Author's response to reviews

Title: Gender differences in the association of social support and social network with self-rated health status among older adults: a population-based study

Authors:

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Author's response to reviews: see over
Dear Ms. Emily Crow,

We should be grateful if you would consider the revised version of our article entitled “Gender differences in the association of perceived social support and social network with self-rated health status among older adults: a population-based study” for publication in the BMC Geriatrics.

This is original research that is not presently under consideration for publication elsewhere. It is free of conflict of interest and was conducted applying the highest ethical principles on human subjects.

We thank for the editor comments and we have responded to all items.

Yours sincerely,

Dr. Cosme Marcelo Furtado Passos da Silva
Peer review of your manuscript is now complete and we have received additional advice on this submission from one of our editorial board members. Although their assessment was generally very positive, there still a few remaining concerns that we would urge you to address before acceptance:

1. There are too many subtitles in Background and Method sections. Many of them are unnecessary. Please consider deleting them as indicated below.

   **Answer:** All subtitles in Background and Method section considered unnecessary were deleted.

2. Even if the authors rewrote the whole paragraph of the very first section, the current version is not well written. I suggest dropping this if the authors cannot write a good paragraph on this. If authors decide to delete, please write two sentences: "Self-rated health (SRH) is considered to be a valid, reliable, and robust measure of health status as well as a predictor of mortality among older people [citations]. A number of studies have shown that SRH is closely linked with social support and social network [citations]" before the current section of "Social relationships and health." Please change the current section title "social relationships and health" to "Social supports and social network and SRH". Please notice that social relationships are slightly different from social supports and social network conceptually. Also, please make sure that Reference 5 is for SRH.

   **Answer:** The suggestion was accepted. The first paragraph was replaced by the two sentences above mentioned. The references were re-ordered along the manuscript. Reference 5 was deleted.

### Background, paragraph 1

**Removed:** “Social determinants of health in older adults

Healthy aging is not a random phenomenon; socioeconomic characteristics may play an important role in health and life expectancy among older people. Studies did not detect a consistent relationship between socioeconomic indicators and health outcomes in older adults [1-5]. For instance, worse self-rated health (SRH) was unrelated to social deprivation, occupational status, income inequality and family income in older adults in some studies [3-5]. On the other hand, elderly people with low individual and family income and/or poor educational attainment showed higher likelihood of poor SRH and multimorbidity in others [4-5]. Further investigation is needed to identify other possible social determinants besides material circumstances and could include elements of social integration [6].”

**Added:** “Self-rated health (SRH) is considered to be a valid, reliable, and robust measure of health status as well as a predictor of mortality among older people [1,2]. A number of studies have shown that SRH is closely linked with social support and social network [3-8].”

### References

**Removed:**

4. Aida J, Kuriyama S, Ohmori-Matsuda K, Hozawa A, Osaka K, Tsuji I: The association between neighborhood social capital and self-reported dentate status in

# Background, paragraph 1

Removed: “Social relationships and health”

Added: “Social support and social network and SRH”

3. Three subtitles "Social support and social network and SRH," "Gender, social connectedness and SRH," and "Conceptual model of the relationship between social connectedness and SRH" in Background Section should be sufficient

Answer: The suggestion was accepted and the new version of the Background section included the three above mentioned subtitles.

4. Delete the self-rated health measure section since it has been moved and rephrased as the very first sentence of the paper.

Answer: The self-rated health measure section was deleted.

# Background, paragraph 4

Removed: “Self-rated health measure

SRH is considered to be a valid, reliable, and robust measure of health status as well as a predictor of mortality among older people [35,36]. One advantage of using SRH in research is its ease in assessment via a questionnaire [37].”

# References


5. In Method Section, four subtitles "Sample design and data collection," "Ethical approval," "Variables and covariates," and "Statistical analysis” should be sufficient.

Answer: The subtitles of Methods section were revised. The following subtitles were removed/replaced: Variables, Self-rated health, Perceived social support and social networks, Covariates, Demographic and socioeconomic variables, Health-related behaviours, Use of health services, Functional status, Somatic health problems.

6. The revised discussion is good. However, the second paragraph about the association between social support and mortality is not closely related to the current theme (association between social support and SRH). Please consider deleting it. The deletion of the paragraph will not undermine the quality of the paper.

Answer: The second paragraph of the Discussion section was deleted.
**Discussion, paragraph 2**

**Removed:** “There is strong evidence to support the notion that being socially connected determines health. The earliest data linking social support to mortality came from a large prospective community studies in adults [14,46]. Higher mortality was associated with limited social network as assessed by the number of contacts with friends and relatives, and church and other group membership [46]. A recent meta-analysis showed that people with strong social relationships had a 50% increased likelihood of survival [14]. Social support has been found to be related to mental health [11,13,51-53], chronic diseases [13,48], and cardiovascular disease, including coronary heart disease, stroke, and myocardial infarction [7,54].”

**References**