1. Introduction

- Resilience is an important factor in promoting healthy aging and responding to age-related change.1,2
- Research on resilience in rural older adults has been limited to a narrow geographical and sociodemographic region.3
- Existing research has demonstrated an association between perceived health, social networks, sociodemographic factors, and resilience in rural older adults.1,2,3

2. Objectives

- Assess perceived mental and physical health and social networks as predictors of resilience among highly rural community-dwelling older adults.
- Examine perceived health as a moderator of the relationship between social networks and resilience.

Hypothesis:
1. Mental and physical health will predict resilience above and beyond sociodemographic factors.
2. Family and friend social networks will predict resilience when controlling for sociodemographic factors.
3. Perceived health status will moderate the relationship between social networks and resilience.4

3. Methods

Sample
- Older adults (n=225), age 64 or older, residing in rural Fremont County, Wyoming.
- Mean age was 74.01 ± 7.02
- A majority was female (53%), Non-Hispanic White (94%), married (60%), and retired (75%)
- Participants were randomly selected from registered voters.

Instruments
- Sociodemographics
- Connor-Davidson Resilience Scale (CD-RISC)
- Medical Outcomes Study 12-item Short-Form Version 2 (SF-12v2): Physical Component Summary Score (PCS; physical health status) and Mental Component Summary Score (MCS; mental health status)
- Lubben Social Network Scale-6 (LSNS-6): Family subscale and Friends subscale

4. Analysis

- A two-step hierarchical linear regression model was used to assess zero-order correlations among mental and physical health status, family and friend social networks, and resilience, while controlling for the following sociodemographic factors: age, gender, relationship status, retirement status, and education.
- Bootstrapping analysis (5,000 replications) was used to examine perceived health as moderators of the relationship between family and friend social networks and resilience.

5. Results

- Mental health status and family social support significantly predicted variance in resilience, when controlling for sociodemographic factors (Table 1).
- The full model accounted for 30% of variance in resilience.
- The indirect effect of social family networks on resilience through mental health status was significant, B = -.01, SE = .03, CI95% [-.16, -.04], p = .002. (Figure 1).

Table 1. Hierarchical linear regression model predicting CD-RISC resilience scores.

<table>
<thead>
<tr>
<th>Step</th>
<th>B</th>
<th>SE</th>
<th>ΔR²*</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td>-.01</td>
<td>.13</td>
<td>.04</td>
<td>.01</td>
</tr>
<tr>
<td>Gender</td>
<td>-.49</td>
<td>1.82</td>
<td>.72</td>
<td>.12</td>
</tr>
<tr>
<td>Marital Status</td>
<td>-.28</td>
<td>1.95</td>
<td>.86</td>
<td>.39</td>
</tr>
<tr>
<td>Retirement</td>
<td>-.10</td>
<td>2.34</td>
<td>.64</td>
<td>.51</td>
</tr>
<tr>
<td>Education</td>
<td>.70</td>
<td>2.11</td>
<td>.79</td>
<td>.39</td>
</tr>
<tr>
<td>Step 2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LSNS-6 Family</td>
<td>.22</td>
<td>.29</td>
<td>.65</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>LSNS-6 Friend</td>
<td>.91</td>
<td>.33</td>
<td>.106</td>
<td>.006</td>
</tr>
<tr>
<td>MCS</td>
<td>.67</td>
<td>.11</td>
<td>.01</td>
<td>&lt;.001</td>
</tr>
<tr>
<td>PCS</td>
<td>.11</td>
<td>.08</td>
<td>.167</td>
<td>.001</td>
</tr>
</tbody>
</table>

Note: LSNS-6 Family=Lubben Social Network Family subscale; LSNS-6 Friend=Lubben Social Network Friends subscale; PCS= Medical Outcomes Study Physical Component Summary Score; MCS= Medical Outcomes Study Mental Component Summary Score.

Figure 1. The indirect effect of family social networks on resilience through mental health status.

6. Conclusion

- When controlling for sociodemographic variables, mental health status and family social networks may be a more important predictor of resilience among rural older adults.
- Mental health status may account for the relationship between family social networks and resilience in this population.
- Interventions intended to increase resilience in this population should aim to bolster family social networks for older adults with low perceived mental health.
- Low mental health is negatively associated with resilience, and stronger social networks may provide a protective factor for rural older adults, increasing their resilience.3,4

7. References