Examining the Effect of Perceived Social Support on Student Mental Health in Somaliland

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Abstract: The aim of this study, conducted in Somaliland, was to explore the relationship between perceived social support and students’ mental health, specifically focusing on stress, anxiety, and depression. This research has been conducted in a correlation quantitative design. In the context of the challenges and opportunities university students face, this research sheds light on the vital role of psychological well-being. In Somaliland, where official health statistics are scarce and mental health is often overlooked, this investigation addresses an important gap in understanding. This study, conducted in Hargeisa, delved into the impact of perceived social support on students’ mental health. Employing a correlational quantitative design, data was collected from 366 students in both public and private universities using Google Forms. The findings unveiled a robust, albeit inverse, relationship between perceived social support and stress, anxiety, and depression levels among students. One crucial recommendation stemming from this research is the inclusion of mental health education and awareness activities in the curricula of all educational levels. These findings underscore the pressing need to prioritize mental well-being in educational institutions, setting a foundation for students to thrive academically and socially. In a world where academic pressures and social dynamics continue to evolve, nurturing the mental health of university students is an investment in their future success and overall well-being.

Keywords: perceived social support, depression, anxiety, stress, Somaliland, university.

Introduction

Students' mental health is a fundamental aspect of their overall well-being, characterized as "the effective functioning of mental processes in thought, mood, and behavior, enabling productive activities, positive social interactions, and the ability to adapt, change, and cope with adversity" (Hersi et al., 2017). Depression, a common and treatable condition, exerts a profound impact on one's emotions, thoughts, and behaviors, resulting in despair, loss of enthusiasm for once-enjoyed activities, and potential mental and physical complications (Torres, 2020). Stress, as defined by the World Health Organization, encompasses feelings of anxiety or mental pressure stemming from challenging situations that, when managed effectively, can serve as a catalyst for personal growth (2023). Anxiety, ranging from mild to severe, is a universal experience at some point in life, triggered by circumstances such as exams, medical evaluations, or job interviews. Notably, depression and anxiety often coexist, contributing to strong and uncontrollable feelings of fear, unease, or panic, lasting for extended periods and interfering with daily functioning. Somaliland, a Sunni Muslim nation with a clan-based structure and a substantial nomadic population, declared independence from Somalia in 1991 but remains internationally unrecognized. Its population, ranging from two to 3.5 million, grapples with infrastructural and administrative challenges. Despite the region's dire health statistics, mental health is omitted from official health indicators. A survey in Hargeisa, the capital, revealed that 21% of families care for a relative with a severe mental disorder (Sheriff et al., 2010). Despite these severe mental health challenges in Somaliland, it has received limited global attention since it declared independence in 1991 following a civil war (Abdillahi et al., 2019). For college students, this phase can be stressful, with the demands of separation from their family of origin, academic pressures, job commitments, and family responsibilities. Many students in such circumstances experience their first mental health or substance use issues or an exacerbation of pre-existing symptoms (Pedrelli et al., 2014).

Higher education students are particularly vulnerable to mental disorders, with the onset of symptoms often occurring before their 20s and peaking between ages 18 and 25. A majority of full-time bachelor students fall within this age group. Furthermore, suicide ranks as the second leading cause of death for young people. A 2015 assessment by the National Union of Students reported that eight out of ten students had mental health concerns in the previous year; however, it did not provide a classification of these issues, leaving a significant gap in understanding (Brown, 2016).
This study addresses a critical research gap by examining the impact of perceived social support on the mental health of students in Hargeisa/Somaliland's public and private higher education institutions. Emerging adulthood is a critical phase during which individuals learn to take responsibility for their daily lives; however, college students face increasingly complex challenges that can trigger psychological disturbances. These challenges include heightened expectations, parental pressures, peer influence, evolving social dynamics, identity formation, engagement with novel ideas, and interactions with unfamiliar individuals. Additional daily stressors may encompass difficulties in time management, evolving family dynamics, dissatisfaction with performance, feelings of worthlessness, loneliness, anxiety about the future, and cognitive disarray (Singhal & Prakash, 2021).

Most mental health issues originate during childhood, with 75% of all mental disorders manifesting before the age of 25, including depression and anxiety. A substantial portion of young people, particularly those aged 18 to 19, apply to universities in the UK, constituting the university student population (UCAS Analysis and Research, 2014). Consequently, these students are at a heightened risk of experiencing mental health problems, necessitating early recognition and accessible, efficient intervention (Kessler et al., 2007, Brown, 2018).

The World Health Organization has highlighted the negative impact of a lack of social support, leading to higher morbidity, mortality, psychological distress, and reduced well-being. This study explores how students' perceived social support can alleviate psychological distress. Social support, in the face of increasingly self-centered and isolated lifestyles, is regarded as a critical factor in promoting well-being, even among those experiencing significant stress. Aspects such as the quality of relationships, assistance roles, and subjective life satisfaction all contribute to the multifaceted concept of social support (Khatiwada et al., 2021).

The concept of perceived social support centers on the idea that support is readily available when needed. Students' ability to cope with the challenges of university life is significantly influenced by the social support they receive from family, friends, and the academic community. Research suggests that students who perceive social support favorably are less likely to experience mental health issues, and higher levels of social support correlate with improved psychological well-being (McLean et al., 2022).

A person's perception of social support can measure their trust in the availability of assistance when needed and the tangible support received from others. A lack of social support is associated with various psychological
issues, including physical complaints, depression, anxiety, attention to social problems, and low self-esteem. Social support appears to be crucial for protecting against life's stressors and promoting well-being and personal growth (Roohafza et al., 2014).

When the literature is examined the studies focusing on mental health types of social support and students’ mental health following an empirical analysis and conceptual framework were looked into, it was found the link with regard to social support and mental well-being has been the subject according to several researches, while the link between social support and mental well-being has been explored, the underlying dynamics of the relationship between perceived social support and stress, depression, and anxiety among university students in Somaliland have yet to be comprehensively investigated, addressing a significant gap in the existing literature.

The results of this study can contribute to the fields of psychology and education as well as provide university administrators with an opportunity to assist students as they pursue their academic goals proactively. This entails recognizing the value of social support from friends, family, or significant others to guarantee that students receive the best possible assistance during their time enrolled in the higher education institution.

**The aim of the study**

The aim of this study, conducted in Somaliland, was to explore the relationship between perceived social support and students' mental health, specifically focusing on stress, anxiety, and depression. In this direction, answers to the following questions were sought in the research.

1. Is there a relationship between perceived social support and students' mental health in students in private and public universities?
2. Is there a relationship between perceived social support and depression experienced by students in private and public universities?
3. Is there a relationship between perceived social support and anxiety experienced by students in private and public universities?
4. Is there a relationship between perceived social support and stress experienced by students in private and public universities?
Significance Of The Study

The connection between mental health and social support has been the subject of numerous studies, yet the intricate dynamics linking perceived social support and stress, depression, and anxiety among university students in Somaliland remain unexplored. Understanding this relationship is vital for personal growth, well-being, and effective mental health support. Social support appears to play a central role in human development, helping individuals navigate life's challenges (Roohafza et al., 2014).

This research is valuable for Somaliland's population, researchers, and mental health professionals, shedding light on the complexities of students' mental health in Hargeisa and contributing to a broader understanding of the connection between perceived social support and mental well-being.

Methodology

Research Design

This research examined perceived social support and its impact on student’s mental health in Hargeisa. The design of the research was a correlational quantitative design. Quantitative research provides us purpose information that may be expressed in brief via statistics and figures (Williams, 2021).

Participants

The participants consisted of students from two higher education institutions in Hargeisa, the capital city of Somaliland. Currently, there are 22 universities and colleges in Somaliland (Sande, 2022). The researcher's target population included students from higher education institutions. To facilitate a comparison between students in public and private universities, the researcher selected one private and one public university. The researcher determined the sample size for both universities, totaling 366 students, including both male and female participants. According to Vanjari sample size adheres to the guideline of having a sample size larger than 30 and smaller than 500 (n.d.).

Data Collection Procedure

In this study, the data necessary to measure the influence of perceived social support on student mental health was collected through the distribution of questionnaires. These questionnaires were distributed to all selected members of the universities in Hargeisa. Data collection was carried
out using Google Forms, and a non-probability, convenience sampling technique was employed. This approach provided the flexibility to select participants from the target population who could provide accurate information and were best suited to provide the necessary data. Additionally, it proved to be a cost-effective and time-saving method.

To reach the participants, the researcher utilized Google Forms, which was approved by the Near East University Ethics Committee with the reference number NEU/ES/2023/1027 on 4th April, 2023. The researcher communicated with the participants through social media platforms such as WhatsApp groups in both universities. The researcher shared the questionnaires with these groups, and participants completed the forms before submission. Furthermore, secondary data was gathered from various external sources that already existed, including literature reviews from books, the internet, and academic journals.

**Data Collection Tool**

In this study, data essential for assessing the influence of perceived social support on student mental health was collected through the distribution of questionnaires. The data collection process utilized Google Forms and adopted a non-probability, convenience sampling technique. This method afforded the flexibility to select participants from the target population who could offer accurate information and were best suited to provide the necessary data. To engage with the participants, the researcher leveraged Google Forms and communicated with them via social media platforms such as WhatsApp groups within both universities. The questionnaires were shared within these groups, allowing participants to complete the forms before submission. Additionally, secondary data was obtained from various pre-existing external sources, including literature reviews from books, internet resources, and academic journals. The researcher used two structured questionnaires in Google Forms to collect data that aimed to describe the relationship between variables making up the conceptual model of this study and the researchers took permission to use from both developers.

The first one is a widely used screening 4-point Likert-type tool. This questionnaire is composed of 21 questions designed to assess depression anxiety and stress. It’s called the “Depression Anxiety and Stress Scale” (DASS21), it was developed by Lovibond and his colleagues. (Moya et al., 2022). The second scale is the Multidimensional Scale of Perceived Social Support (MSPSS) is a brief survey tool used to assess how well someone
perceives being supported by friends, family, and a significant other. This 12-question scale was developed by Zimet et al. (1990).

**Reliability Analysis**

Cronbach’s Alpha was used to measure the reliability of the 12 items of Perceived Social Support and the 21 items in Depression, Anxiety and Stress the result found demonstrates that are dependable since there is universal agreement that a score of 0.6 to 0.7 represents a reasonable degree of reliability and a value of 0.8 or higher, a very excellent level. However, scores above 0.95 may imply redundancy, which is not necessarily good (Ursachi et al., 2015).

Hence Cronbach’s alpha value of the 12 items is 0.840 (84%) it shows that the data has 84% reliability and also performed reliability analysis on student satisfaction items Cronbach’s alpha value is 0.87 (87%).

<table>
<thead>
<tr>
<th>Variables</th>
<th>Items</th>
<th>Cronbach’s Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSS</td>
<td>12</td>
<td>.84</td>
</tr>
<tr>
<td>DASS21</td>
<td>21</td>
<td>.87</td>
</tr>
</tbody>
</table>

The Cronbach’s alpha value of the 12 items is 0.840 (84%) it shows that the data has 84% reliability and also performed reliability analysis on student satisfaction items Cronbach’s alpha value is 0.87 (87%).

**Data Analysis**

Both descriptive and inferential statistics were used for the data analysis, and SPSS, a statistical package for social science was used to help to analyze data.

**Results**

**The relationship between students’ perceived social support and student’s mental health**

The following tables (Table 2 and Table 3) represent the regression analysis findings showing how the independent variable (perceived social support) explains the dependent variable (student mental health).
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Table 2 Model Summary of Perceived Social Support and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.625a</td>
<td>.390</td>
<td>.388</td>
<td>17.408</td>
</tr>
</tbody>
</table>

a. Predictors: (Constant), psstotal  
b. Dependent Variable: dass21total

Table 3 ANOVA Summary of Perceived Social Support and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>70565.356</td>
<td>1</td>
<td>70565.356</td>
<td>232.857</td>
<td>.000b</td>
</tr>
<tr>
<td>Residual</td>
<td>110307.168</td>
<td>364</td>
<td>303.042</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>180872.525</td>
<td>365</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: dass21total  
b. Predictors: (Constant), perceived social support

The ANOVA analysis presented in Table 3 demonstrates that the linear combination of predictor variables, specifically perceived social support, significantly predicted the mental health of students in higher education institutes \( F(1,364) = 232.857, p < 0.05 \). This result indicates a robust relationship between the total perceived social support and the mental health of students in higher education institutes.

Furthermore, when considering the independent variable perceived social support as a block, as seen in Table 2 yielded a coefficient of multiple correlation \( R \) of .625 and a multiple correlation square \( R^2 \) of 0.390. This suggests that 38.8% of the total variance in students' mental health can be attributed to the combination of perceived social support (adjusted \( R^2 = 0.388 \)).

Table 4 Relative Contributions of perceived social support and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Std. Error Beta</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>154.456</td>
<td>4.411</td>
<td>.000</td>
</tr>
<tr>
<td></td>
<td>psstotal</td>
<td>-6.880</td>
<td>.451</td>
<td>-15.260</td>
</tr>
</tbody>
</table>

a. Dependent Variable: dass21total

To assess the relative contribution of perceived social support, standardized coefficients were employed to determine its impact on students' mental health. As indicated above, perceived social support holds a
relative contribution of -62.5%. (Table 4). This implies that for every 1-unit increase in the predictor (perceived social support), there is a decrease in the outcome (student’s mental health). With a p-value of less than 0.05, this aligns with the research question and provides support for the established relationship.

*The relationship between student’s in private and public universities perceived social support and depression experienced by students*

The tables (Table 5-7) below represent findings of regression analysis explaining how the Independent variable (perceived social support) explains the dependent variable (depression).

**Table 5 Model Summary of perceived social support and depression**

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.554a</td>
<td>.307</td>
<td>.305</td>
<td>7.22810</td>
</tr>
</tbody>
</table>

a. Predictors: (Constant), psstotal  
b. Dependent Variable: depression

**Table 6 ANOVA Summary of perceived social support and depression**

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Regression</td>
<td>8410.198</td>
<td>1</td>
<td>8410.198</td>
<td>160.975</td>
<td>.000b</td>
</tr>
<tr>
<td>Residual</td>
<td>19017.310</td>
<td>364</td>
<td>52.245</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>27427.508</td>
<td>365</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: depression  
b. Predictors: (Constant), psstotal

The ANOVA model presented in Table 6 demonstrates that the linear combination of predictor variables, specifically perceived social support, significantly predicted depression in higher education institute students ($F(1,364) = 160.975$, $p < 0.05$). This result indicates a strong relationship between the total perceived social support and depression among higher education institute students.

Furthermore, when considering the independent variable perceived social support as a block, as shown in Table 5, it yielded a coefficient of multiple correlation (R) of 0.554 and a multiple correlation square (R2) of 0.307. This suggests that 30.5% of the total variance in depression can be accounted for by the combination of perceived social support (adjusted R2 = 0.305).
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Table 7 Relative Contribution of Depression and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Std. Error</td>
<td>Beta</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>51.312</td>
<td>1.832</td>
<td></td>
</tr>
<tr>
<td></td>
<td>psstotal</td>
<td>-2.375</td>
<td>.187</td>
<td>-554</td>
</tr>
</tbody>
</table>

a. Dependent Variable: depression

In order to determine the relative contribution of perceived social support, the standardized coefficients were used to determine the relative contribution of the students’ mental health. As shown above in Table 7, perceived social support has a relative contribution of -55.4%. This means that for every 1 unit increase in predictor (perceived social support), there is a decrease in the outcome (depression) hence, with p< value .05 the research question is supported.

The relationship between student’s in private and public universities perceived social support and anxiety experienced by students

The tables below (Table 8-10) represent findings of regression analysis explaining how the independent variable (perceived social support) explains the dependent variable (anxiety).

Table 8 Model Summary of perceived social support and anxiety

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted Square</th>
<th>R Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.559a</td>
<td>.313</td>
<td>.311</td>
<td>7.018</td>
</tr>
</tbody>
</table>

a. Predictors: (Constant), psstotal

Table 9 ANOVA Summary of Anxiety and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Regression</td>
<td>8153.151</td>
<td>1</td>
<td>8153.151</td>
</tr>
<tr>
<td></td>
<td>Residual</td>
<td>17925.887</td>
<td>364</td>
<td>49.247</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>26079.038</td>
<td>365</td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: Anxiety
b. Predictors: (Constant), psstotal

The ANOVA model presented in Table 9 reveals that the linear combination of predictor variables, specifically perceived social support, significantly predicted anxiety in higher education institute students (F(1,364) = 165.557, p < 0.05). This result indicates a strong relationship between the total perceived social support and anxiety among higher education institute students.
Furthermore, when considering the independent variable perceived social support as a block, as shown in Table 8, it yielded a coefficient of multiple correlation (R) of 0.559 and a multiple correlation square (R2) of 0.313. This suggests that 31.3% of the total variance in anxiety can be accounted for by the combination of perceived social support (adjusted R2 = 0.311).

Table 10 Relative Contribution of Anxiety and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Std. Error</td>
<td>Beta</td>
</tr>
<tr>
<td></td>
<td>t</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>52.924</td>
<td>1.778</td>
</tr>
<tr>
<td></td>
<td>psstotal</td>
<td>-2.339</td>
<td>.182</td>
</tr>
<tr>
<td>a. Dependent Variable: Anxiety</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

To assess the relative contribution of perceived social support to anxiety, standardized coefficients were employed. As indicated above, (Table 10) perceived social support holds a relative contribution of -55.4%. This implies that for every 1-unit increase in the predictor (perceived social support), there is a decrease in the outcome (anxiety). With a p-value of less than 0.05, this supports the research question.

The relationship between student’s in private and public universities perceived social support and stress experienced by students

The tables below (Table 11- 13) represent findings of regression analysis. explaining how the independent variable (perceived social support) explains the dependent variable (stress).

Table 11 Model Summary of perceived social support and stress

<table>
<thead>
<tr>
<th>Model</th>
<th>R</th>
<th>R Square</th>
<th>Adjusted R Square</th>
<th>R Std. Error of the Estimate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>.553*</td>
<td>.306</td>
<td>.304</td>
<td>6.598</td>
</tr>
<tr>
<td>a. Predictors: (Constant), psstotal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
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Table 12 ANOVA Summary of Stress and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Sum of Squares</th>
<th>df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Regression</td>
<td>6995.561</td>
<td>1</td>
<td>6995.561</td>
<td>160.698</td>
</tr>
<tr>
<td></td>
<td>Residual</td>
<td>15845.805</td>
<td>364</td>
<td>43.532</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>22841.366</td>
<td>365</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: stress
b. Predictors: (Constant), psstotal

The ANOVA model in Table 12 reveals that the linear combination of predictor variables (i.e. perceived social support) significantly predicted anxiety of higher education institutes students (F(1,364) =160.698, P<0.05). This means that there is a strong relationship between the total perceived social support and depression of higher education institutes students. Also, the independent variable perceived social support as a block in Table 11a yielded a coefficient of multiple correlation (R) of .553 and multiple correlation square (R2) of .306 This shows that 30.6% (adjusted R2=.304) of the total variance of stress was accounted for by the combination of perceived social support.

Table 13 Relative Contribution of Stress and Student’s mental health

<table>
<thead>
<tr>
<th>Model</th>
<th>Unstandardized Coefficients</th>
<th>Standardized Coefficients</th>
<th>t</th>
<th>Sig.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>B</td>
<td>Std. Error</td>
<td>Beta</td>
<td>30.037</td>
</tr>
<tr>
<td>1</td>
<td>(Constant)</td>
<td>50.219</td>
<td>1.672</td>
<td>-.553</td>
</tr>
<tr>
<td></td>
<td>psstotal</td>
<td>-2.166</td>
<td>.171</td>
<td></td>
</tr>
</tbody>
</table>

a. Dependent Variable: stress

In order to determine the relative contribution of perceived social support, the standardized coefficients were used to determine the relative contribution of the stress. As shown above in Table 13, perceived social support has a relative contribution of negative 55.4%. This means that for every 1 unit increase in the predictor (perceived social support), there is a decrease in the outcome (stress) hence, with p< value .05 and the research question is supported.

Discussion

The researcher performed correlation analysis and regression analysis to explain the research questions. To determine the relationship between perceived social support and depression, the researchers performed a correlation analysis revealing a significant negative association. These results
align with previous studies conducted by Grey and his colleagues (2020), who similarly found a negative correlation between psychological depressive symptoms and strong perceived social support, along with the use of adaptive coping mechanisms (Kandeğer et al., 2021).

Similarly, the relationship between perceived social support and anxiety was also found to be significantly negatively related, consistent with a study by Zhao (2022).

The researcher also examined the relationship between perceived social support and stress, revealing a significant negative correlation between the two variables. These results are in line with previous studies, which have consistently demonstrated negative correlations between perceived social support and stress, anxiety, and depression (Shaw & Gant, 2002).

Subsequently, the researcher performed a regression analysis, which indicated a significant negative relationship between perceived social support and students' mental health. Specifically, an increase in perceived social support corresponded to a decrease in students' mental health. Perceived social support accounted for 38.5% (adjusted $R^2 = 0.385$) of the total variance in students' mental health in Somaliland's higher education institutes. This suggests that perceived social support significantly affects students' mental health, corroborating a study by Nuntapon and colleagues, which found that perceived social support influences depression, particularly among college students with ADHD symptoms (2021).

On the contrary, poor perceived social support from important people, family, and friends has been identified as a significant risk factor for postnatal depression among postnatal women (Muhammad et al., 2021). Additionally, perceived social support was found to have a substantial impact on stress, anxiety, and depression among Nepalese nursing students, with depression exhibiting the highest association (Priscilla & Samson).

Notably, the results of the study indicated that perceived social support had the highest relative contribution to anxiety, as supported by Zhu's study (2023) and other research demonstrating the inverse correlation between perceived social support and anxiety. These findings suggest that elevating social support levels could be beneficial in managing anxiety.

One study found that the perception of social support had an inverse correlation with depression within the university student population, emphasizing the protective role of social support against stress and depression (Yaolin, 2023). Additionally, another study identified a negative correlation between parental social support and academic stress among students, suggesting that increased parental support may potentially reduce stress levels (Romualdas, 2022). These findings underscore the significance
of social support in alleviating stress among university students, highlighting the need for interventions and strategies that promote social support to enhance student well-being (Prashanth, 2016).

Lastly, the study observed a significant difference in mental health levels, with students in private universities in Hargeisa, Somaliland, and reporting higher satisfaction with their higher education institutes. This aligns with the assertion that undergraduate medical students from all types of universities, including private ones, may experience varying degrees of depression and anxiety (Nadia, 2017).

Conclusion

The study's findings indicate a significant inverse relationship between perceived social support and depression and anxiety among students. Furthermore, perceived social support was shown to have a substantial impact on the mental health of students in higher education institutes in Somaliland. As a result, all research questions have been effectively addressed, and the study contributes to the current understanding of how perceived social support affects student mental health. Consequently, it is concluded that perceived social support plays a vital role in influencing students' mental health, emphasizing the importance of social support from family, friends, or significant others. This highlights the significance of optimizing the support provided to students while attending higher education institutions, fostering an environment that recognizes the value of social support.

Limitations and Recommendations

The research was conducted in Somaliland, focusing on students from Hargeisa's public and private universities. While the findings offer valuable insights into the relationship between perceived social support and mental health within this specific context, caution should be exercised in generalizing these results to a broader international or cross-cultural setting.

The sample size, although carefully determined based on practical considerations and statistical guidelines, is confined to the universities in Hargeisa. Therefore, the generalizability of our findings beyond this specific population may be limited. Additionally, the cultural and socio-economic context of Somaliland may influence the observed relationships between perceived social support and mental health, making it imperative to interpret the results within this specific cultural framework.
To address these limitations, we recommend future research endeavors to replicate the study with larger and more diverse samples that include participants from various regions and cultural backgrounds. A broader representation of the student population across different contexts would enhance the external validity of the findings and provide a more comprehensive understanding of the relationship between perceived social support and mental health. The findings of this study present an opportunity for university administrations to take proactive steps in supporting students during their academic journey. Recognizing the importance of social support and ensuring that support mechanisms are maximally utilized within the institution can significantly contribute to students' well-being. It is hoped that this study will serve as a catalyst for further research on the role of social support in enhancing students' mental health. Future studies could explore the environmental factors that influence how individuals perceive social support and how these perceptions impact their mental health. Investigating mediating and moderating variables, such as self-esteem and coping mechanisms, may shed more light on the relationship between the Depression, Anxiety, and Stress Scale (DASS) and perceived social support. Additionally, combining both qualitative and quantitative research methods could provide a more comprehensive understanding of how individuals experience perceived social support and its effects on mental health. Finally, a strong recommendation is made for educational institutions to incorporate mental health education and awareness into their curricula. Educating students on the importance of mental health and how to seek assistance when needed is crucial. Furthermore, training faculty and staff to recognize signs of mental health distress and equipping them with the knowledge to guide students toward appropriate support services are essential, this holistic approach can help create a more supportive and mentally healthy academic environment.

References


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