

Relativity of Multidimensional Social Support with the Indicators of Psychological Health

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Abstract

The term social support is composed of a meaning with two words. The word 'social' means relating to a society and the word 'support' means giving assistance. Every individual is a part of society and he needs support from the other members of the society so as to attain the tangible 'objectives' and the intangible 'satisfaction' in his life. The social support, to an individual acts as a power resource of self confidence and provides for fettle mental condition. There have been many researches which have identified relationship of social support with the psychological states of mind and so proving that social support has the relationship with psychological health.

This paper is fabricated of four sections. The first section gives the introduction of social support and psychological health. This section also explains the different measures of social support and the indicators of the psychological health. The second section throws light on the association of social support to the psychological health. The third section traces out the relationship of social support with different indicators of psychological health as revealed from the past literature. The last section concludes the paper. The paper is descriptive and the information gathered is from the secondary sources.

Keywords: *Social Support, psychological indicators, mental wellbeing, stress, life satisfaction.*

1. Introduction

Social support: sources and types

Social support is a conception of producing and provision of backup from the people, around an individual in the society. Many researchers have proved its direct benefits to physical and psychological health. They have revealed that higher social support results in good mental states of mind and satisfies an individual mentally in his life. The social support is measured mainly on the basis of two

aspects; the sources and the types of social support. Apart from this some studies also illustrated themselves as on the concept of perceived and received social support. The sources of social support are seen to be changing according to the particular field of studies and similar thing is seen when we talk about the types of social support. Some has measured the satisfaction level of social support and some took the degree of frequency the social support received. Barrera, 1981 and Gottlieb, 1983 describes the two aspects of social support. They are the functional aspect and the structural aspect.

The functional view is a treat of the types of social support received from the various sources. The core of the functional support is on the function performed by the persons who provide social support and that is the reason it deals with the types of social supports. Social support can be categorized in four major types the emotional support: offering empathy, love affection, care, motivation, warmth and trust. The tangible support: offering financial help, or observable goods and services. This one is also known as instrumental support type. The informational support: offering advice, suggestions and information. The companionship support: offering a sense of belongingness (Wills, T.A., 1991; Margaret, Clark, ed., Wills, T.A., 1985 and Uchino, B., 2004). House, 1985 also illustrated four types of social support: emotional support (love, care, affection,); instrumental (helping in terms of money, something in kind, giving time to somebody, doing a favour); informational (giving advice, suggestions regarding daily tasks or on some conflicts) the last one forms is the appraisal support (providing an evaluative feedback).

The structural aspect is related to the quantitative information of the social support like the size and the number of the members, from which the social support is received. It deals with the substantiality of the relationships which provides support. It focuses

on the structural network of the relationships or the other people residing in the societal group. Social support can be given by number of sources. They can be the close relatives, spouse, other family members, children, co workers, communities or many more others depending upon an individual's closest social network. Taylor, S.E. (2011) has stated that the social support sources include family, friends, romantic partners, pets, community and coworkers. Tardy, (1985) identified six sources of social support as family, close friends, neighbours, coworkers, community and the professionals.

Researchers also had been done, distinguishing studies on the perceived and received social support. Taylor, S.E in the book "Social support: A Review" has differentiated the perceived and received social support as the perceived support refers to the judgment of the recipient of the social support which will be offered to him in need. The received support is the actual action of support received by the recipient.

Psychological Health: indicators

Psychological health is also popular with the other names like mental wellbeing, mental health or mental wellness. Psychological health is the state of mental wellness when a person is able to adjust his emotions and cope up with the stress full events in his life. The concept of mental health can be understood on the basis of perspectives: positive and negative states. Karl Menninger(1947) defines mental health as "an adjustment of human beings to the world and to each other with maximum effectiveness and happiness". Thus, psychological health is a balance of emotions and reactions which an individual makes towards the outer world he lives in. A person who does not have a stable mental health faces the problems like stress, loneliness, depression, anxiety. On the other hand if he is having a sound mental health then he would be feeling happy, will have a good quality of life satisfaction, will feel lovable and cheerful. These positive and negative circumstances are the indicators of psychological health. There are many other emotional feelings (positive and negative) which exhibit the state of psychological health and can be used as the measures of psychological health, like the feeling of ignorance, feeling happy or not, feeling relaxed, feeling loved, self acceptance, positive attitude towards self and others, trusting others and more. These feelings have been useful in the formulation of the questionnaires to measure the psychological health. The mental wellbeing scale (Warwick- Edinburgh Mental Wellbeing Scale) , quality of life scale(QOLS by John Flanagan, 1970), life satisfaction scale(SWL by Pavot, W., & Diener, E.), depression scale(HDRS by Hamilton), anxiety scale(HAM-A by Hamilton), stress scale(Holmes and Rahe stress scale) are the most discussed and most used scales in the field of research work now.

These scales have been used by many researchers to establish the relationship with other emotional and functional factors (actions or reactions of an individual, health issues, performance etc.). Being psychologically fit means self actualization, self acceptance, accepting the surroundings and the people, ability to cope with the reality of surroundings, and acting in a balanced way to the reality and the anticipated circumstances. Actually this can be seen as sequencing actions done by a psychologically fit person.

2. Materials and Method

Papers from 2010 to 2017 were studied thoroughly related to the relationship of social support and the indicators of psychological health. It has been tried to execute the results of the papers which reveals the relationship of social support with different indicators of psychological health for every other research. The papers selected for study are taken which are related to anyone of the indicators of psychological health at a time.

Literature associating the relationship of social support and the indicators of psychological health Cohen & Wills (1985) have done a detailed study of the past literatures to find out the effect of social support on the stress. They portrayed a positive relationship between social support and stress. They studied that whether the social support has a direct or a buffering effect with mental well being on the stress. In the research work done by M.A. Dzulki and Md Aris Safree Md Yasin "The Effect of Social Support and Psychological Problems on Student's Academic Performance" reveals that social support was found to be significantly and negatively correlated with depression, suggesting that the higher the social support, the lower is the depression. Social support was found to significantly and negatively correlate with anxiety suggesting that the higher the social support the lower is the anxiety level. Similarly, social support was found to be significantly and negatively correlated with stress, suggesting that the higher the social support the lower is the stress. Summarizing their work it explored that social support has an inverse relationship with the psychological problems. A study by Wentzel (1998) found that social support from family and friends plays an indispensable role in the wellbeing of students and help them to attain the pro- social goals. Social support is introduced as a coping and promoting agent of life stressors and psychological wellness (Dollete et al., 2004). Social support has been identified as a protective factor for children and teens. Absence or decreased levels of social support from parents, teachers, friends, family and peers results in psychological problems among the children and teens and increased the level of stress among them (Quomma and Greenberg,1994). Abbey, Abramis and Caplan examined the sensitivity

of the measures of social support and social conflict from 3 sources: people, some one person and the closest person as the correlates of wellbeing (Abbey, A., Abramis, D. J., & Caplan, R. D. 1985). The article answered the three questions: a) which sources of social support are most strongly related to emotional wellbeing? b) What is the relationship between social support and social conflict? c) Which sources of social conflict are most strongly related to emotional wellbeing? Respondents were asked to answer how much support and conflict do they experience with respect to all the 3 sources. The results revealed that social support and social conflict are not significantly correlated except in reference of the closest person. Social support was found to be significantly correlated with affect and quality of life when social support referred to people in their lives. Social support buffered the effects of social conflict on affect and life quality when respondents referred to some one person.

In a paper by Dimpy Mahanta and Megha Aggarwal “ Effects of Perceived Social Support on Life Satisfaction of University Students” the effects of perceived social support on the life satisfaction of university students was studied. Perceived social

support was measured by Procidano & Heller and the satisfaction with Life was measured by Diener, Emmons, Larsen, & Griffin (SWLS, 1985). The results of the study indicated no gender differences in perceived social support from family but a significant difference was found in the social support perceived from the friends. Talking of the relationship of social support and life satisfaction, it was found that higher levels of perceived social support from family and friends results in higher levels of life satisfaction. Social support is correlated with many positive indicators of physical and mental health. Researchers have illustrated the effect of positive perceptions of teacher support on the mental wellness of the students. Not only this but also high levels of teacher support is associated with higher levels of life satisfaction (Suldo et al. 2008). James S. House gave a model for studying social relationships, networks, and support in relation to each other and stress to health (1987). Table 1 below represents the relationship of social support with the different indicators of psychological health. It also briefs out the purpose, instruments and the conclusions of each paper.

Table 1: Table 1: Papers Representing the Relationship of Social Support with Different Indicators of Psychological Health

CITATION	PURPOSE	INSTRUMENTS	CONCLUSION
Social support moderates stress effects on depression. Xingmin Wang [†] , Lin Cai [†] , Jing Qian and Jiayi Peng International Journal of Mental Health Systems 2014;8:41	To examine the moderator effect of social support on the relationship between stress and depression of university students.	Perceived stress scale(PSS) Perceived social support scale (PSSS) Self-rating depression scale (SDS)	Social support plays a significant regulating effect on the relationship between stress and depression and is an important environmental resource
What's the role of perceived social support and coping styles in depression and anxiety? Hamid Reza Roohafza, Hamid Afshar, Ammar Hassanzadeh Keshteli, Narges Mohammadi, Awat Fezi, Mahshid Taslim and Peyman Adibi. Journal of Research in Medical Sciences. 2014 Oct; 19(10): 944-949	To examine the associations between perceived social support and coping styles with depression and anxiety levels.	1. Anxiety and depression were assessed using the validated hospital anxiety and depression scale (HADS). 2. Coping styles was measured using cope scale. It consisted of the 23 items from the following five scales: Positive re-interpretation and growth, Problem engagement, Acceptance, seeking support and Avoidance scales. 3. Perceived social support was measured using Multidimensional	This study shows active coping styles and perceived social supports particularly positive re-interpretation and family social support are protective factors for depression and anxiety.

		Scale of Perceived Social Support (MSPSS)	
<p>Perceived Social Support From Friends as Determinant of Loneliness in a Sample of Primary School.</p> <p>Melek Kalkan, Hatice Epli-Koç University of Ondokuz Mayıs, Samsun, Turkey</p> <p>US-China Education Review, ISSN 1548-6613 April 2011, Vol. 8, No. 4, 547-551</p>	<p>1. Is there a meaningful relationship between perceived social support from friends and loneliness? 2. Is the perceived social support from friends a meaningful predictor for loneliness?</p>	<p>1. Social support was determined by Gökler (2007).</p> <p>2. Loneliness of children was measured by adapted version of Turkish by Kaya (2005)</p>	<p>1. Perceived social support from friends was negatively correlated with loneliness.</p> <p>2. Perceived social support from friends is a significant predictor for loneliness</p>
<p>Perceived social support and life-satisfaction</p> <p>Elżbieta Kasprzak</p> <p>Polish Psychological Bulletin 2010, vol 41 (4), 144-154 DOI - 10.2478/v10059-010-0019-x</p>	<p>1. To analyse the relationship of life satisfaction with social support and the extent of contacts.</p> <p>2. To analyse the connection of interpersonal relations to family relations.</p> <p>3. To prove that the number of positive interpersonal contacts positively determines the life satisfaction.</p> <p>4. To prove that social support</p>	<p>1. Life satisfaction: SWLS (The satisfaction with life scale)</p> <p>2. Interpersonal relationships: analyzed with 3 dimensions: closeness (homogeneity and density of relationships), extent (number of relatives, family, colleagues, friends, acquaintances) and satisfaction (the frequency of contacting the sources of social support) of the relationship.</p> <p>2. Perceived social support: questionnaire of F-SozU K22. Consists 22 statements with types of social support ; emotional, practical and social integration.</p>	<p>1. significant relationship between life satisfaction and social support and satisfaction with relationship but only with friends (before training) and family (after training).</p> <p>2. Number of friends is related to life satisfaction (after training).</p> <p>3. The positive relationship between satisfaction with family relationships and the number of friends and life satisfaction is revealed, but after training.</p> <p>4. The sense of social support (practicle-before training and</p>

	<p>determines the life satisfaction more strongly than the extent of interpersonal contacts.</p> <p>5.To prove that social support skill training provides better life satisfaction.</p>		<p>emotional – after training)determines life satisfaction more strongly than the extent of relationship.</p> <p>5.Training increases life satisfaction but also the sense of social integration and satisfaction with the relationship among colleagues and acquaintances.</p>
<p>Variations in Social Support and Mental Health Among Black Women by Socioeconomic Status.</p> <p>Lesa A. Johnson, 2010</p>	<p>1. African American, Afro-Caribbean and Caucasian women having lower socioeconomic status will report more symptoms of depression than women from higher socioeconomic statuses</p> <p>2. Psychological resources of self esteem and mastery will serve as protective mechanisms that will offset or mediate the effects of socioeconomic status on depressive symptoms.</p> <p>3. Acute stressors and economic hardship will further worsen the depressive symptoms, even after taking into</p>	<p>1. Dependent variable- Depressive symptoms were assessed using nine items from the Center for Epidemiological Studies Depression Scale (CES-D).</p> <p>2. Independent variables includes:</p> <p>a) Socioeconomic Status. Poverty Index is a scaled item devised in the Collaborative Psychiatric Epidemiology Surveys (CPES), 2001-2003, based on the U.S.</p>	<p>1. The theory that women of lower socioeconomic status have more symptoms of depression and vice versa is partially true.</p> <p>2. The findings do partially substantiate the second hypothesis.</p> <p>3. The findings on material and emotional support partially support the fourth hypothesis.</p>

	<p>account self esteem and mastery</p> <p>4. Lack in the reciprocity of material support and negative interaction between themselves and family, friends, or church will report more symptoms of depression.</p> <p>5. The relationships between social support, stressors, psychological resources, and depressive symptoms will be significantly different for African American, Afro-Caribbean, and white women.</p>	<p>b)Race/Ethnicity</p> <p>c) Psychological Resources. Self Esteem was measured using the ten-item Rosenberg scale (Rosenberg 1965). Mastery was measured by Pearlin and Schooler 1978 indicating the sense of control of environment around the respondent.</p> <p>d) Stressors. Acute Stressors- by “Chronic Economic Hardship” scale.</p> <p>e) Social Support Measures. Material Support Reciprocity was measured. Sources of support were family, friends and church. Three variables were devised for each of the source. Emotional support is indicated by four category measures indicating whether the respondent receive positive or negative support from family and church.</p> <p>7. Controls. Age and marital status were included as controls</p>	<p>4. These findings on material and emotional support further support the hypotheses (H4 and H5) that pathways to depression regarding support relationships differ among groups of black women, and further reflect the heterogeneity in these groups.</p>
<p>Relationship between spouse/partner support and depressive symptoms in older adults: Gender difference</p>	<p>The hypothesis framed are:</p>	<p>1. Depressive symptoms:</p>	<p>1. Low-level perceived spouse/partner support, as opposed to unavailability of same</p>

<p>Namkee G. Choi and Jung-Hwa Ha</p> <p>Aging and Mental Health, 2011 Apr; 15(3): 307-17</p>	<p>1.(H1)low-level perceived spouse/partner support, as opposed to the unavailability of spouse/partner support, will be associated with higher depressive symptomatology among women but not among men; and</p> <p>2.(H2) high-level perceived spouse/partner support, as opposed to the unavailability of spouse/partner support, will be associated with lower depressive symptomatology for both genders.</p>	<p>Center for Epidemiologic Scale for Depression (CES-D; Kohout, Berkman, Evans, & Cornoni-Huntley, 1993; Radloff, 1977.</p> <p>2.Spouse/partner support:</p> <p>NSHAP- 4 items</p> <p>3.Family and friend support: NSHAP- 4 items</p> <p>4.Other covariates: socio demographics, health status, frequency of physical activity, religious service attendance.</p>	<p>was significantly associated with higher depressive symptoms among women only and vice versa, for both genders. The results support both H1 and H2. The relationships between spouse/partner support and depressive symptoms did not vary between younger and older groups within each gender.</p>
<p>The Roles of Different Sources of Social Support on Emotional Well-Being among Chinese Elderly.</p>	<p>The purpose of this study is to compare the relative importance of spouse, children and friend support on positive and negative affect of the EWB.</p>	<p>1.Social support (family and friends): sources- spouse, children, friends/neighbours/colleagues. Social support measured on the basis of frequency of contact, how extensively did the each source provided support and how extensively did the participants received support from the sources.</p> <p>2.Emotional wellbeing (positive and negative): 12 item</p>	<p>1. Closer and more stable circles (i.e., spouse followed by children) compared with less close and stable circles (i.e., friends/neighbors/colleagues) were more frequently contacted and supported.</p> <p>2. Family support played an important</p>

<p>Haifeng Li, Yang Ji, Tianyong Chen</p> <p>Published: March 3, 2014</p>		<p>Questionnaire taken from Kahneman et al.</p> <p>3.Sociodemographic information and other variables: The sociodemographic information (age, sex, marital status, education level, monthly income and income satisfaction), health status (number of chronic diseases, self-rated health status), living arrangement, and life events were included in the survey.</p>	<p>role in buffering negative effect, and spouse support was replaced by children support when the elderly ceased to be in a married relationship.</p> <p>3.Friends played a more important role in positive effect.</p> <p>4. Family and friend support play different roles on the two facets of EWB of the elderly.</p> <p>5. positive affect may be enhanced by friend support (based on personal interests and selectable) rather than family support (bonded by kinship and not selectable)</p>
<p>Stress and Social Support</p> <p>Shadiya Baqutanyan</p> <p>Indian Journal of psychological Medicine 2011 Jan- Jun; 33(1): 29- PMCID: PMC319515134</p>	<p>The purpose of this study is to understand the importance of social support in managing stress.</p>	<p>1.Demographic information 2.Academic stress: 20 items related to academic stress (ACSS-13 items and ASAF-7 items). 3.Student problem questionnaire: deals with the causes of stress. 4.Coping inventory: 60 item inventory developed by Carver et. At. Only to measure the instrumental social support and emotional social support.</p>	<p>The results of this study confirm that stress and social support based on counseling lessons are effective in reducing stress among fresh students. Based on the results of this study, a meditation-based stress reduction-counseling program can be instituted among students.</p>
<p>The relationship between quality of life and social support among adolescents</p> <p>Hatice Kumcagiz, and Cengiz Sahin</p>	<p>To examine the relationship between adolescent's quality of life and social support.</p>	<p>1.Quality of life: measured through "Life quality Scale for Children (LQSFC)" and 2.Social Support: "Social Relationship Principles Scale for Adolescents" by Turner, Frankel and Levin (1983). Sources of social support were family and friend.</p>	<p>The study found positive relationships between family and friends support, and physical and psycho-social health and life quality.</p>

<p>SHS web of Conferences 37, 01053 (2017). DOI: 10.1051/shsconf/20173701053</p>			
<p>Social support and strain from partner, family, and friends: Costs and benefits for men and women in adulthood</p> <p>Heather R. Walen, Margie E. Lachman</p> <p>Volume: 17 issue: 1, page(s): 5-30</p> <p>Issue published: February 1, 2000</p>	<p>1. To examine the association of social support and strain with psychological well-being and health.</p> <p>2. To investigate whether these associations depended on relationship-type (partner, family, friend).</p> <p>3. To examine the buffering effects of support on strain (both within and across relationship-type).</p> <p>4. To test the extent to which these associations differed by age and sex.</p>	<p>1. Psychological well-being:</p> <p>a) life satisfaction: rate the life on 0-10 ratings.</p> <p>b) positive mood: 6 item scale asking how much of did you feel about cheerful, good spirits, extremely happy, calm and peaceful, satisfied and full of life.</p> <p>c) negative mood: 6 item scale asking extent to which they experienced – sad that nothing can cheer up them, nervous, restless, hopeless, that everything was an effort, worthless.</p> <p>2. Physical health:</p> <p>a) subjective health: rate your health on 0-5 scale</p> <p>b) health problems: 28 health problems were indicated (eg. Asthama, blood pressure, strokes,</p>	<p>1. All support variables exerted a stronger effect on psychological wellbeing than strain.</p> <p>2. Social exchanges from one's partner were found to be a significant predictor of well-being and health. Family strain and family and friend support were also related to many of the outcome measures, but to a lesser extent.</p> <p>3. It found some evidence for the buffering effect of support on strain.</p> <p>4. It found some evidence for the differential effects of age and sex. Family strain predicted negative mood and health problems for women only. Friend strain predicted life satisfaction and positive mood only for younger and middle-aged adults. This may be because women cast a 'wider net of concern'.</p>

		<p>ulcers.)</p> <p>3.Social support and strain: sources of social support- family, friends, spouse. Support from sources of social support- understanding, caring, relying on sources, and sharing of worries with the sources.</p> <p>Strain from the sources of social support- critics, demands, letting down and getting on nerves of the sources.</p>	
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Conclusion

From the literature review done we found that social support cannot be brushed aside when psychological health is concerned. It has its effects on all the indicators of psychological health. Social support has indirect relationship with stress. The social support sources helps in coping with stressors. Social support does not have a physical appearance in most cases but still it influences the life of people a lot. The positive feelings for self and others, coping the stressors, depression, loneliness, anger, anxiety all these can be seen even if the loved ones are not present every time or even when one cannot share his/her feelings and worries every time. Depression and social support are also related indirectly. Persons receiving low social support are highly expected of getting depressed according to the Journal of Clinical Nursing. Perceived social support from friends was negatively correlated with loneliness. Pleasant socialized coping behavior increases the social support and decreases the loneliness (Kato 2002). There is a positive correlation between social support physical health, psychological health and quality of life. Similarly, all the variables of social support are related to strain, although social support exerts more effect on psychological wellbeing than on strain. People needs love affection and care when they feel lonely. They need suggestions and advice if they come across any uncertain situation in their lives. They need information to plan for future. Therefore, social support is an integral part of the society to gain a sound mental health and happiness. High level of social support acknowledges improved psychological

Health. It reduces the presence of the negative indicators of psychological health and increases the positive indicators of psychological health and wellbeing. This would help not only the individuals but the whole society to move on a positive path in their close relationships and also professionally.

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