The Effects of Positive and Negative Social Exchanges on Aging Adults

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This study tested various models of the effects of positive and negative exchanges on positive and negative affect using structural equation modeling. Based on a probability sample of middle-aged and older adults, the relationships between social exchanges and psychological well-being were examined both within the total sample and within subgroups of individuals who had experienced few vs. many life events. Within the general population, the Domain Specific Model resulted in the best fit. That is, positive exchanges were associated with positive affect, and negative exchanges were associated with negative affect. However, among the subgroup that had experienced more life events, there was a significantly stronger relationship between negative exchanges and negative affect. These findings suggest that, to understand the effects of social exchanges, it is important to consider the context of life events.

Personal relationships inevitably involve a combination of positive as well as negative interactions. While social support research initially emphasized the beneficial aspects of personal relationships, more attention recently has been given to the problematic aspects of such relationships (Rook, 1994; Schuster, Kessler, and Aseltine, 1990). Research on social support is presently examining the differences between positive exchanges (e.g., confiding, respecting, aiding) and negative exchanges (e.g., criticizing, demanding, misunderstanding). In a review of these parallel aspects of social interactions, Rook (1990, p.130) suggests that further research is needed to determine whether “positive and negative exchanges influence the same or different dimensions of well-being.” This study reviews existing literature on the relationship between the dual dimensions of social exchanges and well-being, tests different models of these relationships in a probability sample of middle-aged and older adults, and further examines these relationships within the context of life events.

Our investigation represents the confluence of three streams of research. One stream of research has distinguished between positive and negative dimensions of social exchanges and determined that they are independent, representing two separate domains of social experience (Pagel, Erdly, and Becker, 1987; Rook, 1984). Within this body of research, there is some indication that the negative dimension of personal relationships is more psychologically potent than the positive dimension (Rook, 1990). However, positive relationships have also been identified as stronger than negative relationships (Umberson, 1984). Here, we review the literature on the differential effects of positive and negative aspects of social relationships and identify four distinct models of social exchanges on well-being.

The second stream has distinguished between positive and negative dimensions of well-being (Bradburn, 1969; Diener and Emmons, 1985; Moriwaki, 1974; Warr, Barter, and Brownbridge, 1983). Such studies indicate that the positive and negative dimensions of subjective well-being are also independent. Furthermore, separate factors appear to influence the two dimensions of well-being. In an early exploration of these factors, Orden and Bradburn (1968) differentiated between negative and positive aspects of marital relationships and found that the contrasting aspects of marital relationships were associated only with their corresponding dimension of well-being. More recent evidence indicates that personal characteristics such as extraversion, neuroticism, and intelligence are related to either one dimension of well-being or the other (Costa and McCrae, 1980; Diener and Emmons, 1985; Warr, Barter, and Brownbridge, 1983). Lawton and his associates (Lawton, 1983; Lawton, Kleban, and di Carlo, 1984; Lawton and Moss, 1987) have suggested that predictors of negative affect are characterized by factors that diminish feelings about the self, while predictors of positive affect revolve around factors outside of the self, such as friends, activities, and the environment. Our study builds on this area of inquiry by including social exchanges as a predictor of positive and negative well-being and tests different models of the relationships between social exchanges and well-being.

The third stream has considered the influence of life events, such as illness or bereavement, on psychological well-being. With age, people may become increasingly sensitive to stressful life events (Krause, 1994). Among life event researchers, there is growing interest in determining the predictors of coping with and recovering from life crises (Kessler, Price, and Wortman, 1985). In particular, the ability of social exchanges to increase or decrease the stress associated with life crises has become an important area of inquiry (Antonucci and Akiyama, 1991; House, 1981). There is evidence, on the one hand, that positive exchanges provide a buffer between stressful events and emotional distress (House, 1981; Kessler and McLeod, 1985). On the other hand, there is also evidence that negative exchanges can exacerbate the deleterious effects of life crises.
POSITIVE AND NEGATIVE SOCIAL EXCHANGES

(Dunkel-Schetter and Wortman, 1982; Stephens et al., 1987). Significant others may, for example, be critical or disapproving of the way in which an individual is coping with a life event (Krause and Jay, 1991). Such negative exchanges may be particularly problematic for aging individuals, as many of their stressors are chronic ones (Rook, 1994). Our study pursues this area of inquiry by examining the effects of positive and negative exchanges among middle-aged and older individuals who have experienced few vs many life events. In so doing, we address the important notion that, with age, people are more influenced by social exchanges and that life events amplify the effects of social exchanges.

Previous Research on the Effects of Social Exchanges

To date, a small body of literature has begun to examine the differential effects of positive and negative exchanges. Most existing research has considered such exchanges within the context of numerous different life events. Some of these studies have focused only on a single outcome, while others have included both positive and negative outcomes.

Our examination of the existing literature resulted in a new framework for characterizing the effects of social exchanges on well-being. We identified four distinct models which we refer to as the Positivity Effect Model, the Negativity Effect Model, the Domain Specific Effect Model, and the Combined Positivity and Negativity Effects Model. These four hypothesized models are diagrammatically portrayed in Figure 1 and further described below.

**Positivity Effect Model.** — The first model provides one of the simplest descriptions of the relationship between exchanges and well-being. Consistent with the early literature in the area of social support, this model hypothesizes that positive exchanges have a more powerful impact on well-being than do negative exchanges. Actually, there is only limited support in the research literature for such an effect. One study that provides evidence for the Positivity Model was conducted by Umberson (1989). Her study, based on a national sample of parents (ages 18 and over), explored the relationship between parents and their children. Umberson concluded that positive measures of relationship quality were stronger predictors of both positive and negative outcomes than were relationship demands.

**Negativity Effect Model.** — The second model describes an equally simple relationship between social exchanges and well-being. However, in this model, the hypothesized relationship is primarily between negative exchanges and well-being. Rook (1990) characterized the potent effects of negative social ties as the “negativity effect” and, indeed, there is considerable research supporting this model.

Several studies, using only negative outcome measures such as depression and psychological symptoms, have found that negative exchanges have a stronger relationship to well-being than do positive exchanges. In two separate studies of spouses caring for persons with Alzheimer’s disease, researchers found that perceived upset with network was associated with increased depression, but that perceived helpfulness of network was unrelated to depression. In a similar study, Kiecolt-Glaser, Dyer, and Shuttlesworth (1988) found that for family caregivers of those with Alzheimer’s disease, upsetting relationships contributed to depression; but helpful relationships were unrelated to depression.

Other studies have also relied exclusively on negative outcomes but have examined different kinds of stressors. For example, a study of rape victims (ages 18–81) conducted by Davis, Brickman, and Baker (1991) determined that unsupportive behavior by a significant other was associated with psychological symptoms, but that supportive behavior was not related to psychological symptoms. A longitudinal study of older people (Finch and Zautra, 1992) found that negative social ties had a stronger association with depression than did positive social ties. Negative social ties were related both to concurrent depression as well as depression measured one month later, whereas the relationship between positive social ties and depression was minimal.

Additional research that includes both positive and negative outcome measures has also found evidence of negativity effects. For instance, in a study of elderly widowed women, Rook (1984) found that, while both supportive and problematic relationships were associated with well-being,
negative ties were related to diminished well-being more consistently than positive ties were related to enhanced well-being. With respect to the negative outcome of loneliness, however, both problematic ties and supportive ties were potent predictors. That is, problematic ties were associated with increased loneliness, whereas positive ties were related to decreased loneliness.

A slightly different pattern of findings that also supports the negativity effect emerged from a study of older adults conducted by Finch et al. (1989). These researchers found that the older adults' negative social ties were associated with psychological well-being and psychological distress, while positive social ties were associated only with psychological well-being. An identical pattern was evidenced in the work of Abbey, Abramis, and Caplan (1985) when they asked college students about support received from "some one person."

**Domain Specific Effect Model.** — A third model, which is also a simple one, hypothesizes that positive and negative exchanges are equally potent within their respective domains of influence. That is, positive exchanges influence positive outcomes and negative exchanges influence negative outcomes. This model has been substantiated by a few studies.

Manne and Zautra's (1989) research on women with rheumatoid arthritis (ages 25–76) found evidence for a domain specific effect. They discovered that women who perceived their husbands as supportive engaged in adaptive coping strategies (i.e., information seeking and cognitive restructuring). However, those with husbands who made critical remarks tended to engage in maladaptive coping strategies (i.e., wishful thinking).

A study by Ruehlman and Wolchik (1988) resulted in a similar pattern of findings. They asked undergraduate students about their personal projects (e.g., losing weight) and about individuals who supported or hindered efforts to complete their projects. The support of the student’s most important person was a significant predictor of well-being, whereas the hindrance of the student’s most important person was a significant predictor of distress.

As mentioned previously, the early work of Orden and Bradburn (1968) examined the association between marital relationships and well-being. They demonstrated a clear relationship between marital tensions and negative affect on the one hand and marital satisfaction and positive affect on the other hand.

A more recent study of college students by Lakey, Tardiff, and Drew (1994) revealed that negative and positive exchanges were distinct and independent. Further, each construct loaded on different factors. Negative exchanges loaded with negative affect and positive exchanges loaded with positive affect.

**Combined Positivity and Negativity Effects Model.** — Our fourth model is more complex and includes all of the possible relationships between social exchanges and well-being that are depicted in the simpler models described above. This model portrays negative and positive social exchanges that are similarly potent with respect to both positive and negative well-being. The Combined Model is supported by several studies.

Four studies that used a negative outcome measure provide only partial support for this model, because full support requires both positive and negative outcome measures. A study by Barrera (1981) of pregnant adolescents examined positive and negative aspects of their network in relation to several measures of maladjustment. He discovered that satisfaction with their network was related to decreased feelings of depression and anxiety, while conflict within their network was associated with an increase in such negative outcomes. A second study, conducted by Golding and Burnam (1990), focused on predictors of depression among Mexican Americans (age 18 and over). They found that both social support and social conflict contributed to depression. Specifically, social support from spouse and from work decreased depression while social conflict with friends increased depression. Based on a probability sample of married couples aged 18–65, a third study, by Schuster, Kessler, and Aseltine (1990), reported that negative interactions were related to higher levels of depression whereas supportive interactions were associated with less depression. In a fourth study, Lepore (1992) determined that, on the one hand, conflictual relationships among college students were related to greater psychological distress seven weeks later. On the other hand, more perceived support was associated with less psychological distress seven weeks later.

In another study, that used only a negative outcome measure, a somewhat different pattern emerged in which both positive and negative exchanges predicted to psychological distress but in different ways. Okun, Melichar, and Hill’s (1990) research on older adults concluded that negative social ties contributed directly to increased psychological distress. Positive social ties also contributed to psychological distress, but via an interaction with negative daily events. That is, increased positive social ties diminished the effect of negative daily events on psychological distress.

Three additional studies provide stronger evidence for the positivity and negativity effect because they used both positive and negative outcome measures. In a study of undergraduates, when Abbey, Abramis, and Caplan (1985) asked students about conflict and support with respect to “people in your personal life,” both social conflict and support were related to positive and negative outcomes, but in opposite directions. In a second study, geriatric patients who had experienced a stroke indicated that positive and negative exchanges were both important, but each accounted for different kinds of recovery outcomes (Stephens et al., 1987). That is, negative exchanges were related to morale and psychiatric symptoms while positive exchanges were not. Further, positive exchanges were associated with the cognitive functioning of geriatric patients while negative exchanges were not. Lastly, in a study of medical students, Brenner, Norvell, and Limacher (1989) examined the relative effect of supportive and problematic ties on well-being and physical symptoms. They found that neither supportive nor problematic ties were related to symptoms, but that supportive ties were positively associated with life satisfaction while problematic ties were inversely related to life satisfaction.
While each of these hypothesized models appears plausible, it is difficult to evaluate their relative merits based on studies conducted thus far due to several methodological limitations. First, some studies (Golding and Burnam, 1990; Okun, Melichar, and Hill, 1990; Pagel, Erdly, and Becker, 1987) measure only a single dimension of well-being. Second, several studies (Davis, Brickman, and Baker, 1991; Manne and Zautra, 1989; Pagel, Erdly, and Becker, 1987) are limited by restricting their sample to a particular life event. Third, many of these studies (Finch et al., 1989; Okun, Melichar, and Hill, 1990; Ruhlenman and Wolchik, 1988) are based on nonrepresentative samples. In sum, studies that examine the relative effects of positive and negative social ties rarely use representative samples, include measures of both positive and negative outcomes, or account for more than one life event. The current study corrects these limitations and addresses two critical questions.

First, what are the differential effects of positive and negative aspects of the social network among middle-aged and older adults? By examining the relationship between positive and negative dimensions of social exchanges and positive and negative affect, we test the four models of social exchanges discussed earlier. This study is unique in that it simultaneously compares these four distinct models. Our review of the literature provides substantial support for two of these models, i.e., the Negativity Model and the Combined Model. However, research support for the negativity effect is limited to samples in which individuals have experienced stressful life events. We therefore hypothesize that, in a general population of middle-aged and older adults, the Combined Model will provide the best fit.

Second, what is the relationship between social exchanges and well-being when individuals have experienced stressful life events? Specifically, we are interested in whether the effect of positive and negative exchanges operates differently for individuals who have experienced more rather than fewer life events. Because so many of the previous studies on social support have focused on a single life event, it is unclear to what extent discrepancies in their findings are actually due to the different life events experienced by their samples. Here we focus on the important question of whether positive and negative exchanges are differentially beneficial or detrimental for vulnerable aging adults. Based on our review of the literature that highlights the potency of negative exchanges during stressful circumstances, we hypothesize that the Negativity Model will provide the best fit for middle-aged and older adults who have experienced multiple life events.

Methods

Sample
A national probability sample of 718 men and women aged 50 to 95 resulted from a two-stage procedure. First, a nationally representative sample was screened for eligible respondents aged 50 and over. Second, contact was attempted with all households having eligible respondents to obtain interviews. When there was more than one eligible respondent in a household, one person was randomly selected for the interview. However, to obtain a sufficient number of people in the older categories, all individuals in a household who were 70 and over were interviewed, resulting in an additional 71 people in this age group. For the overall sample, the response rate was 70 percent. (For more details on characteristics of this sample, see Antonucci and Akiyama, 1987.)

The respondents were predominantly White (89%) and not employed (64%). Slightly over half (58%) were female. More than half were married or living with a significant other (59%), while the others were widowed (29%), divorced, or separated (8%), or never married (4%). About half (48%) had family incomes (in 1980 dollars) under $10,000; the others were evenly distributed between those with incomes of $10,000 to $19,000 (26%) and those with incomes $20,000 and over (26%). On average, they were 66 years old and had completed a 10th grade education.

Respondents were interviewed in their own homes by trained interviewers as part of a national survey, Social Networks in Adult Life, conducted by the Survey Research Center at The University of Michigan (Kahn and Antonucci, 1980). The structured interview, that was approximately one hour long, covered a variety of topics including demographic information as well as questions pertaining to social exchanges and psychological well-being.

Measures

Measures relevant to the present study included control variables, positive and negative social exchanges, and psychological well-being (see Table 1).

Control variables. — Consistent with previous research (Rook, Catalano, and Dooley, 1989), several measures (age, education, sex, marital status, employment, income, and life events) were included as control variables. Age and education were continuous variables. Sex was a dichotomous variable (1 = male; 2 = female). Marital status (0 = widowed, divorced, separated, single; 1 = married or living together) and employment (0 = not working; 1 = working) were both dummy variables. Income was categorized into several intervals (from a low of under $5,000 to a high of $50,000 and over) that were recoded to the midpoint of each category. A count of life events experienced within the past five years included: the death of a spouse; the death of another family member or friend; an illness or injury of a family member or friend; a change in residence; having a family member reside in a nursing home; having a child leave home; retiring from work; a job change; being fired, laid off, or quitting work; and being robbed or attacked. For analytic purposes, we dichotomized this count at its median (0–2 = few life events; 3 and over = more life events).

Social exchanges. — Positive and negative exchanges were measured differently. The available measures of positive exchanges focused on respondents' reports about dyadic relationships with individuals within the network, and the measures of negative exchanges were based on reports about network level relationships.

To assess their positive exchanges, respondents were asked to list people who were important to them within three concentric circles. The innermost circle included the
most important network members, and the outer circles included members who were less important. Six items measured positive exchanges: confiding; reassurance; getting respect; receiving care when ill; talking when upset, nervous, or depressed; and talking about health. Each measure was a summation of how many of the up to 20 network members provided the specified kind of support. All of the measures were assessed for normality, and only these positive exchange measures were problematic. Therefore, we reduced skewness and kurtosis by using square roots of the positive exchange variables in the actual analyses.

To assess their negative exchanges, respondents were asked to think about their entire social network and provide summary reports of: (a) how many got on their nerves (1 = none; 3 = most or all); (b) how many did not understand them (1 = none; 4 = all); and (c) how often they were too demanding (1 = never; 4 = often).

Psychological well-being. — Our dependent measure, the Bradburn Affect Balance Scale (Bradburn, 1969), was used to assess both positive and negative aspects of well-being. Respondents answered 10 questions regarding their feelings during the past few weeks. Five of these items measured positive affect (feeling excited, proud, pleased, on top of the world, and things are going your way), and a high score indicated greater positive affect. The remaining five items measured negative affect (feeling restless, lonely, bored, depressed, and upset), with a high score indicating more negative affect.

Analysis Strategy

A comparison of the hypothesized models was conducted using the EQS Version 5 (Bentler, 1995) structural equation modeling program. In operationalizing the models in Figure 1, each of the four theoretical constructs (positive ex-
changes, negative exchanges, positive affect, and negative affect) were treated as latent variables measured by the observed indicators that were described in the previous section. We selected only cases with non-missing data (\( N = 622 \)). In addition, the independent variables (i.e., the positive and negative exchange measures) and the dependent measures (i.e., the Bradburn Affect Balance items) were residualized to statistically control for the seven variables: age, education, sex, marital status, employment, income, and life events.

To address the first research question concerning the best-fitting model for the general population, the respective fit statistics for the four models were compared. The full, complex model (the Combined Model) was compared with each of the more restricted, simple models (the Negativity, Positivity, and Domain Specific Models) that are nested within it by examining the respective chi-square values and degrees of freedom (Bollen, 1989). This strategy allowed us to determine whether the additional effects included in the Combined Model produced an improved fit to the data.

To address the second research question — whether the same model fits equally well when individuals experience multiple life events — we compared models for those who had experienced few or more life events. This was accomplished by counting the number of possible negative life events (0–10) experienced by the respondents and identifying the median split. Those who had 0 to 2 life events were below the median, and those who had 3 or more life events were above the median. We selected the models that best fit the data in response to the first research question and compared these models within the fewer (0–2) and more (3+) life event groups. To determine whether the effects of social exchanges differed according to the number of life events, we examined the effect of separate vs equal estimates of the structural parameters across the fewer and more life events subsamples.

**RESULTS**

**Comparing the Models Within the Total Sample**

The upper panel of Table 2 presents the results of fitting the four basic models using all respondents with non-missing data. Since the chi-square statistics are significant for all the models, none represents a perfect fit. However, since the Comparative Fit Index (CFI) for each model is at or above the recommended value of .90, all four models are plausible.

The lower panel of Table 2 compares the full Combined Model with each of the more restricted models that are nested within it. These results show that the Negativity Model and the Positivity Model are both significantly different from the Combined Model, and that the Combined Model is a better fit. The lack of a significant difference between the Combined Model and the Domain Specific Model implies that these two models fit equally well. Thus, the remainder of the analyses were conducted on these two models.

An examination of the standardized coefficients associated with these two models (displayed in Table 3) shows that, of the two hypothesized relationships in the Domain Specific Model, both are significant. Of the four hypothesized relationships in the Combined Model, three relationships are significant. The two domain specific effects are joined by a smaller effect linking negative exchanges and positive affect.

**Comparing the Models Within the Context of Life Events**

To address the question of whether the same effects persist when individuals have experienced multiple stressful situations, we capitalized on the fact that our national sample included individuals who had experienced different numbers of life events. We first examined how experiencing fewer vs more life events affected the variables in our structural equation models. There were small but significant relationships between the experience of life events and both positive exchanges (\( r = .09; p < .01 \)) and negative exchanges (\( r = .07; p < .05 \)). The correlations between life events and the outcome measures were .12 (\( p < .05 \)) for positive affect and .14 (\( p < .01 \)) for negative affect. For both positive and negative affect, over 85% of the relationship with experiencing fewer vs more life events was accounted for by direct effects. Nearly all of the indirect effects occurred via the two domain specific effects, which linked positive exchanges with positive affect and negative exchanges with negative affect.

We next compared the fit of the Combined Model and the Domain Specific Model in the two halves of the sample with

| Table 2. Total Sample: Fit Statistics and Model Comparisons for Four Basic Models |
|--------------------------------------------------------|--------|--------|--------|--------|
| Model | Goodness of Fit |
|       | Chi-square | df | p-value | CFI |
| Model 1, Positivity | 344.8 | 148 | .001 | .90 |
| Model 2, Negativity | 327.2 | 148 | .001 | .91 |
| Model 3, Domain Specific | 315.8 | 148 | .001 | .92 |
| Model 4, Combined Effects | 310.7 | 146 | .001 | .92 |

| Model Comparisons | Goodness of Fit |
|--------------------|--------|--------|--------|
| Model 1 vs Model 4 | 34.1 | 2 | .001 |
| Model 2 vs Model 4 | 16.5 | 2 | .001 |
| Model 3 vs Model 4 | 5.1 | 2 | .07 |

| Table 3. Parameters in Structural Equations for Best Fitting Models (Standardized Coefficients) |
|--------------------------------------------------------|--------|--------|
| Effects | Domain Specific Model 3 | Combined Effects Model 4 |
| Predictors of Positive Affect | | |
| Positive exchanges | .24** | .23** |
| Negative exchanges | - | .13* |
| Predictors of Negative Affect | | |
| Positive exchanges | - | -.06 |
| Negative exchanges | .37** | .37** |
| Correlations | | |
| Positive and negative exchanges | -.16** | -.14* |
| Positive and negative affect (residuals) | -.33** | -.30** |

*p < .05; ** p < .01.*
fewer (0–2) life events and more (3+) life events by: (a) estimating separate values for the parameters in the two subsamples; and (b) constraining the structural parameters to be equal in the two subsamples. Comparing the separate parameters model with the equal parameters model allows us to determine whether the effects of social exchanges differ for respondents with lower vs higher numbers of life events.

Table 4 displays the results of these analyses. Once we make the distinction between those who have experienced fewer vs more life events, there is even less evidence that the Combined Model offers any improvement over the Domain Specific Model. For both the separate and equal parameter estimates, the additional paths contained in the Combined Model do not increase the fit to the data. Therefore, the additional paths in the Combined Model can be trimmed without affecting the goodness-of-fit statistics.

Table 4. Comparisons of Subgroups with Fewer/More Life Events: Fit Statistics for Best Fitting Models, Separate vs Equal Estimates

<table>
<thead>
<tr>
<th>Model Comparisons</th>
<th>Domain Specific vs Combined Effects</th>
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<tbody>
<tr>
<td></td>
<td>Model 3A vs Model 4A</td>
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<tr>
<td></td>
<td>Model 3B vs Model 4B</td>
</tr>
<tr>
<td>Goodness of Fit</td>
<td>Chi-square  df  p-value  CFI</td>
</tr>
<tr>
<td>Model 3A, Domain Specific, separate estimates</td>
<td>488.6  296  .001  .90</td>
</tr>
<tr>
<td>Model 3B, Domain Specific, equal estimates</td>
<td>501.1  300  .001  .90</td>
</tr>
<tr>
<td>Model 4A, Combined Effects, separate estimates</td>
<td>483.4  292  .001  .91</td>
</tr>
<tr>
<td>Model 4B, Combined Effects, equal estimates</td>
<td>498.0  298  .001  .90</td>
</tr>
</tbody>
</table>

Turning to the comparison between the models with separate vs equal parameter estimates, the results from both the Combined Model and the Domain Specific Model show a significant difference. This difference indicates that estimating separate parameters in the subsamples with fewer vs more life events results in a better fit than constraining the parameter estimates to be equal across both subsamples. That is, the relationships between social exchanges and affect vary depending upon the number of life events.

The corresponding standardized coefficients are displayed in Table 5, and they reveal a clear pattern of findings. First, when comparing both the Domain Specific and the Combined Models, under conditions of few vs more life events, only two sets of relationships are consistently significant: (a) the relationship between positive exchanges and positive affect, and (b) the relationship between negative exchanges and negative affect. These relationships are the two hypothesized effects characterized by the Domain Specific Model. Overall, these results indicate that the Combined Model can be trimmed to a Domain Specific Model that fits the data equally as well.

Second, when comparing the standardized coefficients among those who have experienced more life events, the relationship between negative exchanges and negative affect is particularly strong. Among those who experienced few life events, the relationship between negative exchanges and negative affect is only slightly greater than the relationship between positive exchanges and positive affect. However, among those with more life events, there is a significant difference such that negative exchanges have over twice the impact of positive exchanges.

Finally, the relationship between the positive and negative dimensions of well-being differs according to the number of life events. Within both the Combined Model and the Domain Specific Model, there is a stronger negative relationship between positive affect and negative affect for those who have experienced more as compared to few life events.

**DISCUSSION**

This study compares four models that hypothesize different links between positive and negative exchanges and posi-
tive and negative affect within a general population of middle-aged and older adults. Two of these models (the Combined Model and the Domain Specific Model) fit the data equally well. This suggests that there is little explanatory value to be gained from the more complex Combined Model, thus recommending the Domain Specific Model as the simplest and most efficient model of the linkages between exchanges and affect. Specifically, positive aspects of the network are related to positive aspects of well-being, and negative aspects of the network are associated with negative aspects of well-being. When the focus shifts to subpopulations who had experienced differing degrees of life events, we find that the relationship between negative exchanges and negative affect is stronger among those with more life events. We shall highlight these major findings, provide interpretations, and suggest future research directions.

With regard to the relationship between the two dimensions of social exchanges and the two dimensions of well-being within a general population, our first hypothesis, which predicted that the Combined Model would provide the best fit, was not supported. Instead, our analyses found support for the Domain Specific Model as the more parsimonious model that provided an equally good fit with fewer effects. There are two likely explanations, related to issues of measurement, for why our first hypothesis was not supported.

One measurement-based explanation is that our results are due to the parallel nature of our outcome measures. Some researchers whose findings support the Combined Model (Golding and Burnam, 1990; Schuster, Kessler, and Aseltine, 1990) have measured only negative outcomes, while others (Abbey, Abramis, and Caplan, 1985) have included both positive and negative outcomes, though not parallel dimensions of each. We have improved on these studies by using positive and negative measures from the Bradburn Affect Balance Scale, which allowed us to assess social exchanges in relation to two parallel components of well-being. Our use of parallel measures of well-being might account for the discrepancy between previous findings and ours. By using parallel measures of well-being, our results may portray a more accurate representation of the two dimensions of well-being.

A second explanation for our findings is the lack of comparability between our measures of negative and positive social exchanges. While some others (Kiecolt-Glaser, Dyer, and Shuttleworth, 1988; Pagel, Erdly, and Becker, 1987; Rook, 1984) have used measures based on equivalent questions about positive and negative aspects of the network, the measures we used were derived from fairly different questions about the two dimensions. The positive exchange measures were based on quantitative summations of network members providing specific support functions; and the negative exchange measures were based on a more qualitative assessment of the degree of negativity within the network. This lack of equivalence between our measures of positive and negative social exchanges is also evidenced in the work of other researchers, including a study by Manne and Zautra (1989), whose findings also provide support for the Domain Specific Model. Clearly, future research examining the effects of positive and negative exchanges should include parallel measures of the two dimensions of personal relationships.

Our second hypothesis concerning the salience of the Negativity Model under conditions of stress was only partially supported. Consistent with negativity effects, our data revealed that the relationship between negative exchanges and negative affect was considerably stronger for those who had experienced multiple life events as compared to only a few life events. However, inconsistent with the Negativity Model, we found that negative exchanges had only a minimal effect on positive affect. These findings suggest that the often-cited negativity effect of social exchanges may be somewhat exaggerated. First, the greater impact of the negative rather than the positive aspects of relationships is most apparent among those who have experienced more stressful life events. Second, the negativity effect is limited to the effect of negative exchanges on the negative dimension of well-being. Overall, our findings show that life events amplify the effect of negative exchanges on negative affect. When aging individuals are attempting to cope with multiple stressful events, they appear to be particularly susceptible to negative treatment from others. They may become so fatigued by stressors that any unpleasant interpersonal exchange is experienced as highly emotionally charged and very negative. Indeed, such negative exchanges may serve as an additional source of stress for people who are already psychologically vulnerable.

Another important finding is that, among those who had experienced few life events, the relationship between positive exchanges and positive well-being is almost as strong as the relationship between negative exchanges and negative well-being. As noted earlier, previous studies have found little evidence for the positivity effect, with the exception of Umberson (1989). Significantly, Umberson's sample was a general population of adults rather than a sample of individuals all of whom were undergoing a significant life event. Much of the previous work in this area has focused on individuals who were selected because of their experience with a stressful life event, such as caregiving (Pagel, Erdly, and Becker, 1987; Kiecolt-Glaser, Dyer, and Shuttleworth, 1988), rape (Davis, Brickman, and Baker, 1991), or widowhood (Rook, 1984). Such samples may have minimized the important role of positive exchanges on positive affect. Indeed, the present findings suggest that the effect of positive exchanges on positive affect is more salient for those who have experienced few life events. Our research highlights the importance of considering the context of life events when we examine the effects of social exchanges.

Finally, our research sheds new light on the relationship between the two constructs of well-being. While previous research (Bradburn, 1969; Diener and Emmons, 1985; Moriwaki, 1974; Warr et al., 1983) has identified the positive and negative dimensions of well-being as independent, our data reveal a somewhat different picture. Whereas the two dimensions of affect are uncorrelated among those with few life events, the two dimensions are significantly correlated among those with multiple life events. This finding indicates that, for those who are more stressed, reports of higher levels of negative affect are associated with lower reports of positive affect. Our work contributes to the ongoing stream of research that examines the relationships be-
between the two dimensions of well-being as well as the predictors of each dimension. Specifically, the finding that stressful events lead to reports of positive and negative affect that move in tandem, rather than independently, will require further replication.

These findings must be considered within the limitations of our study. First, although we chose measures of social exchanges that tapped distinct types of social exchanges, our measures of positive and negative exchanges were not parallel. The measures of positive exchange tapped support at the dyadic level, whereas the measures of negative exchanges tapped network-level interactions. Further research that expands on this examination should pay particular attention to using parallel measures of well-being (as we did) and parallel measures of social exchanges.

Second, while our measures of well-being were parallel, they were limited to the negative and positive affect subscales of the Bradburn Affect Balance Scale. These two subscales may relate to positive and negative exchanges differently from other measures of well-being. To determine whether the present findings generalize beyond the Bradburn Affect Balance Scale, our models must be tested using other measures of well-being.

Third, our life events measure spanned a considerable length of time. That is, all respondents who had experienced a given life event during the past five years were included in the life events analyses. While others have used comparably long periods of time and have noted the benefits of doing so (Lehman, Ellard, and Wortman, 1986), using a shorter time frame since the life event has occurred captures more immediate responses. Additional research should consider the duration since the life event occurred as a factor for further study. It may be that vulnerability to negative transactions changes over time so that a longitudinal approach to this area of research would be particularly useful.

Fourth, we have examined life events as a control variable and have examined interaction effects involving life events by comparing separate subsamples of those who have few vs many life events. An alternative approach would be to treat life events as a continuous exogenous variable as we test each of the different models. Future research needs to consider such alternative specifications as we continue to explore the impact of life events on the relationship between social exchanges and well-being.

Overall, the results reveal the importance of integrating two areas of research: dimensions of social exchanges and dimensions of well-being. In so doing, we identified four separate models of social exchanges. Our findings give further credibility to the Domain Specific Model of social exchanges and suggest that the importance of the Combined Model and the Negativity Model have been overemphasized in previous research. In addition, this study highlights the benefits of integrating a third area of research, that of life events. When considering social exchanges and well-being within the context of those who had experienced multiple life events, we discovered one reason why the Negativity Model has accumulated such support. That is, the relationship between negative exchanges and negative affect is strengthened under conditions of greater stress. Individuals appear to be more vulnerable to negative social exchanges when they experience a larger number of life events.

To the extent that the present results are confirmed by future work, they suggest that the widespread support for the Negativity Model is due, in part, to research designs that have both selected highly stressed populations and concentrated on measures of negative affect. If we broaden our studies to include not only nonstressed comparison groups but also a wider range of outcomes, then other patterns, such as the Domain Specific Model, may provide a better fit to the data.

Clearly, a direction for future research is to further examine the relationship between the two dimensions of social exchanges and well-being and different life events. One focus for future investigation should be on exploring the specific circumstances in which positive and negative exchanges have a greater impact on well-being. A second direction should be on determining the extent to which gender and age affect the relationship between social exchanges and well-being. A third focus should be on identifying the positive and negative aspects of well-being that are most sensitive to social exchanges.

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