empirical studies have been done to investigate the correlation between social participation and well-being. For instance, social participation is an essential correlate of well-being. Older adults' well-being was found to be enhanced when they participate in family, friends, church, and educational activities frequently^[8]. In addition, productive activity, as a crucial kind of social participation, is advantageous to older adults' well-being. A higher level of well-being is predicted by more productive activities and time engagement^[9-10]. examined the impact of voluntary work on the elderly's well-being and discovered that the elderly who volunteer more frequently have greater level of well-being. These findings provided practical support to the further researches of the association between older adults' social participation and well-being.

2.2 Elderly's Depression and its Relation with Social Participation and Well-being

During the process of aging, older adults are plagued by mental health problems. Mental health problems in older adults are common, with depression accounting for 20.5%^[11]. Previous study showed that social participation significantly related to mental health^[12] and the role of social participation in preventing and reducing depression of the elderly has been further demonstrated. For example^[7], investigated the effect of older adults' participation in social activities on their health in Taiwan and found that active participation in communal, religious or political activities could effectively reduce the risk of developing depressive symptoms^[11]. evaluated the impact of social activity on lowering psychological distress in senior Japanese adults aged 55-64 years and discovered that volunteering was highly linked with reduced depressive symptoms for both genders. Additionally, it is evident that depression raises the chance of mortality risk and has a detrimental effect on older adults' psychological functioning^[7]. Individuals' life purpose, positive affect and life satisfaction can be captured by their well-being, which is a characteristic of positive psychological functioning^[12]. Therefore, it is reasonable to claim that depression is highly possible to poses a severe impact on well-being. Some investigations have showed the correlation between depression and well-being. For instance, with a sample of 2200 elderly aged 55-85 years from Netherland,^[7] examined the impact of depression on the well-being and illustrated that depression negatively affects the well-being of the elderly^[13]. also tested the association between depression and well-being by investigating 3202 incoming medical interns from the USA, founding that depression and subjective well-being are negatively correlated. Therefore, depression could possibly be a mediator between older adults' social participation and well-being.

2.3 Activity Theory

Activity theory, which Cavan proposed, was one of the most popular theory related to aging. "Activity theory is a conceptual framework based on the premise that activity is primary, that doing precedes thinking, and that people develop their objectives, ideas, cognitive models, purposes, and abstract perceptions like "definition" and "determinant" through their actions"^[14]. Contrary to disengagement theory, activity theory was one of the most significant theoretical foundations of active aging. The activity theory of aging proposes that an individuals' life satisfaction is closely associated with their level of social interaction or activity^[15]. According to activity theory, older adults are supposed to maintain active contact with their surrounding^[16] and it also claims that engagement in social role is crucial for achieving positive aging^[17]. That is, those who stay active and retain social connections as they age are more likely to be content with their life and keep positive attitude, which promotes their good health. Thus, as Activity Theory, the positive correlation between older adults' social participation and well-being is theoretically firmed.

2.4 Research Gap

The correlation between social participation and well-being is complex. Some factors like life meaning, family care, the sense of community are found to have a mediating effect on the correlation between older adults' social participation and well-being^[18-19]. These factors are clearly concerning individuals' ecology, such as environments and intergenerational support. Apart from those ecology-relevant factors, individual factors also take a great place in such a relationship above. In addition, few researches have been done to investigate the correlation between social participation and well-being through individual factors. According to previous investigations, individuals' emotions could possibly influence the correlation between social participation and well-being. Emotion processing has been deemed as an essential part in social contacts with people^[20] and individual's social interaction and participation can be negatively affected by emotional processing problems such as impaired moods, emotion regulation, and emotion perception^[21-22]. revealed that emotion is correlated with well-being. Individuals who showed higher level of negative emotion exhibited lower level of well-being. Therefore, as a kind of negative emotion, depression could be a possible factor of influencing the correlation between social participation and well-being.

2.5 The Current Study

The current study explores the associations among social participation, depression, and well-being among older adults. Particularly, this study aims to test whether depression mediates the relationship between older adults' social participation and well-being. Accordingly, the following research questions are proposed: (1) What is the relationship between social participation and well-being among older adults? (2) Does depression mediate the relationship between social participation and well-being? It is hypothesized that: (1)Social participation is positively correlated with older adults' well-being; and (2)Depression mediates the association between social participation and well-being among older adults.

3 Methods

3.1 Participants

A total of 266 older adults (n = 90 males, n = 176 females) participated in this study. Participants were recruited from an older adults' care center in Mainland China. Every participant provided informed consent and completed the survey anonymously.

3.2 Measures

3.2.1 Social Participation

Social participation could be measured by the following items on the basis of the social participation conception proposed by [2]: social bonds, informal social activities, volunteering, endeavor to promote social interaction, and social participation via Internet. In this study, social participation was measured by individual-level responses. Participants were questioned about how frequently they engaged in activities like volunteer work; contacts with neighbors/friends/family; organized sports; club and religious activities; chat with friends via social media, visiting a forum; and if they were seeking for information about social activities. Participation frequency was assessed as: never (score1), once a year (score2), 2-3 times a year (score3), once a month (score4), 2-3 times a month (score5), once a week (score 6), 2-3 times a week (score 7). The intensity of respondents' overall social participation was measured using a total participation score.

3.2.2 Depression

Depression in older adults will be evaluated using the Center for Epidemiologic Studies-Depression Scale [23]. There are 20 items on the scale. Respondents could reply "no", "sometimes" or "often", and the corresponding scores were 1, 2, and 3, respectively. A total score was to measure the degree of older adults' depression, with higher scores representing greater depression.

3.2.3 Well-being

The psychological well-being scale, which Ryff proposed, was used to assess older adults' well-being [24]. This scale consists of six dimensions and 84 items to be assessed on a scale of 1 to 6, from 1 representing strong disagreement to 6 representing strong agreement. The degree of psychological well-being among the elderly was measured using a total score across six dimensions. High state of psychological well-being was represented by a high score.

3.3 Data Analysis

The 29th version of the Statistical Package for the Social Sciences (SPSS) was used to initially calculate the mean, standard deviations, and correlations between social participation, depression, and well-being. PROCESS macro version 3.4.1 (Model 4) was used to conduct the mediation analysis.

4 Results

4.1 Descriptive Statistics and Correlations Analyses

Table 1 shows the descriptive statistics and correlational coefficients for the variables. Correlation analysis indicates a significant association among social participation, depression, and well-being. Social participation was positively correlated with depression ($r = .30, p < 0.01$) and well-being ($r = .29, p < 0.01$). Depression also showed a positive relationship with well-being ($r = .41, p < 0.01$).

Table 1 Descriptive statistics and Pearson Correlations Analyses

| | <i>M</i> | <i>SD</i> | 1 | 2 | 3 |
|-------------------------|----------|-----------|---|--------|--------|
| 1. Social participation | .04 | .71 | - | .302** | .292** |
| 2. Depression | .03 | .49 | | - | .409** |
| 3. Well-being | .19 | 3.07 | | | - |

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

4.2 Mediation Analysis

According to Figure 1 and Table 2, the bootstrapping analysis, controlling for age and gender, found that social

participation had a significant direct effect on well-being ($\beta = .29, p < .001$). A substantial direct effect was also observed when social participation was used as a predictor of depression ($\beta = .30, p < .001$). A Sobel test was used to examine the mediating role of depression in the relationship between social participation and well-being, and the results were statistically significant ($z=3.93, p < .001$). The findings suggest that depression partially mediated the relationships between social participation and well-being.

Table 2 Hierarchical multiple regression analysis on the mediating effect of depression

| Outcome variable | Predictor variable | β | SE | B | P | R ² |
|------------------|----------------------|---------|-----|------|------------|----------------|
| Well-being | Social participation | .29 | .25 | 1.25 | $p < .001$ | .09 |
| Depression | Social participation | .30 | .04 | .21 | $p < .001$ | .09 |
| Well-being | Social participation | .19 | .25 | .79 | $p < .05$ | |
| Well-being | Depression | .35 | .36 | 2.17 | $p < .001$ | .20 |

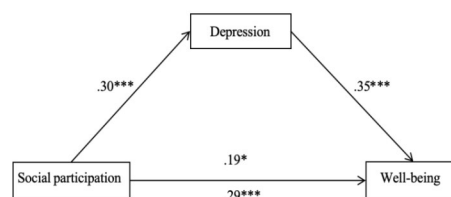


Figure 1 Mediation model of depression in the relationship between social participation and well-being

* $p < .05$, *** $p < .001$

5 Discussion

The study's results supported the hypothesis that social participation relates to well-being through a partial mediating effect of depression. As predicted, the relationship between social participation and well-being was statistically significant, which is consistent with findings from past empirical studies^[8-10] and activity theory^[15]. In contrast to the previous studies^{[7][11]} that suggested negative associations between social participation and depression, this study found that social participation was positively associated with depression. A plausible rationale concerns variations in the level and quality of social participation. Increased exposure to interpersonal expectations, social comparison, or conflict may result from higher levels of social activity, which may exacerbate depressive symptoms and emotional tiredness in older adults. Interestingly, this study also found a positive correlation between depression and well-being, which is different from findings from the previous studies^[7,13]. One explanation could be that although depression represents transient emotional states, well-being reflects a generally steady assessment of life. There may be a positive association between the two variables since older persons may have depression symptoms occasionally while yet feeling satisfied and psychologically healthy overall.

6 Limitations

Future Directions, and Implications It should be noted that it has several limitations despite its theoretical and practical contributions. First, the study's cross-sectional design limits the ability to draw causal conclusions about the relationships among depression, well-being, and social activity. To elucidate the temporal ordering of these variables, future studies may use experimental or longitudinal approaches. Second, even though the sample size was sufficient, the results may not be as broadly applicable because the participants were selected from a single Chinese care facility for older adults. Determining the conclusions' wider application would require replication in various geographical and cultural contexts. Finally, although depression was investigated as a mediating mechanism, other possible environmental and psychological factors, like physical health, were overlooked and need more research. The study's conclusions have both theoretical and practical ramifications. The results theoretically expand on previous research on older adults' well-being. Moreover, the results also imply that programs designed to encourage older adults to engage in social activities should also consider their mental health.

7 Conclusion

In conclusion, this study shows that social participation among elderly people is favorably correlated with depression

and well-being. A more nuanced relationship between psychological distress and subjective well-being in later life may be implied by the finding that depression was positively correlated with well-being. Furthermore, the results also show that depression partially mediated the association between social participation and well-being. These findings have practical implications for programs that support social participation while addressing mental health needs.

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