Cobb (1976), one of the early proponents of social support theory, stated, “It appears that social support can protect people in crisis from a wide variety of pathological states: from low birth weight to death, from arthritis through tuberculosis to depression, alcoholism, and the social breakdown syndrome. Furthermore, social support may reduce the amount of medication required, accelerate recovery, and facilitate compliance with prescribed medical regimens” (p. 300). Both the structure of the social network (frequency of social contacts, duration of contacts, number of people in the social network) and the quality and function of social support (the strength of the relationship, the reciprocity, the helping behaviors themselves) have been studied as they relate to health (Hupcey, 1998).

Despite Cobb’s (1976) strong claim regarding the moderating effects of social support on stress, health, and health care behaviors, empirical evidence to support these claims has not been unequivocal (see Avlund, Damsgaard, & Holstein [1998] for a good review of social support research since the 1970s). Early research seemed to show strong relationships between mortality and the structure of the networks (e.g., Berkman, 1984; Blazer, 1982). This is the body of research that led to the well-accepted (and well-supported) axiom that living alone is a high risk factor for morbidity and mortality. More and more, recent research seems to recognize the complexity and nuances of the concept of social support; important influences such as gender (Avlund et al.), culture (Sugisawa, Liang, & Liu, 1994), and type of social participation (Glass, de Leon, Marottoli, & Berkman, 1999) are being incorporated into research designs. The broad sweeping claims of Cobb, as quoted above, have been tempered by often conflicting findings in this body of research.

The conflicting findings of the social support research serve as reminders to us that we have only just begun to comprehend the meanings of being “in relation” in our lives. The relation itself is not embodied in the frequency of social contacts, in the length of time spent with others, in the number of people in one’s intimate social circle; nor is relation embodied in the actions taken or the emotional depth felt toward another person. These may be manifestations of relation, but they are not relation itself.

Too Much Connectedness?

While writing this chapter for the first edition of this book, I was startled one morning by a small headline in the newspaper. A column written by New York Times writer Thomas L. Friedman (1999) was headlined, “Yes, You Can Be Too Connected.” Reading the article under the headline further strengthened my increasing awareness that relation or connectedness is not a simple, unidimensional phenomenon; rather it is an aspect of life that harbors destructive as well as supportive potentialities.