THE RELATIONSHIP BETWEEN SELF-ESTEEM AND SOCIAL SUPPORT IN HIGH SCHOOL STUDENTS IN RASHT

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Abstract:
One of the most influential factors in adolescence is self-esteem which is influenced by many factors. The purpose of this study was to investigate the relationship between self-esteem and perceived social support among high school students in Rasht. In this cross-sectional descriptive-analytical study, 419 high school students in Rasht were randomly selected. The data were collected through a questionnaire consisting of three sections. The first part included the demographic characteristics of the students, the second part consisted of Coppersmith Self-Esteem inventory and the third section comprised the perceived social support standard questionnaire. Descriptive statistics, Mann-Whitney and Kruskal-Wallis descriptive statistics and multiple linear regressions were used to analyze the data. The significance level was considered P<0.05. The results showed that the mean total self-esteem scores of the sample were (34.4±6.68) and the mean score of perceived social support was (15.47±3.37). Spearman test results showed that there was a significant relationship between the family support (R = 0.488 and P<0.0001), peer support (R=0.240 and P<0.0001) and self-esteem. Given that there is a significant relationship between self-esteem and social support, understanding the ways of enhancing social support and ultimately self-esteem can positively influence the transition to adolescence stage.

Keywords: Self-esteem, Social support, Students

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INTRODUCTION:
Adolescence is an age-related developmental phase, a bridge between childhood and adulthood, and a periodic crisis in life. As a result, psychologists have long recognized it as the most important and essential stage in life [1,2]. Adolescence is associated with rapid personality changes that lead to the physical, psychological and social development of the individual [3]. One of the most influential personal factors during adolescence is self-esteem. Self-esteem as a potential protective factor –refers to a person’s general appreciation of his values and merits [4]. Self-esteem means a sense of self-respect, value and adequacy, and a personality trait that is characterized by optimism [5]. Positive self-esteem is associated with better adaptation to adolescent problems and transition, social well-being, and greater satisfaction with life [5-7]. Past studies have investigated the relationship between low self-esteem and nutritional disorders, high-risk behaviors and suicidal attempts [4]. The sociologists believe that self-esteem is not mere biological or psychological facts, but it has dimensions and social nature. Social factors not only can play an important role in the creation, maintenance and promotion of self-esteem, also can decrease self-esteem. In other words, there is no doubt that individuals are different in their vulnerability to low self-esteem. However, such differences are influenced by the social situation and developing self-esteem requires social support [8]. In the psychological texts, the concept of social support has been defined differently. Maslow considers social support as one of the individual’s fundamental needs. Sarason defines social support as one’s perceptions of being loved, wanted and valued by others and it also refers to the presence of people who are willing to help and help someone in specific situations [9]. Social support is studied in both forms of received and perceived social support. For received social support, the level of support received by an individual is examined, while for perceived social support, an individual’s understanding of the availability of support is measured. In other words, in different situations of life, one has the feeling and perception that there are people who can benefit from it [10]. Social support is awareness and emotion that is provided to the individual. It refers to the degree an individual feels being respected and belongs to a social network. [11]. Social support strengthens one’s belief that he is valued, loved, cared and approved by family and friends. In other words, one perceives that belongs to a network of mutual interactions [1]. Perceived social support is defined as the help received by an individual from his or her environment and is essential for the development during adolescence stage [4]. Available studies have shown that social support is one of the main prerequisites for the development of individuals. Social support includes personal, social, and family relationships. Over the past decade, social support has been identified as a key factor in adapting to problems [3]. People who do not receive adequate support are subject to depression, suicide, poor performance and behavioral problems [4]. Though self-esteem and social support have received wide attention due to their key role in adolescence stage, few studies have been carried out in Iranian culture. Moreover, the results of the available studies documented in different cultures have been conflicting. This study is an attempt to investigate the relationship between self-esteem and perceived social support among Iranian adolescents in Rasht city.

MATERIALS AND METHODS:
The present study is a descriptive-correlational study. The research samples consisted of 480 students male and female students aged 15 to 17 years old. At the time of data collection, the students were in the first, second and third grades of high school state and non-state high schools in the districts of one and two schools of Rasht city. The subjects were studying in the field of mathematical sciences, experimental sciences, and humanities in the academic year 2012-2013. The subjects were recruited through the method of cluster-random sampling. The inclusion criteria for this study were: a) Being 15 to 17 years old, b) studying either in one of the first, second and third grades of high school, c) having no physical or mental illness, and no apparent problems such as burn scars on the face, droopy eyelids or stuttering. Finally, the samples should obtain 4 or less than 4 on the eight items of the Lie scale in the Coppersmith Self-Esteem inventory. The data was collected through a questionnaire consisting of three sections. The first section included the demographic questions such as age, gender, height, weight, basic education, the field of study, average age, and the number of family members, education, and the occupation of parents. The second section consisted of Coppersmith self-esteem inventory. This questionnaire is a 58-item self-esteem scale. It has 4 subscales, and a lie scale. The four subscales of self-esteem measure the general self-esteem, social self-esteem, family self-esteem, and academic self-esteem. The scoring of each item falls on a 0-1 scale. The scores range from 0 (the minimum) to 50 (the maximum). The higher score obtained on the scale shows the higher level of self-esteem. In a study conducted on high school students, Sabet and his colleagues investigated the psychometric evaluation of Coppersmith Inventory. The reliability of the scale was reported 0.892 and this value after five weeks was 0.88 and after three
years was 0.7 [12]. The third section of the questionnaire comprised of perceived social support scale developed by Fleming and his colleagues. The questionnaire is a 24-item scale, including five subscales. The subscales measure peer support, neighbors support, family support, general support, and belief about the support. The scoring of the items falls on a 0-1 scale, all items measuring the acceptance of social support are scored 1, those items indicating the rejection of social support are scored 0. The score range is from zero (the minimum) to 24 (the maximum). A higher score on the scale shows more perceived social support. Fleming's perceived social support scale showed a confidence coefficient of 82% in a study conducted by Homan and colleagues on high school students [9]. Eventually, out of a total of 480 people, 61 subjects were excluded due to incomplete answers and incorrect answers identified by the items on the lie scale and finally, 419 people were recruited to participate in the current study (210 males and 209 females). SPSS software version 19 was used to analyze the data. The data were analyzed using descriptive statistics (frequency, percentages, mean, standard deviation, median, upper and lower limits) and inferential statistics (Kruskal Wallis, Mann-Whitney u and Spearman) and multiple logistic regression tests.

FINDINGS:
The findings show that almost two–fifths of the participants of the study (42.54%) were 16 years old, almost half (50.92) were girls and more than two – fifths of the participants (44.58%) were the first child of the family (39.66%). More than a third of the participants were studying experimental sciences and were in the third grade of High school, (37.11%), the mean GPA of the participants were 17.14 ± 1.93, the mean height of them was 169.48 ± 9.48 and the mean weight was 61.52 ± 14.16. More than a third of participants’ fathers were the middle school graduates (35.81%) and almost less than a third of participants’ mothers were the middle school graduates (35.02%), almost half of the participants’ fathers (46.1%) had freelance jobs, the majority (87.12%) of the participants’ mothers were housewives. The monthly income of 37.22% of participants’ family or more than two thirds was between 600 thousand to 1 million Toman. The average score of self-esteem of the participants was 34.34 ± 6.68. Comparing the scores on the subscales of self-esteem shows that the highest mean score was related to the family self-esteem (71.94 ± 15.98) while the lowest mean scores was obtained on the academic self-esteem (63.52 ± 21.88). The average total score of perceived social support reported by the participants was (15.47 ± 3.37). Comparing the scores on the subscales of perceived social support indicates that the highest mean score was related to the support from the family (79.28 ± 20.48) while the support from the neighbors had the lowest average score (40.76 ± 8.93). Spearman test results showed a significant positive correlation between the family support and self-esteem (R=0.488 and P<0.001). Similarly, there was a significant relationship between peer support and self-esteem (R=0.240 and P<0.0001). The results of multiple regression analysis showed by controlling demographic factors, peer support and family support were significantly associated with adolescent self-esteem (Table 1). 10% increase in the family support raised the average self-esteem 1.52 times. This value was statistically significant (P<0.0001), and 10% increase in the peer support raised the mean self-esteem 0.81 times, which was statistically significant (P<0.04).

<table>
<thead>
<tr>
<th>Social support variable</th>
<th>Peer support</th>
<th>Neighbor support</th>
<th>Family support</th>
<th>General support</th>
<th>Belief about support</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self esteem</td>
<td>R=0.240</td>
<td>R=0.067</td>
<td>R=0.488</td>
<td>R=0.024</td>
<td>R=0.013</td>
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<td>P&lt;0.0001</td>
<td>P&lt;0.166</td>
<td>P&lt;0.0001</td>
<td>P 0.662</td>
<td>P &lt; 0.778</td>
</tr>
</tbody>
</table>

Table 1: The Relationship between Self-esteem and Perceived Social Support Dimensions Based on Spearman Test
DISCUSSION:
This study was an attempt to determine the relationship between self-esteem and dimension of perceived social support in high school adolescents in Rasht. Based on the findings of this study, the mean score of self-esteem was 34/40 ± 6/68. In a study conducted by Soleimani et al., Students' mean self-esteem was 33.93 ± 4.32 [13]. The mean and standard deviation of self-esteem in the study of Sepahrian et al. (2013) were 15 ± 24.4 / 27 [14]. In the study conducted by Sharafy et al. (2015), the mean total self-esteem was 29.3 ± 6.54. These results echoed our findings [15]. In the study of Ani et al., who attempted to examine the role of gender and self-esteem in stress and emotional states among 1508 Norwegian teenagers, the average score of self-esteem was 63.26 ± 10.72 [16]. A careful perusal of literature shows that the mean of self-esteem scores of adolescents in high school in Rasht was higher than the mean scores of self-esteem reported by other researchers in Iran. In this research, the mean scores of self-esteem on the family subscale were higher than that of Saira Ba'ad. These results were consistent with the findings reported by Aklich on the dimensions of self-esteem. Aklich found that the lowest score of the sample was related to academic self-esteem (55%) and the highest self-esteem score was related to family self-esteem (67%). Based on the results of this study and the definition of family self-esteem (i.e. the extent to which each person value himself as a member of the family) [17], perhaps the high level of family self-esteem in this study can be associated with Iranian culture in which the family protect children until they are independent. In addition, if self-esteem is an individual's feeling and evaluation of his academic progress and ability in meeting the expectations of parents, schools, teachers [15]. Perhaps the importance of children's grades for the parents and their idealism about the academic achievement of their children can explain these results. It seems that there is a need for specific research on this issue because reducing self-esteem can affect learning, and there is a strong mutual relationship between self-esteem and learning ability. The average total score of perceived social support of the participants was (15.47 ± 3.37). Among the dimensions of perceived social support, family support had the highest average. In the study conducted by Hesam on the relationship between perceived social support, mental health and life satisfaction on Shahed (children’s’ of Iranian Martyrs) and Isargar (children’s’ of Iranian sacrifiers) students of state universities in Gorgan showed that the average social support in this group of students were (66.59 ± 12.53). Moreover, 56.9% of students with social support score obtained the higher score than the average [18]. The lower level of social support in the present study may be due to the cultural and age differences of the studied sample. In Hassam's study, the highest score (24 ± 437) on the social support was related to the family while the lowest score was associated with friends (45.20 ± 6.75) [18]. In this regard, Rostami and Ahmadnia sought to determine the extent to which perceived social support components predict the social adjustment of high school female students. In this study, perceived social support from the family showed the highest score and perceived social support from friends had the lowest score [19]. These results were inconsistent with the findings reported by Ebro et al. who investigated the relationship between perceived social support and self-esteem in adolescents in Turkey. They found that perceived supportive was mainly received from friends (77.54 ± 9.95) and the lowest level of perceived support was related to teachers (31/7 ± 69/33) [20]. Silin and his associates examined the relationship between perceived self-esteem and perceived social support among teenagers in Malaysia and investigated how gender can influence the relationship; they found that adolescents received more social support from friends than any others [20]. Perhaps this difference in the results reported in the reviewed studies could be associated with cultures. In the culture of Iran, the family plays a key role in the growth of children and increasing their self-esteem and the inconsistencies in studies of other countries and the lowest scores on the family subscale are related to cultural differences. In relation to the main goal of the research, the results showed that by controlling the effects of individual demographics, family on adolescent self-esteem, support of the family, and peer support of the sample, there was a statistically significant association with adolescent self-esteem. In line with the current study, Ebru and her colleagues reported that peer and family are the major predictors of self-esteem. They highlighted that differences between parents and adolescents are a major factor for self-esteem. In addition, support, cooperation and the affections received from parents and their relationship with adolescents were protective factors. They also reported that parents and peers were two main sources of social support and the adolescents received different support from each of them [20]. In contrast, in China Tian and colleagues carried out a study entitled Social support perception, well being and role of self-esteem among adolescents; they found that in early adolescence, parents play the most important role in the self-esteem of adolescents, and in the middle of adolescence, teachers play role in the health of adolescents [7]. The study by Tian et al. (2013) found that in the early teens, self-esteem plays...
a mediating role between parenting support and academic well-being, and in the midst of adolescence, self-esteem mediates the relationship between the friendship support and academic well-being. These findings are in line with the results of the current study [7]. Chi (2010) believes that the family can support its members in two ways. One is to provide the members with the necessary information and facilities, and the other is to share the excitement. Emotional support is considered a supportive nucleus for the development and progress of all activities. In relationships with peers, Children also share their knowledge about their ability to develop [21]. In 2015, Tahir et al. showed a strong positive relationship between self-esteem and social support. The degree of perceived social support from peers and parents was statistically correlated with self-esteem [22]. In 2011, Lian et al showed that the subscale of social support from peers had the highest mean, and there was a positive relationship between self-esteem and social support [23]. Kaplan sees social support as an attachment that increases skill, offers guidance, and affirmative feedback. The results of the research show that benefiting from desirable social support and understanding the adequacy, availability and even satisfaction with social support is very important and can address the adolescents’ psychological well-being needs in adulthood [24].

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