



Social Support: A Way for Sound Mental Health

Mahadevi Waddar

Assistant Professor, Dept. of Psychology, ParvatibaiChowgule College of Arts And Science, Autonomous, Margao-Goa

Supriya Fernandes

Student (TYBA), Dept. of Psychology, ParvatibaiChowgule College of Arts And Science, Autonomous, Margao-Goa.

Tanya keni

Student (TYBA), Dept. of Psychology, ParvatibaiChowgule College of Arts And Science, Autonomous, Margao-Goa

ABSTRACT

Mother plays an important role in raising a child to adulthood and equipping that child with the necessary skills and social support to enter successfully into society (Spoth and Conroy, 1993). In view of this the present study is conducted to study the impact of social support on mental health among students of working and non-working mothers. Perceived Social Support Scales and Mental Health Inventory-5 (MHI-5) are administered on sample of 120 undergraduate students. The results revealed that, students of working and non-working mothers with high and low social support differ significantly in their mental well-being.

KEYWORDS : mental well-being, skills, social support, society, students

INTRODUCTION

The beneficial impact of social support has been associated with both physical and mental health outcomes (Wilks, 2008). Studies have shown that the amount of social support from outside contributors like family, friends and mentors can make a huge impact on a student's success (Trochel, Barnes, and Egget, 2000). Social support includes real or perceived resources provided by others that enable a person to feel cared for, valued, and part of a network of communication and mutual obligation (Stroebe, 2000). In stressful times, it helps people reduce psychological distress (e.g., anxiety or depression) (Taylor, 2011). People with low social support report more sub-clinical symptoms of depression and anxiety than do people with high social support (Barrera, 1986).

Mental health is the "psychological state of someone who is functioning at a satisfactory level of emotional and behavioral adjustment" (Princeton University, 2014). According to World Health Organization (WHO) mental health includes "subjective well-being, perceived self-efficacy, autonomy, competence, intergenerational dependence, and self-actualization of one's intellectual and emotional potential, among others (WHO, 2001).

Mother plays an important role in raising a child to adulthood and equipping that child with the necessary skills and social support to enter successfully into society requires dedication as well as knowledge (Spoth and Conroy, 1993). Social support has been shown to be a protective factor against stressors for both parent and child (Cochran, 1993; Sheldon, 2002).

This study hopes to further research concerning impact of social support on mental health among students of working and non-working mothers. In view of this the present research is taken up with following methodology:

Objectives of the Study

To investigate the prevalence of mental health among students of working mothers and non-working mother with low and high social support.

Hypotheses

Ha1: Students of working mother and non-working mother with high social support and low social support differ significantly among themselves in their mental health

The differences between groups (in all possible ways) are also verified with the help of the following hypotheses:

Ha1.1. Students of working mother with low social support and Stu-

dents of working mother with high social support differ significantly among themselves in their mental health.

Ha1.2. Students of working mother with low social support and Students of non-working mother with low social support differ significantly among themselves in their mental health.

Ha1.3. Students of working mother with low social support and Students of non-working mother with high social support differ significantly among themselves in their mental health.

Ha1.4. Students of working mother with high social support and students of non-working mother with low social support differ significantly among themselves in their mental health.

Ha1.5. Students of working mother with high social support and Students of non-working mother with high social support differ significantly among themselves in their mental health.

Ha1.6. Students of non-working mother with low social support and Students of non-working mother with high social support differ significantly among themselves in their mental health.

Sample of the Study:

The quota sample of the present study includes 120 undergraduate students, 60 females and 60 males. The sample was selected on the basis of age range (18-21), mother's occupation status (working/non-working). The study was conducted on undergraduate students across South Goa, across three different streams, including, Bachelor of Arts, Bachelor of Commerce and Bachelor of Science.

Instruments Used for Data Collection:

Personal Data Sheet: The personal data sheet has been used to collect information regarding Name, Age, Sex, Religion/Caste, Early Background, the SES, No. of Siblings, and Order of birth and other demographic information of the student.

Perceived Social Support Scales (Pss-Friend and Pss-Family) developed by Procidano and Heller (1983) were administered to measure social support of students. These are 20-item instruments designed to the degree to which one perceives her/his needs for support as fulfilled by friends and family. Each 20-item scale consisted of declarative statements to which the individual answered "Yes," "No," or "Don't know". The PSS has excellent internal consistency with an alpha of .90. The test-retest coefficient of stability over one month period was .83.

Mental Health Inventory-5 (MHI-5) The MHI-5 was developed for use in the general population and designated to improve upon other instruments by including items that assessed psychological well-being (Veit and Ware, 1983). This inventory comprises five questions about mood over the past month, measuring the experience of psychological well-being and the absence of psychological distress. Each of the items require a response on a 5-point rating scale, with possible scores ranging from 6-30, and the instrument is scored such that higher scores indicate better mental health. Internal consistency reliability coefficients range from .80 to .96 across several studies (Ware, Kosinski, and Keller 1994). The MHI-5 was validated by Pais-Ribeiro (2001) for the Portuguese adult population and reported a Cronbach's alpha of .87.

Data Analysis/ Statistic: ANOVA is applied to verify Ha1 to determine the significance of difference between the scores of a four group. The statistical technique of Scheffe's test is applied to verify the specific hypotheses Ha1.1 to Ha1.6.

Results and Discussions:

Table No. 1: Details of ANOVA for the mental health Scores of Social Support of Working and Non-Working Mothers

Variables	Sources of Variances	Sum of Squares	df	Mean Square	F-value
Mental health	Between Groups	2168.213	3	1031.497	11.55***
	Within Groups	11929.246	116	89.278	
	Total	14097.458	119		

***P<0.001; Very Highly Significant

A glance at Table 3 reveals that four groups of students, namely, students of working mothers with low social support, students of working mothers with high social support, students of non-working mothers with low social support and students of non-working mothers with high social support, differ significantly among themselves in the variable of mental health. This difference of these four groups is significantly very high in mental health (F= 11.55; P< 0.001). Further, multiple comparison (Post Hoc Scheffe's test) results have thrown light on differences among these groups at a micro level.

Table No. 2: Mean, Mean Difference, Std.Error, and Scheffe's 'S' value for Mental Health Scores of Social Support of Working and Non-Working Mothers With Varying Group (N = SWMLSS =28, SWMHSS =32, SNWMLSS =26 and SNWMHSS=34)

Variables	Multiple Comparison	Mean	M.D	Std. Error	S-value
Mental health	SWMLSS - SWMHSS	52.13 - 52.36	-00.23	2.62	-0.87
	SWMLSS - SNWMLSS	52.13 - 48.18	03.94	2.76	1.43
	SWMLSS - SNWMHSS	52.13 - 59.78	-07.65	2.58	-2.96*
	SWMHSS - SNWMLSS	52.36 - 48.18	04.17	2.67	1.57
	SWMHSS - SNWMHSS	52.36 - 59.78	-07.41	2.49	-2.97*
	SNWMLSS - SNWMHSS	48.18 - 59.78	-11.59	2.64	- 4.39

*P<0.05; Significant

Note: *SWMLSS* - Students of working mother with low social support. *SWMHSS* - Students of working mother with high social support. *SNWMLSS* - Students of non-working mother with low social support. *SNWMHSS* - Students of non-working mother with high social support.

The obtained results of Scheffe's test reveal that students of non-working mothers with high social support have signifi-

cantly high mental health (S= -2.96; P< 0.05), compared to students of working mothers with low social support. Students of non-working mothers with high social support have significantly high mental health (S= -4.39; P< 0.05), compared to students of non-working mothers with low social support. Further, no significant difference is observed between groups such as students of working mothers with low social support and students of working mothers with high social support, students of working mothers with low social support and students of non-working mothers with low social support, students of working mothers with high social support and students of non-working mothers with low social support, and students of non-working mothers with low social support and students of non-working mothers with high social support.

The above findings that students of non-working mothers with high social support have high mental health than students of working mothers with high social support and students of working mothers with low social support could be due to the fact that the strongest associations between social support (particularly emotional support) and a health outcome are seen in relation to psychological well-being. Large literature documents suggest lower risk for depression and psychological distress among those who enjoy greater social support. Social support has been found to be associated with greater well-being in a wide variety of studies (Stepoe et al., 1996).

Conclusions:

The obtained results and discussed facts have led to the following conclusions:

1. Students of non-working mother with high social support have significantly higher mental health compared to the students of working mother with low social support.
2. Students of non-working mother with high social support have significantly higher mental health compared to the students of working mother with high social support.
3. Students of working mother with low social support and students of working mother with high social support do not differ significantly from each other in their mental health.
4. Students of working mother with low social support and students of non-working mother with low social support do not differ significantly from each other in their mental health.
5. Students of working mother with high social support and students of non-working mother with low social support do not differ significantly from each other in their mental health.
6. Students of non-working mother with low social support and students of non-working mother with high social support do not differ significantly from each other in their mental health.

Implications:

Studies of such kind would help to understand the importance of social support to take necessary measures in helping students for satisfactory development and success. The results of the study also indicate the need for proper and timely counseling for the students.

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