



ISSN Print: 2394-7500
ISSN Online: 2394-5869
Impact Factor: 8.4
IJAR 2023; 9(5): 270-276
www.allresearchjournal.com
Received: 19-03-2023
Accepted: 30-04-2023

Deepika Kajal
Ph.D. Scholar, AIBAS, Amity
University Haryana,
Gurugram, Haryana, India

Rajesh Nair
Professor and Director,
AIBAS, Amity University
Haryana, Gurugram, Haryana,
India

Effect of perceived social support on psychological well-being of adolescents

Deepika Kajal and Rajesh Nair

Abstract

Social support altogether affects understudies' psychological wellbeing. The objective of the review was to assess the association between Adolescents' psychological prosperity and their view of social support. Unique, multiple physical, psychological, and social growth are traits of adolescence. Understanding adolescent well-being and the elements that affect it can help define and explain the best strategies to assist adolescent preparation for adult life. The ongoing review means to analyze what perceived social support means for adolescents' psychological wellbeing. Additionally, youth with both parents still alive and those who only have one parent surviving were compared concerning announced social support and psychological prosperity. In the study, the Warwick-Edinburgh Mental Well-being Scale (WEMWBS) and Multidimensional Scale of Perceived Social Support (MSPSS) were both translated into English. The study came to the conclusion that psychological well-being among Adolescents is significantly predicted by perceived social support. As per the discoveries, youngsters with one living guardian report less perceived social support and psychological prosperity than Adolescents with two living guardians. This study will have a big impact on family counselling and teen counselling. For scholars who are interested in researching various familial concerns, it will offer up new avenues.

Keywords: Adolescents, psychological wellbeing, perceived social support

1. Introduction

Due to weakening familial ties, smaller families, the erratic character of interpersonal connections, intense competition among peers, the breakdown of societal values, crime and violence, international terrorism, etc., the threat to the human psyche has increased over time in an unprecedented way. Young individuals are more prone than others to take the burden of today's issues, despite the fact that stress affects nearly every segment of society ^[1]. The main factor that raises stress levels in young adults is work. They deal with concerns like employment insecurity, challenges in their careers, high expectations, and peer pressure. High expectations from family, shifting roles and duties, the nature of their friendships and personal connections, societal pressure to get married and have families, among other factors, all add to their stress ^[2].

The time of adolescence marks the passage from childhood to adulthood. Rapid physical and psychological change characterises it. Adolescents undergo more stressful situations, possibly dangerous situations, and difficult social settings than children do. Conflicts with parents, siblings, and peers, financial strain, and academic success are some of the main stressors (e.g. academic failure, low achievement) ^[3].

Adolescents have a constant need to contact with others, communicate with them, and be supported by them. This assistance has a significant impact on their ability to survive, handle stressful life situations more readily, and develop problem-solving abilities for various life stages. The health of adolescents is essential to the health of society as a whole. Promoting juvenile well-being is essential for a happy childhood as well as a solid foundation for their future well-being as adults ^[4].

The impression of social support goodly affects psychological prosperity also. More significant levels of perceived social support might affect psychological wellbeing. Additionally, a student's psychological wellbeing may have an impact on their general mood, as well as their capacity to handle decisions regarding their academic career and stressful events in their work lives. One of the best methods for you and the individuals you support to

Corresponding Author:
Deepika Kajal
Ph.D. Scholar, AIBAS, Amity
University Haryana,
Gurugram, Haryana, India

maintain and develop a positive mental health is through a strong social support system. Therefore, a person with strong support experiences less loneliness and isolation and gains more self-confidence and a sense of value [5].

1.1 Perceived Social Support

The degree to which people think they can meet the needs of social interactions is known as perceived social support. Typically, relatives, companions, and soul mates fulfil these obligations. Children receive much-needed social assistance from their parents. Family support is the most crucial aspect of life for Adolescents. They need their parents' support, encouragement, and guidance as they grow. When one of the parents passes away, this support structure is destroyed [6].

Children receive much-needed social assistance from their parents. Maintaining mental and physical wellness requires social assistance. Numerous studies have demonstrated that among kids who had experienced abuse or victimisation from various cultural backgrounds, social support was inversely correlated with signs of poor psychological health. On the other side, teens' wellbeing is greatly enhanced by their friends' support [7].

Individuals' propensity for resilience is greatly enhanced by social support. The idea of resilience takes into account the existence of significant risks to a child's development. Risk variables are any circumstances that increase the likelihood of troublesome behaviours and unfavourable outcomes. Theorists contend that grieving children, their families, social networks, and environments all contain these risk factors [8].

1.2 Psychological Well-being

Playfulness, cheerfulness, resilience, optimism, and self-control are all aspects of psychological well-being that apply to people of all cultures. According to McCulloch (1991), psychological well-being encompasses all age groups' levels of pleasure, self-esteem, positive emotions, and social support [9].

Literature uses a number of definitions and explanations to define and explain the idea of wellbeing. It has for the most part been seen from an intra-individual outlook, as something that happens inside a person. Keyes (1998) demonstrated that psychological and social elements of the self are both a part of overall wellbeing. He identified five social components of wellbeing: Social Acknowledgment (i.e., having a decent outlook on others and tolerating them as they are), Social Completion (i.e., being quiet in the public eye and trusting in its true capacity for good development), Social Commitment (i.e., feeling like one brings something to the table for society and that this commitment is esteemed by others), and Social Cognizance (i.e., having an interest in the social world and survey it as rational) (accepting that one has a place, is embraced, has common interests with neighbours, and feels like a part of the neighbourhood). Thus, while being largely intra-personal, well-being impacts and is influenced by social circumstances, according to this perspective. From this viewpoint, accomplishing self-improvement, advancement, self-completion, self-articulation, and living in accordance with one's qualities are the foundations of prosperity [10].

1.3 Objectives of the study

- To research the impact of adolescents' perceived social support on their psychological health.

- To investigate how socioeconomic status, age, gender, and class affect psychological health.
- To examine average differences in psychological health and perceived social support between Adolescents who have both parents alive and those who have only one.

2. Review of literature

In a meta-analysis study, Chu, Saucier, and Hafner (2010) investigated the link between social support and wellbeing in youngsters and adolescents. The research's findings showed a statistically significant but minor link that was constrained by various well-being outcomes, such as academic success, behaviour issues, and psychological adjustment. The indicators of perceived social support have a stronger correlation with happiness. As the average age of the children and adolescents rises, the relationship between social support and wellbeing deepens. As a result, it was discovered that social support and wellbeing are more strongly correlated for female children and adolescents than for male children and adolescents [11].

Chinese university students were the subjects of Kong, Zhao, and You's (2013) examination on the intervening and directing impacts of worldwide confidence on the connection between social support and emotional prosperity. That's what the creators found though worldwide confidence completely intervenes the impacts of social support on adverse consequence, it just to some degree intercedes the job of social support on life fulfillment and beneficial outcome. Moreover, worldwide confidence weakened the positive however not the negative association between social support, life fulfillment, and positive effect. Along these lines, contrasted with understudies with unfortunate social support, those with solid social support are bound to take part in bigger worldwide confidence, which thus builds their life fulfillment and great effect [12].

In Malaysia, Sulaiman *et al.* (2013) looked at 315 individuals between the ages of 18 and 21 to determine the direct correlation between social support and coping mechanisms and well-being, which encompasses both positive and negative effect and life fulfillment. According to the findings of the structural equation modelling, Adolescents who receive support from their families and peers have positive effects rather than negative ones and high levels of life satisfaction. Thus, preserving a robust social network can improve Adolescents' well-being in terms of their happiness and sense of fulfilment in life [13].

In order to predict subjective wellbeing, Ronen, Hamama, Rosenbaum, and Mishely-Yarlap (2016) checked out at the impact of two survival techniques, poise and social support. 380 Adolescents from six Israeli coordinated middle school and secondary schools partook in the review. The outcomes showed that more prominent abstract prosperity in adolescents was anticipated by both the singular adapting asset of restraint and the natural adapting asset of social support. This was accomplished by both raising life satisfaction and positive affect while lowering negative effect. Additionally, it was discovered that social support might predict each of the three elements of subjective well-being. The study's findings were in line with earlier research on numerous social ties and social support, both of which were favourably associated with subjective well-being [14].

Sarriera, Bedin, Calza, Abs, and Casas (2015) examined various models that explained the relationship between these three constructs in order to examine the abstract wellbeing,

by and large life fulfillment, and perceived social support of Brazilian Adolescents. The view of social support from loved ones was found by the creators to be a significant part of Adolescents' prosperity in Brazil. Support from friends and family is thought to be crucial for adolescent growth. The network of supporters served as a crucial source of regard, consideration, respect, and group membership [15].

The impact of family structure, social abilities, and social support evaluations were analyzed by Leme, Del Prette, and Coimbra (2015) as expected indicators of young adult psychological prosperity in Brazil. A cross-sectional design was used to conduct a predictive correlation analysis on a sample of 454 Adolescents. The authors discovered a link between adolescents who receive more social support from loved ones and more elevated levels of wellbeing. The authors also proposed that during adolescence, family and friend support interact and complement one another while simultaneously influencing Adolescents' psychological wellbeing. As a result, a combination of factors that accounted about 38% of the variance was able to predict the Adolescents' psychological well-being, with social skills and social support ratings acting in concert to have an impact [16].

In Japan, Katagami and Tsuchiya (2016) checked out at the impacts of real and perceived support on competitors' psychological wellbeing. The discoveries showed that while perceived support was not viewed as an indicator of psychological prosperity, received support was positively connected with athletes' psychological well-being. Furthermore, there was a strong correlation between the two types of support-received and perceived. Furthermore, the discoveries showed that there was no association between certain self-mapping and support got. As a result, it was discovered that receiving assistance served as a silent predictor of athletes' psychological health [17].

3. Methodology

3.1 Procedure

Information was gathered from universities and colleges in the individual cities' public and private sectors. Both the immediate participants and the relevant authorities in the targeted institutions provided their informed consent. Following institutional approval, study participants were approached. Adolescents with single parents were weeded out using teachers and institutional officials. All of the participants were then told of the study's nature and objectives. Written informed consent was obtained, and subjects received instructions. They were asked to provide their initial responses, and they received guarantees on the privacy of the information. For their assistance, the participants were acknowledged.

3.2 Sample

Adolescents (N = 214) with ages ranging from 13 to 19 comprised the study's sample. Adolescents with a single parent and those whose parents are still alive made up an equal portion of the sample. The whole sample was gathered from various Indian cities. Understudies in secondary school and school, whose grade levels went from 10th to thirteenth, made up the sample. About 99% of youngsters attending high school and college are those whose parents are still alive. Conversely, just approximately 3% of the target group were Adolescents with a living single parent.

3.3 Research Tools

A booklet of scales was created based on the type of investigation. The study started with the use of the following scales.

a. Multidimensional Scale of Perceived Social Support (MSPSS)

The Complex Size of Perceived Social Support was used in the current review to estimate social support. It is a 12-item scale with three estimated subscales for family that are equal (Fam), companions (Fri), and life partners (SO). Things 1, 2, 5 and 10 are for Life partners, while things 3, 4, 8 and 11 are connected with the subscale of Family, things 6, 7, 9 and 12 are for Companions. The reaction design is a 7-point Likert scale, with 1 for firmly deviating, 7 for unequivocally concurring, and 4 for nonpartisan. The most elevated score is 84. Review have uncovered that the MSPSS has sufficient build legitimacy across tests areas of strength for and test-retest dependability.

b. Warwick-Edinburg Mental Well-being Scale (WEMWBS)

Warwick-Edinburg psychological prosperity scale Utilized was the Psychological Prosperity Scale. There are 14 things on this scale. On a 5-point Likert scale, members should check the crate that most precisely summarizes their encounters with everything throughout the course of recent weeks (1 = never, 2 = sometimes, 3 = incidentally, 4 = habitually, constantly). The scale has a base score of 14 and a greatest score of 70. Each thing gets a great score. The WEMWBS's general not set in stone by adding the scores for everything, which are given equivalent loads. In this manner, a higher WEMWBS score means a more elevated level of emotional well-being.

3.4 Inclusive criteria

The sample includes all the students of universities and colleges who lived in a family and was measured. If a family had two eligible offspring, both were included, for example, twins. This was crucial since it meant that each child had an equal chance of being chosen, which a fundamental principle of the survey design was. All Parents with children under the age of five were also interviewed.

3.5 Exclusion Criteria

School students declined to participate.

4. Results and Discussion

Table 1: For the WEMWBS and the RS, linear regression analysis of the multidimensional scale of perceived social support

Variables	Resilience			Psychological Well-being		
	β	ΔR^2	F	β	ΔR^2	F
Perceived Social support	.53*	0.28	75.71*	.55***	0.30	83.69***

* $p < .05$, *** $p < .001$

Perceived social support is used as a predictor variable in table 1 while versatility and psychological prosperity are utilized as result factors. The R^2 esteem of .28 shows that the predictor with $F = 75.71$ (1,213), $p.05$ can account for 2.8% of the variance in the dependent variable, resilience. According to the results, perceived social support ($r = .53$, $p.05$) significantly improves resilience. Similar to this, the

R2 value of .30 shows that the predictor with $F(1,213) = 83.69, p.001$, can represent 3.0% of the difference in psychological prosperity as the reliant variable. These

results suggest that perceived social support also has a significant favourable impact on psychological well-being ($=.55, p.001$).

Table 2: Adolescents' means SDs, and t-values on the MSPSS, RS, and WEMWBS when both parents are still alive and when just one parent is

Variables	Both parents alive		Single parent alive		t(210)	p	UL	LL	Cohen's d
	M	SD	M	SD					
Social support	66.40	13.85	61.03	14.16	5.27	0.003	4.13	10.64	0.47
Resilience	137.07	23.51	130.54	26.59	4.07	0.06	2.27	14.10	0.30
Well being	55.99	9.57	52.68	11.07	4.91	0.006	3.06	7.60	0.6

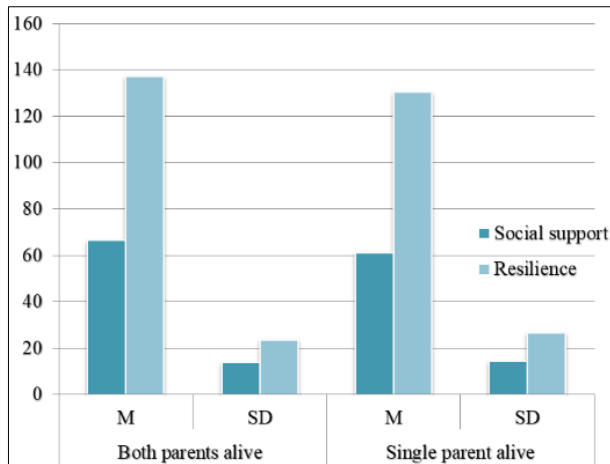


Fig 1: Means and standard deviations for adolescents both with a living parent and with just one living parent on a graphical representation from the MSPSS, RS, and WEMWBS

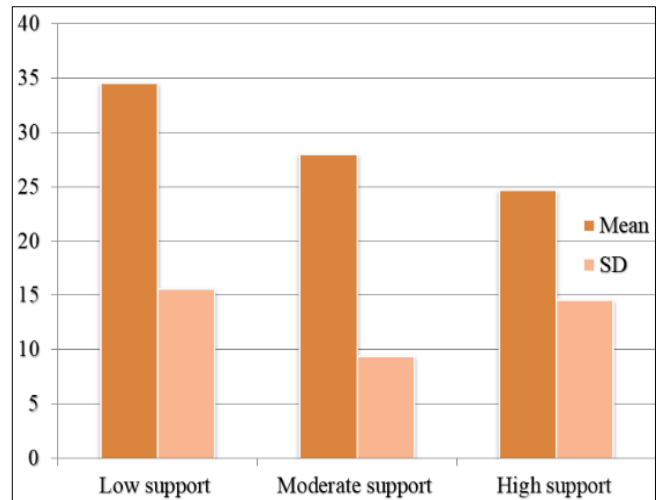


Fig 2: Levels of social assistance and their effects on psychological health are represented graphically in terms of means and standard deviations

According to Table 2, there are significant disparities in how psychological health, social support, and resilience are measured. Adolescents with the two guardians still alive report higher levels of perceived social support than those with only one parent still alive ($M = 66.40, S.D = 13.85$). Additionally, an independent sample t-test showed that teens with both parents still alive had higher levels of resilience also, psychological health than Adolescents having only one living parent ($M = 130.54, S.D = 26.59, 11.07$).

4.1 Perceived Social Support's Buffering Effect on Psychological Well-Being

The essential impact of a sense of social support was viewed as significant, with a little impact size, showing that psychological wellbeing is fundamentally more prominent for understudies who revealed compared to those who described moderate and low perceived social support, high perceived social support. Scholarly pressure variations in psychological health are affected based on the perceived level of social support, as proven by the more prominent importance level and bigger impact size of perceived social support than scholastic pressure [18]. The midpoints and departure from the perceived social support's average for psychological wellbeing are displayed in Table 3.

Table 3: The averages and ranges of the effects of social assistance on mental health

Level of Perceived Social Support	Mean	SD
Low support	34.53	15.58
Moderate support	27.98	9.41
High support	24.69	14.58

4.2 Psychological Wellbeing: Effects of Gender, Age, Socioeconomic Status, and Class Level

Table 4 displays the MANOVA findings, which show that there was no genuinely critical cooperation between age, class level, orientation, and financial status. Be that as it may, despondency ($F = 9.60, p 0.05$) and social brokenness ($F = 8.33, p 0.05$) showed distinctions in sexual orientation in psychological wellbeing. A subsequent free examples t-test with orientation as the autonomous variable and despondency as the reliant variable showed a huge impact, $t(200) = 5.46, p 0.01$ with females suffering greater depression than males, who experienced more depression on average ($M = 12.74, SD = 6.45$). An extra t-test involving orientation as the autonomous variable and social brokenness as the reliant variable uncovered that guys performed preferred socially over females ($M = 8.90, SD = 4.50; t(200) = 4.13; p 0.05$).

Additionally, it was discovered that socio-economic position significantly influenced psychological well-being, with the strongest associations seen for anxiety ($F = 7.90, p 0.05$) and social phobia ($F = 5.57, p 0.05$). Socioeconomic status significantly affected anxiety, according to a one-way ANOVA, $F(4, 201) = 9.31, p 0.01$ LSD post hoc investigation uncovered that the high socioeconomic status group's mean anxiety level ($M = 5.21$) was substantially lower than that of the middle class ($M = 5.79$) and the low socioeconomic status group ($M = 6.80$). According to this, pupils from high socioeconomic origins experienced less anxiety than those from middle-class and lower socioeconomic backgrounds.

A second ANOVA test revealed a statistically significant relationship between socioeconomic level and social anxiety, $F(4, 201) = 5.24, p 0.05$. Normal social fear was considerably lower among people with high financial status ($M = 4.90$) compared to those with intermediate socioeconomic status ($M = 4.92$) and poor socioeconomic status ($M = 5.55$), according to LSD comparisons. It could be closed from this that individuals in the high financial gathering announced fewer social anxieties than people in the working class, individuals in the low financial gathering.

Table 4: Age, class, gender, and socioeconomic status-based MANOVA of psychological well-being dimensions

	Wilks' λ	F	df	p
Age	2.94	2.96	6	0.61
Class level	2.95	2.78	14	0.72
Gender	2.72	4.47	8	0.05
Socio-economic status	2.69	4.05	14	0.04
Gender* Age* Class* SES	2.97	2.64	14	0.85

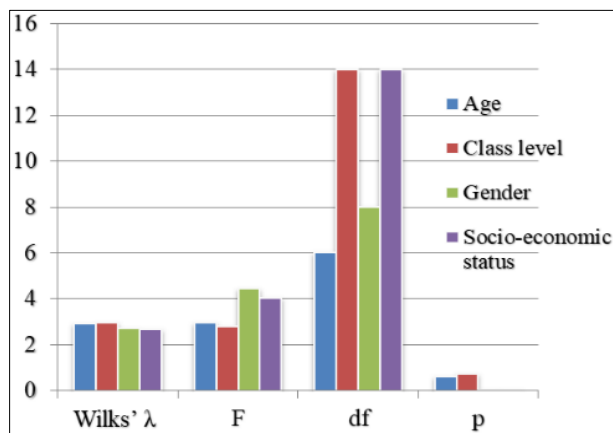


Fig 3: Graphical representation of MANOVA of Dimensions of Psychological Well-Being by Age, Class Level, Gender, and Socioeconomic Status

Examining how perceived social support affects resilience and psychological wellbeing in adolescents was the major goal of the current study. The study also sought to determine whether there were gender variations in each of the aforementioned factors. Additionally, it was planned to compare how Adolescents raised by mothers alone vs those raised by fathers alone felt resilience, social support, and psychological prosperity.

The present study's findings corroborated the objective, which stated that "Adolescents' perceived social support had a considerable great impact on versatility and psychological prosperity." The discoveries demonstrated that teens' resilience and psychological well-being are significantly predicted by perceived social support. The results of a study showed how crucial it is to distinguish between passive and active social support. According to the study's findings, social support has a vital role in preserving psychological health across different social networks.

Moreover, a review found remarkable varieties between the impacts major areas of strength for of poor perceived social support on psychological prosperity. At the point when it came to psychological prosperity, an elevated social support as regarded by the community was emphatically related with it, though there was little perceived social support related with poor psychological prosperity. It's crucial to examine how social support is understood and experienced in order

to determine what potential effects it might have on someone's psychological health. Individuals' perceptions of social support and their comprehension of it are both influenced by their past lives and by current social and familial circumstances.

The following prediction made by the centre was that "young children with a single-parent household will experience poorer levels of perceived social support, psychological well-being, and versatility when contrasted with Adolescents with the two guardians alive" [19]. The idea is supported by the study's findings. The idea that parental loss has a negative impact on children's psychological wellbeing and resilience is supported by research.

Most adolescents' emotional, private, and social lives are severely shaken by parental loss. Early adolescent children, however, try not to communicate their misery for longer time allotments and do not fully comprehend the finality of death. However, the consequences of losing a parent have a long-term impact. It is an encounter that marks the start of a period of profound transformation and redefinition in how people perceive themselves, their connections to others, and their position in the universe. Significant changes in their worldview, coping skills, and mental and physical health result from this transition. Additionally, it has been observed that teenagers who lose the parent to whom they have the strongest connection are more defenceless against the risk of bad psychological wellness, which thus builds the opportunity of gloom. Their sense of loss may cause them to withdraw from their social networks, which could lead to a diminished perception of social support.

The lack of a significant overall effect shows that the joined impacts old enough, class level, orientation, and socioeconomic status have no bearing on psychological wellness. However, the findings unmistakably demonstrated that socioeconomic class and gender had an impact on psychological wellbeing. In particular, depression and social dysfunction varied by gender, whereas anxiety and social phobia varied by socioeconomic position. The outcomes uncovered that young ladies showed more significant levels of sadness and social brokenness than young men, in accordance with prior examinations. This, in any case, didn't support the consequences of other prior examinations. Breaking down the orientation varieties in wretchedness and social brokenness as far as orientation job socialization is conceivable. While women in African societies are urged to sustain, submissive, sensitive, and to "sit and watch," guys are urged to be proactive, emphatic, blunt, and to take a stab at their opportunity and freedom consistently [20]. Young men are in this way almost certain than young ladies to do everyday undertakings (i.e., social working) easily and are less inclined to encounter wretchedness. Besides, ladies are socialized, conceivably normally, to grumble about even the littlest issues they meet, as opposed to men who are socially socialized to see whining as a frail disposition and "unmasculine" (for example gloom). Guys probably won't have revealed all or any of the issues they experience at home or at school accordingly.

It may be assumed that students from low-income backgrounds who have a negative image of social support are unable to resolve problems that could have been resolved with the help of their family members. This is on the grounds that there were contrasts in social support concerning financial status. Due to their socioeconomic situation, such parents are always focused on how to make

ends meet by working or looking for job, giving little to no think to their children's psychological wellness. Conflictingly, the outcomes uncovered that understudies from high financial foundations revealed less tension and social fear, and this may be because they felt more social support than people from middle-class and low-income groups did. It's a good idea to expect that guardians with more prominent instruction are bound to support their youngsters more, as parental education was previously regarded as a proxy for socioeconomic standing. More educated parents can provide for their children in a variety of ways thanks to improved jobs and earnings. It's interesting to note that the pupils' age and class level had no discernible impact on any aspect of their psychological health. This agrees with the conclusions of earlier research. The general lack of relevance may have been explained by the incorporation old enough and class level. It has been guaranteed that perceived social support, which extensively affects psychological prosperity, doesn't have a formative premise. Moreover, on the grounds that age and class/structure in universities are adroitly equivalent, included both in the analysis may have been superfluous, which may have contributed to the overall lack of significance seen.

5. Conclusion

Overall, the discoveries of the ongoing review demonstrated the significance of PSS for Adolescents' psychological growth. The results imply that PSS indirectly influences PWB in Adolescents. PSS was discovered to be an important predictor of PWB. Adolescents with positive social support perceptions had higher self-esteem, which in turn influenced their PWB. Additionally, the study discovered no appreciable gender differences for PSS and PWB. Boys and girls were more inclined to turn to their families for social support than to peers and other groups, among other sources of PSS. The recent discoveries have a number of significant ramifications. The results showed that PSS had an impact on Adolescents' PWB. The research could aid psychologists, educators, and counsellors in creating effective intervention plans to lessen adolescent psychiatric issues. Only family and close friends were taken into account when measuring perceived social support; other social groups such as teachers and churchgoers were left out. A more full comprehension of perceived social support might be caught by expanding the proportion of social assistance to incorporate backing from strict followers and close relatives. Regardless of this, the principal reasonable support that is effectively open by adolescents is estimated concerning perceived social support from loved ones.

Various investigations additionally reached the resolution that family specialists and experts shouldn't underestimate the effect of obedient mourning on grown-ups', adolescents', and youngsters' prosperity. They found that the demise of a parent causes incredible misery for adolescents and raises the gamble for low prosperity and adapting abilities. Additionally, a study found that the greatest risk factors for children developing psychiatric abnormalities are familial issues, such as a lack of parental support. It comes to the conclusion that after losing a parent, children, adolescents, and adults must deal with low psychological well-being and resilience as a result of parental loss.

6. References

1. Uchino BN. *Social Support and Physical Health: Understanding the Health Consequences of Relationships*, Yale University Press, New Haven; c2004.
2. Barnes W. The single parent's need for a social support network and how to acquire one; c2010 Nov.
3. Chu PS, Saucier DA, Hafner E. Meta-analysis of the relationships between social support and well-being in children and adolescents. *Journal of social and clinical psychology*. 2010;29(6):624-645.
4. Friedman. Wellbeing, ageing and immunity. In Segerstrom (Ed.) *the Oxford Handbook of Psychoneuroimmunology*. Oxford University Press: New York; c2012.
5. Garzouzie G. The psychological experiences of grieving for adolescents recently bereaved of a parent. *Masters Dissertation*; c2011.
6. Josefsson K, Jokela M, Cloninger CR, Hintsanen M, Salo J, Hintsala T, *et al.* Maturity and change in personality: developmental trends of temperament and character in adulthood. *Dev. Psychopathol*. 2013a;25:713-727.
7. Kashyap GC, Singh SK. Reliability and validity of general health questionnaire (GHQ-12) for male tannery workers: a study carried out in Kanpur, India. *BMC Psychiatry*. 2017;17(1):102.
8. Katagami E, Tsuchiya H. Effects of social support on athletes' psychological well-being: The correlations among received support, perceived support, and personality. *Psychology*. 2016;7(13):1741-1753.
9. Kendler KS, Myers J, Prescott CA. Sex differences in the relationship between social support and risk for major depression: a longitudinal study of opposite-sex twin pairs. *Am. J Psychiatry*. 2005;162:250-256.
10. Kong F, Zhao J, You X. Self-esteem as mediator and moderator of the relationship between social support and subjective well-being among Chinese university students. *Social Indicators Research*. 2013;112(1):151-161.
11. Leme VBR, Del Prette ZAP, Coimbra S. Social Skills, Social Support and Well-Being in Adolescents of Different Family Configurations. *Paidéia (Ribeirão Preto)*. 2015;25(60):9-17.
12. Ministry of Health Nepal, New ERA, ICF. 2016 Nepal demographic and health survey key findings. Kathmandu: Ministry of Health Nepal; c2017.
13. Musick Kelly. Flood, Mothering Experiences: How Single Parenthood and Employment Structure the Emotional Valence of Parenting. *Demography*. 2016;53(3):649-74.
14. Ronen T, Hamama L, Rosenbaum M, Mishely-Yarlap A. Subjective wellbeing in adolescence: The role of self-control, social support, age, gender, and familial crisis. *Journal of Happiness Studies*. 2016;17(1):81-104.
15. Sarriera JC, Bedin L, Abs D, Calza T, Casas F. Relationship between social support, life satisfaction and subjective well-being in Brazilian adolescents. *Universitas Psychologica*. 2015;14(2):459-474.
16. Sayar M. A longitudinal study of the relationship between perceived social support and psychological wellbeing of adolescent from low socioeconomic status.

- Unpublished Master Thesis. Boğaziçi University, Institute of Social Sciences. İstanbul; c2016.
17. Sood S, Bakhshi A. Relationship between physical well-being and psychological well-being in aged Kashmiri migrants. *International Journal of Multidisciplinary Research*. 2012;2(3):357-363.
 18. Sulaiman WSW, Kadir NBYA, Halim FW, Omar F, Latiff RA, Sulaiman WSW. Structural relations between personality traits, coping strategy, social support and well-being among adolescents. *Pertanika Journal of Social Science and Humanities*. 2013;21(5):121-134.
 19. Whitney C. Social supports among college students and measures of alcohol use, perceived stress, satisfaction with life, EI and coping. *Journal of Student Wellbeing*. 2010;4(1):49-67.
 20. Wu CH, Chen SH, Weng LJ, Wu YC. Social relations and PTSD symptoms. A prospective study on earthquake impacted adolescents in Taiwan. *Journal of Traumatic Stress*; c2009. p. 1-9.