

Correlational Study of Depression, Social Support and Resilience among University Students in Haryana during COVID-19

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ABSTRACT

Symptoms of depression have become more visible due to the lack of social support among people during the period of the pandemic. The purpose of this research was to investigate the relationship between depression, social support and resilience among university students in Haryana during the COVID-19 pandemic. A total of 100 university students living in Haryana participated in this web-based survey. A standardized e- questionnaire was generated using the Google Form, and a link was shared through social media—WhatsApp and Facebook etc. The results show that more social support is associated with less depressive symptoms and more resilience ability in students.

Keywords: *Depression, Social Support, Resilience, COVID-19*

The life and lives of people across the world have been substantially influenced by the outbreak of COVID- 19 especially after the declaration of a global pandemic by WHO. Therefore, most countries of the world together had implemented a series of anti-epidemic methods to stop the epidemic, such as closing public places, closing public transportation, constraining the travel overseas, and shutting down the entire transit system to prevent the transmission of highly contagious infections from human to human etc. During the period of lockdown, the experience of ‘home quarantine’ with the uncertainty of academic and professional careers has multifaceted effects on the mental health of students. During the ongoing period of the COVID-19 pandemic, academic and professional uncertainty and financial insecurity play a major role in developing depressive symptoms in university students.

Students experience slight ups and downs in their mood from time to time but when this tendency becomes deeper and constant then it demands attention for normality. It is one psychological disorder or mood disorder, depression is one of its types. In this pathology or mood disorder, a person experiences high swings in their emotional states that are more severe and persistent than is true for most people (Baron & Mishra, 2016). These critical

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situations required social help and support because social support has beneficial effects on both mental and physical health. Social support is defined as resources provided by another person. Social supports enable a person to face adversity. Adversity situations happen in everyone's life but some people find a way out of these situations and carry on simply but many easily 'bounce back. This tendency is known as Resilience.

Depression

In depression an individual experiences a low level of energy, low mood, loss of interest in pleasurable activities, weight loss and disturbance in appetite. It also has some symptoms like feelings of worthlessness, fatigue, insomnia, and loss of thinking and focuses on resistant thoughts of death and suicide (Baron & Mishra, 2016). Generally, 21.3% of women and 12.7% of men experience a depressive period during their lives (Kessler et al., 1994). Research reveals that probably 46% of college students are thought to have experienced depression and at some point to have warranted professional help (Beck & Youth 1978). Numbers of depressed people are treated as outpatients but some suffer in silence and solitude (Morgan & King, 1999).

Social Support

Social support is defined as the social and psychological support an individual gets from his/her environment (Family, friends, significant other, teachers, colleagues, neighbours, ideological groups) (Yildirim, 1997). Social support is defined as the help and resources provided by the person. When interpersonal relationships provide, psychological and materialistic resources to an individual, known as social support, it is a multidimensional construct.

Resilience

Resilience refers to the capacity for successful adaptation or change in the face of adversity. The concept of resilience expresses an individual's being able to overcome the negative events encountered successfully and being able to adjust to new situations (Dogan, 2015; oz, Bahadir Yilman, 2009). In many scientific fields like psychology, psychiatry, sociology and neuroscience, resilience is a research subject (Herrman et al., 2011). Resilience is a tendency to expect favourable outcomes despite serious threats to adaptation (Masten, 2001) American Psychological Association (APA) defines resilience as a process of adapting well in the face of adversity or significant source of stress such as familial and interpersonal issues, serious health problem or workplace and monitory constraints. It means "bouncing back" from difficult circumstances.'

REVIEW OF LITERATURE

Research reveals that perceived social support is a significant predictor of depression (Alsubaie et al., 2019). In another research, Mckee et al., 2001, found 155 women to describe perceived well-being and functional status during uncomplicated late pregnancy among socioeconomically lower women and examined the relationship of functional status to depression and social support. They found that there is a negative relationship between social support and depressive symptoms. Lee et al. (2004) Also identify the relationship between stress, social support and depression in the elderly. The subjects were 283 elderly adults over 60 in Seoul. The relationship between stress and depression had a positive correlation, but the relationship between stress and social support had no significant correlations. The relationship between social support and depression had a negative correlation. These results suggested that stress and social support deficits can be potential

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risk factors in old age depression. Research conducted in the Midwestern United States on 267 university students shows that Social support was negatively related to depression (Tennant et. al., 2015).

In another study, Greenglass et al. (2006) found that structural equation modelling showed that proactive coping was negatively associated with functional disability and with depression. Social support was positively associated with proactive coping and negatively with depression. Research on 307 Norwegian high school students, explore the relationship between frequent psychiatric symptoms and resilience factors. The finding reveals that a higher score on the resilience scale predicted a lower score on the depression, anxiety and stress scale after controlling the age and gender (Hjemdal et al., 2011). Some work demonstrated that psychological resilience and depression were negatively correlated, during the period of COVID-19, among university students, in turkey (Karasar & Canh 2020). Wang et. al; 2018 found that social support has a positive direct effect on self-efficacy and an indirect effect on psychological resilience in nurses. Research on 291 international students shows that African student has a higher level of resilience, optimism and social support than others (Sabouripour & Roslan, 2015).

METHODOLOGY

Participants

This research includes 104 students (48 Males, and 56 Females). They were selected randomly from all state universities of Haryana. Their education is from graduation to doctorate level. The age range of the sample is 20-30 years.

Tools

- **Beck's Depression Inventory-II:** (Beck et al., 1996) This BDI-II is a 21 items inventory for measuring the severity of depression in adults and adolescents above 13 years. The coefficient alpha of the BDI-II was 0.92 and the test-retest correlation was 0.93 for construct validity, the correlation between BDI-I and BDI-II was 0.93.
- **Multidimensional Scale of Perceived Social Support:** The multidimensional Scale of Perceived Social Support (MSPSS) was developed by Zimet et al. (1998). The scale, which is 7 points Likert type, consists of three sub-dimensions as social support from family, social support from friends and social support from significant others and 12 items. Reliability analysis conducted showed Cronbach alpha value to be .89. Internal consistency of the scale was found as .84 within the scope of this study.
- **Brief Resilience Scale (BRS):** (Smith et al., 2008) The 5 point Likert type scale consists of 6 items and one dimension for measuring the Resilience level of the individual. The internal consistency coefficient of the scale was found as .83. The internal consistency coefficient of the scale was found as .81 within the scope of this study.

Procedure

In this study, the sample includes 104 students (48 Male and 56 Females). They were selected randomly from all state universities of Haryana. Their education is from graduation to doctorate level. The age range of the sample is 20-30 years. They were informed about the study and consent was obtained from them. The following tools: Beck Depression Inventory-II (Revised), Brief Resilience Scale and Social Support Scale were administered to the participants. After the data collection, the appropriate statistical technique was used to

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analyze the data. Descriptive statistics and correlation was used to analyze the result of the study.

RESULTS

The results have been accessible and conversed under the following headings:

1. Descriptive Statistics (Mean, Standard Deviation)
2. Pearson Correlation

Table 1: Representing the Mean and SD of Variables among male participants (N1=48).

Variables	M	SD
Depression	9.25	10.33
Social support	61.92	15.59
Resilience	21.17	4.29

Table 2: Representing the Mean and SD of Variables among Female participants (N2=56).

Variables	M	SD
Depression	10.12	9.07
Social support	61.46	15.69
Resilience	19.50	2.84

Table 3: Representing the correlation between Variables (N=104)

Variable (1)	Variable (2)	r	P
Depression	Social Support	-.492**	.001
Depression	Resilience	-.309**	.001
Social support	Resilience	.622**	.001

** Significant at .01 level of significance

There is a negative correlation between depression and social support i.e., $-.492^{**}$ which is significant at .01 level. It means with the increase in social support there is a decrease in depression. A sample of 2020 participants responded to an online cross-sectional survey, the results reveal that individual has a higher level of social support, and they have a risk of raising depressive symptoms was 63% lower than those who reported a low level of social support (Grey et al.,2020). There is a negative correlation between depression and resilience i.e., $-.309^{**}$ which is significant at .01 level. It means with the increase in resilience there is a decrease in depression. Those patients (Breast cancer) are less depressed and have a higher level of resilience, so a higher level of resilience maybe work as a protective factor against psychological distress and depression (Ristevska- Dimitrovska et al., 2015). There is a positive correlation between social support and resilience i.e., $.602^{**}$ which is significant at .01 level. It means with the increase in social support there is a decrease in resilience to a significant level.

CONCLUSION

Finding suggests that an increase in social support can reduce the depressive symptoms in students because results reveal a negative correlation between depression and social support. There is a negative correlation between depression and resilience also. It indicates that when an individual gets appropriate social support, the symptoms of depression are much less.

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Students who have more resilience ability also have much fewer symptoms of depression. On other hand, resilience ability is high in those who get proper social support.

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Conflict of Interest

The author declared no conflict of interests.

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