

Evaluation of the Relationship between Perceived Social Support and Mental Health of Students in Tehran

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Abstract

Aim: People receive social support from family, peers, and other social systems. Within this wide spectrum, social networks that support people unofficially involve the group of family and peers. The aim of this study was to determine the relationship between perceived social support and mental health of students in Tehran.

Methods: This descriptive and analytical study was conducted on 227 students in Tehran using two questionnaires including the General Health Questionnaire (GHQ-28) with 28 questions, and the social support inventory with two scales of Perceived Social Support from Family (PSSFA) and Perceived Social Support from Friends (PSSFR). The collected data were analyzed via SPSS18 software using Pearson correlation test.

Findings: The results showed that mental health had significant relationship with the total score of social support ($p < 0.05$, $r = 0.197$). Furthermore, concerning the other subscales, anxiety and sleep disorders ($p < 0.02$, $r = 0.155$) and social functioning ($p < 0.006$, $r = 0.190$) showed significant relationship with mental health. However, there was no significant correlation between PSSFR and mental health.

Conclusion: As proved by the results of this study, when social support is stronger, an individual will have a better mental health status. Moreover, people who experience a higher level of family support have a better mental health status.

Keywords: Mental health, Social support, Students

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Introduction

The concepts of health and disease overlap each other and cover a broad spectrum. One end of the spectrum is formed by health and desirable physical, mental and social conditions, which are changeable during the time, while the other end is associated with the symptoms of diseases and disabilities [1].

Social support can play a major role in promoting the people's health and mitigating the unfavorable conditions caused by the environment and community. With increasing the social support, there will be a decrease in the rate of mortality and the incidence of physical and mental diseases [2].

According to the opinion of Haus, social support is a functional concept that can be categorized into four groups of supportive behaviors: A) Emotional support, including sympathy, trust and ..., B) Instrumental support, including financial aids and ..., C) Informational support, which consists of advice, suggestions, and information, and D) Appraisal support.

These four support functions are conceptually different but they cannot act independently in practice [3].

People receive social support from family, peers, and other social systems. Within this wide spectrum, social networks that support people unofficially involve the group of family and peers. These types of supports lead to

desirable outcomes. Creating a supportive system, including family, friends, and acquaintances can assist people in facing their lives' hardships. Such a system is required for any condition, both good and bad [4].

Perceiving support is more important than receiving it. In other words, patients' perception of and attitude towards the received support should be considered as a more significant issue, as compared with the proportion of the support received [5].

McDowell et al. (2007) investigated the relation between social support and mental health among HIV patients and concluded that there was a significant relationship between the perceived social support and mental health [6].

In a study by Theo and Tom in 2008, the researchers compared the level of social support and mental health among healthy and sick people. It was shown that patients suffering from headache received higher level of social support and had a better mental health status [7].

How is mental health status affected by social support?

According to the World Health Organization (WHO), mental health is defined as the capability of creating a harmonic relationship with others, changing the personal and social surroundings, solving contrasts, and managing personal tendencies via a logical, fair, and

appropriate manner. It is believed that mental health is not necessarily about not having mental disease, albeit it is about the ability of showing reaction towards different types of life experiences in a flexible and logical way [4].

Cohen and Wales defined two main distinct models for the relationship between social support and physical, mental, and social health. The first is a model with protective effects, and the second deals with fundamental effects. The former offers a model in which social support can improve one's health status via affecting the consequences of stress. This means that people experience a period of stress in their lives. As compared with others receiving higher levels of social support, those benefiting from lower social support are more prone to show the symptoms of the disorder. The latter deals with fundamental effects and shows that social support can affect people regardless of the level of stress experienced by them [8].

Since the level of social support has a major influence on one's mental health, social and clinical psychologists put emphasis on the importance of social support as if the accessibility of social support can reduce mental and emotional disorders in people [4].

Methodology

This descriptive analytical study was conducted as a cross-sectional research in 2017. The variable of perceived social support

was assessed among a group of first-grade high school students (13-16 years). The sample size involved 245 students, of which 227 students answered the questions. They were selected from the schools located in the north of Tehran via using convenience sampling method. Prior to the study, the necessary information on the project was explained to the students, and those who were interested to participate were enrolled into the study.

Data collection tools

1) The General Health Questionnaire (GHQ-28), which included 28 questions designed by Goldberg and Hiller (1979), and covered four subsidiary scales, each involving seven questions. The mentioned scales are as follows:

1. Physical symptoms scale
2. Anxiety and sleep disorders scale
3. Social functioning scale
4. Depression symptoms scale

According to the studies by Hooman (1997), Palahang (1995), Mojahed (1995), Yazdanpanah (1996), Mirkheshti (1996), and Solati (1998), the validity of the Persian version of the GHQ-28 questionnaire was reported to be 0.91, 0.88, 0.62, 0.92, 0.89, and 0.84, respectively [9].

2) Social support inventory, Perceived Social Support from Family (PSSFA) and Perceived Social Support from Friends (PSSFR)

The Perceived Social Support from Family (PSSFA) and Perceived Social Support from Friends (PSSFR) scales include 20 questions to evaluate the level of an individual's satisfaction with the family's and friends' support. Both scales of social support have a Cronbach's alpha coefficient of 0.90, and enjoy

a high level of internal reliability.

Results

In order to investigate the relationship between social support and mental health, we used Pearson's correlation test. The results are presented in Table 1.

Table 1: Correlation between social support (total score) and mental health and its subscales

Variable	Correlation coefficient	Level of significance
Physical symptoms	0.016	0.819
Anxiety and sleep disorders	0.155	0.023
Social functioning	0.190	0.006
Depression symptoms	0.079	0.253
Mental health	0.197	0.005

As shown in Table 1, there is a significant relationship between mental health and social support, in general. In other words, as long as people receive higher social support, they enjoy a more favorable mental health status. Concerning the other subscales, including anxiety, sleep disorder subscale, and social functioning subscale, it can be concluded that people have a higher social functioning and are

less likely to suffer from anxiety and sleep disorders as long as they receive social support.

Furthermore, in order to further investigate the correlation between mental health subscale and family support scale, they were assessed individually without considering the total social support. The obtained results are parented in Table 2.

Table 2: Correlation between Perceived Social Support from Family (PSSFA) and mental health and its subscales

Variable	Correlation coefficient	Level of significance
Physical symptoms	0.080	0.240
Anxiety and sleep disorders	0.191	0.005
Social functioning	0.039	0.575
Depression symptoms	0.093	0.174
Mental health	0.180	0.010

As shown in Table 2, that PSSFA scale has a significant relationship with mental health, as

people with higher family support are mentally healthier. Concerning the subscales, only the

relationship between anxiety and sleep disorders and mental health was significant. As shown in Table 3, there is a significant correlation between PSSFR and the social

functioning subscale of mental health. This indicates that if people are provided with higher levels of PSSFR, they will have a better social functioning.

Table 3: Correlation between Perceived Social Support from Friends (PSSFR) and mental health subscales

Variable	Correlation coefficient	Level of significance
Physical symptoms	- 0.106	0.118
Anxiety and sleep disorders	- 0.015	0.830
Social functioning	0.307	0.000
Depression symptoms	- 0.012	0.862
Mental health	0.081	0.241

Discussion

The results of this study showed a significant relationship between the students’ mental health and social support, in general. It indicates that one’s mental health highly depends on higher levels of social support received from family and friends. As stated earlier, mental health had a significant relationship with the PSSFA scale; moreover, the subscales of anxiety symptoms and sleep disorder had a significant relationship with mental health. Concerning PSSFR, only social functioning subscale had a significant relationship with mental health. The results of the present study are consistent with the findings of Farideh Hamidi on “Evaluation of the relationship between social support and mental health among female heads of the households”, which reported a significant relationship between mental health and social support, in general. They also reported a

significant relationship between social-family support and mental health, which was particularly observed in the subscale of anxiety, sleep disorders, and depression. A significant relationship was also found between mental health and PSSFR in terms of the subscale of depression symptoms. These findings are in line with the results of a study by Aghamohammadian Sherbaaf et al. in which they expressed a significant relationship between family support and adolescents’ mental health and all of its subscales, including physical symptoms, anxiety, depression, and sleep disorders, and social functioning. However, there was no significant relationship between mental health and PSSFR and its subscales [8]. In a study by Ghodsbin et al., a significant relationship was observed between the perception of and access to social support and sleep quality; the higher the social support is received, the better is an individual’s sleep

quality [10]. The research carried out by Roodsari indicated a significant relationship between mental health and social support among the university students [11]. Based on the results of a research by Riahi et al., males' mental health status was better than that of females; they found a direct and significant relationship between social support and mental health [12]. Furthermore, the findings of a study by Azadi showed a significant correlation between social support and mental health; the highest levels of the relationship were observed between mental health and supports from other key people (0.67), social support from family (0.56), and social support from friends (0.42)[13].

The relationship between social support and mental health among the students of Tehran University was investigated by Payravi, and it was found that with an increase in the level of social support, the score of general health was increased; this indicates an improved level of general health, which is consistent with the results of the present study [8].

Conclusion

According to the present research results regarding the effect of social support on mental health sub-scales, it is suggested that practical policies should be designed and implemented by the authorities, especially in the field of education in interaction with the students'

families in order to increase mental health and prevent the possible harms among students.

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