

RESEARCH AGENDA

Benjamin Cornwell

I have several strands of research which I will continue to develop over the next several years. Most of my work is unified by an interest in the origins and consequences of social networks. One strand examines interpersonal networks, focusing in particular on the ways in which networks relate to health and aging. Another focuses on community-based networks and their implications for organizational and societal outcomes. Below, I describe my recent work in these areas and my plans for developing them in the coming years.

Social Networks and Aging

Much of my research is centered around social networks. I have applied insights from social network analysis to understand a variety of outcomes, including depression, delinquency, and fatality risk in disasters. Over the past two years, however, I have grown increasingly concerned with the relationship between life course transitions and social network connectedness, particularly among older adults. I am mainly interested in: 1) the implications of aging and the life course for older adults' social networks; and 2) how older adults adapt to change in their social networks.

Through pre- and post-doctoral fellowship work with the Center on Demography and Economics of Aging and my ongoing involvement with the National Social Life, Health, and Aging Project (NSHAP) at NORC and the University of Chicago, I have developed a unified research agenda on older adults' social connectedness. NSHAP is a nationally representative study of 3,005 older adults in 2005-2006, funded by the National Institute on Aging. The data include unusually high-quality data on older adults' social networks, and I have begun several papers using these data. My immediate plans are to publish a string of related papers with these data on older adults' social connectedness in sociological journals.

Most research in social gerontology focuses on the impact of social integration on older adults' health, but I examine the opposite process – how social networks are shaped by health declines. In my dissertation, *Physical Function and Social Action: Implications for Social Connectedness*, I used the NSHAP data to show that health declines lead to older adults' loss of non-kin ties, diminished reciprocation in social exchanges, fewer opportunities to control the flow of resources, and decreased knowledge of network structure. I utilize longitudinal data from the Americans' Changing Lives (ACL) surveys and the Second Longitudinal Study of Aging (LSOA II) to corroborate these findings. I am currently revising for publication two dissertation chapters. One explores how older adults reduce reciprocation in social exchanges as their health worsens, the other shows how health declines prompt increased contact and coordination *among* one's network members. These papers are relevant to social exchange theory and research on social network structure, so I am targeting mainstream and specialty sociology journals for these papers.

An emerging topic in social network analysis is longitudinal change in networks, or network dynamics, and one of my long-term research goals is to explore change in older adults' social networks. My association with the NSHAP project had provided me with the opportunity to include a set of questions designed to assess changes in older adults' social networks in a second wave of the study (projected for 2009). Such data would allow me to explore the following questions: To what extent are older adults' denser social networks a response to, in addition to a cause of, health declines? To what extent are losses of network members replaced with the development of new relationships? Relatedly, do those who have health problems have a more difficult time adapting to widowhood and other forms of bereavement?

Some of my work with NSHAP focuses on the more traditional question of how social networks affect health. In one recent paper – with University of Chicago colleagues Ed Laumann (Sociology), Phil Schumm (Health Studies), and Jessica Graber (NORC) – I use NSHAP's dyad-level data on social

networks to explore how older adults use their social networks in the face of health problems. Research assumes that social network members deliver social support to people when they have health problems. In a recent paper, we report that older adults are actually *less* likely to discuss health with their network members when they suffer from poor health. This challenges the assumption that people turn to their networks during health crises, and suggests that social networks may be underutilized by people who have health problems. We are currently preparing this paper for a special issue of *Journals of Gerontology: Social Sciences*. In a follow-up piece, I plan to examine how the discussion of health with network members differs by the type of contact (e.g., spouse versus friend) being considered.

Organizations and Voluntary Associations

I maintain an active research agenda on the topic of organizations, with three main foci: 1) factors that shape involvement in voluntary associations and community groups; 2) how organizations are interconnected and the implications of this interconnectedness for organizations; and 3) the role of organizations in larger society.

In one chapter of my dissertation, I use data from NSHAP, ACL, and LSOA II to describe the effects of health decline on volunteering, religious participation, and involvement in organized community groups. My findings cast doubt on the argument that older adults are always capable of executing the types of social acts (e.g., driving) that allow them to sustain ties to local organizations. I am currently revising this chapter of my dissertation for publication in a mainstream sociological journal. I also explore these issues (with Ed Laumann and Phil Schumm) in a related paper, which has recently been conditionally accepted at the *American Sociological Review*. This piece argues that the oldest-old are actually more connected to the community than young-old, partly because of older adults' compensatory responses to major life transitions like retirement. My next step is to explore how health affects one's likelihood of participating in multiple associations at once, which can be done using data from the General Social Survey (GSS).

Organizational analysis is an ideal vehicle for demonstrating the usefulness of social networks for understanding meso- and macro-level social phenomena. In "Union Members and Voluntary Associations: Membership Overlap as a Case of Organizational Embeddedness" (also in the *American Sociological Review*), a colleague and I show that organizations gain social legitimacy by having members who are well-connected to community associations. We demonstrate that the decline of unions, as an example, coincided with the decreasing connectedness of their members to central voluntary associations, especially religious institutions. It is one of my long-term research goals to explore whether the success of other types of organizations, including firms, may be tied to their members' or employees' connections to the community via voluntary associations.

Finally, one of my recent studies examines the implications of religious institutions' organizational features for the economy. In a theoretical piece, which is currently being proofed for publication in the *Journal of Classical Sociology*, I argue that the centrality of religious institutions to community life is actually what rendered them so pivotal in the early development of American capitalism. Max Weber argued that the exclusiveness of Protestant sects in particular made them ideal organizations for the development of trust and mutual aid (i.e., social capital) in the community. As a result, sects became crucial for the availability of credit.