For some decades, social relationship has been a central theme in research on health and wellbeing. The literature documents two separate but related components of social relationship—social network and social support—both of which are believed to impact health independent of the other. Using data from the Utah Fertility, Longevity, and Aging (FLAG) study, the current study investigated the associations of dimensions of social connectedness (network and satisfaction with network) and perceived social support (affective, confidant, and instrumental support) to physical and mental health, and examined whether or not the association between social connectedness and physical and mental health of older adults was attributable to perceived social support.

Results of the study showed the dimensions of social connectedness (network, and satisfaction with network) and perceived social support (affective, confidant, and instrumental support) were positively correlated. These dimensions, with the exception of the network dimension, were also positively associated with physical and mental health. Independent samples t-test showed individuals who obtained higher scores on the satisfaction with network dimension, and affective, confidant, and instrumental support dimensions were more likely to have higher physical and mental health scores than those who obtained lower scores on these dimensions. Logistic regression analyses showed high scores on affective and instrumental support were associated with higher odds of reporting good physical health. Similarly, high scores on the satisfaction with network dimension were associated with higher odds of reporting good mental health. Hierarchical multiple regression analyses showed affective and instrumental support, and satisfaction with network dimension were significant predictors of physical and mental health when the effects of covariates were controlled for. Results of moderation analyses showed significant conditional effects of social connectedness and perceived social support on physical and mental health. The interaction term (Connectedness_X_Support) was not significant. Perceived social support did not moderate the relationship between social connectedness and physical and mental health.

Other correlates of physical and mental health included age, gender, and socio-economic status (SES). An increase in age corresponded with favorable mental health. Higher SES was associated with reporting good physical and mental health. Being female was associated with greater likelihood of reporting poor physical and mental health.

Findings generally suggest social connectedness and perceived social support may affect different aspects of health independent of the other. Findings also suggest perceived social support may be relatively more important to the health and wellbeing of older adults than social connectedness and underscore the relative importance older adults attach to quality rather than quantity of social ties. Implications for social work practice and education, policy, and research are discussed.