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Investigating the predictability of social support and self-esteem on the resilience of students with chronic illness in the family

Aref Najafi, Fatemeh Ebrahimi Belil1

Abstract:

BACKGROUND: Since living with a person with a chronic illness in the family can affect the mental state of students, it is necessary to help students by determining and increasing predictors of resilience, followed by increasing their resilience and self-esteem. It protects them from experiencing physical, mental, and educational problems. Aim of this study was determining of predictive level of social support and self-esteem with resilience in students of University of Medical Sciences.

MATERIALS AND METHODS: This cross-sectional, descriptive, analytic study was conducted in 2019 on 220 students of University of Medical Sciences, Ardabil, Iran. The statistical population included 3500 students. Purposeful sampling was performed on students who were studying and had a chronic patient in the family. Demographic, social support, resilience, and self-esteem questionnaires were used to collect data. To analyze the results, the mean, standard deviation, Pearson's correlation test, Kolmogorov-Smirnov test, and linear regression test were used.

RESULTS: Students had a high mean social support, resilience, and self-esteem. The results showed that the correlation coefficient between resilience and social support was 0.411, and also, the correlation between resilience and self-esteem was 0.396. The results showed that self-esteem had a greater positive effect on resilience than perceived social support.

CONCLUSION: The present study concluded that the variables of social support and self-esteem had a direct relationship with students' resilience. Based on this, steps can be taken to strengthen and improve students' resilience by improving the perceived support and self-esteem of students.

Resilience, self-esteem, social support, student

Address for correspondence:

Student Research Committee, School of

Nursing and Midwifery. Ardabil University of Medical Sciences, Ardabil,

Iran, ¹Department of

Ardabil University of

Medical Surgical, School

of Nursing and Midwifery,

Medical Sciences, Ardabil,

Dr. Fatemeh Ebrahimi

Department of Medical Surgical, School of Nursing and Midwifery, Ardabil University of Medical Sciences, Ardabil, Iran.

E-mail: f.ebrahimi@arums.

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Introduction

Illness is one of the challenges that many ■people face and prevents them from their activities and daily life.[1] Chronic disease is a long-term disease that causes physical changes in the body and limits the patient's functions. Chronic disease is usually incurable, and its treatment period is long and recovery stages are difficult; in some cases, there is no definitive treatment for it.[2] According to the classification

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made by the Ministry of Health in 2019, common noncommunicable diseases include cardiovascular diseases, cancers, chronic lung diseases, diabetes, kidney diseases, mental illnesses, home accidents, violence, sensory diseases, back pain, and diseases caused by alcohol and drugs. Chronic diseases have many effects on people's lives.[3]

These diseases disrupt the process of life and related adaptations, and due to the effect of the disease on the client and the family, the dynamics of the family also change.

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In a systemic view of the family, a problem for each member of the family will also affect other members of the family^[4] and generally bring about fundamental changes in the normal life of the family.^[5]

Chronic illness involves the family with multiple tasks, preparation and coordination of care plans, responsibilities, worries, service and care costs, social isolation, loss of social opportunities, absenteeism from work and education, and physical and emotional problems. [6] Moreover, caring for and living with a chronic patient is associated with many problems such as burnout; anxiety and depression; disruption of activities, recreation, and social communication; disability; family isolation; loss of hope for social support; disruption of family relationships; and decreased self-esteem and resilience. [1,7,8]

Studies show that the level of resilience in a family with a chronic patient is lower than the average of this variable in the general population. Studies show that when a family member becomes ill, their resilience is also affected by exposure to chronic illness-related problems. [9] Resilience means maintaining, restoring, or promoting mental and physical health following the changes that occur after a devastating illness or loss. Also, resilience is defined as skills, characteristics, and capabilities that enable a person to adapt to hardships, problems, and challenges. [9,10]

Resilience is not only stability against injuries or threatening conditions, but also the active and constructive participation of a person in the environment, and it makes people in difficult situations use their existing capacities to achieve success in life and overcome existing challenges. It also makes people use it as an opportunity to empower themselves.^[11]

Resilient people overcome difficulties and dangers in life. [12] In other words, resilient people show more health and independence. They are able to think for themselves and make practical decisions. They believe in giving their environment. They adapt to environmental changes and quickly return to recovery after the stressors are removed.

Resilient people are emotionally calm, have the ability to deal with adverse situations, have full resources available to deal with life's problems and stresses, and are less exposed to mental and emotional disturbances.^[13]

The suffering of illness is not understood and tolerated by all members of the family in the same way, and this is related to the existence of resilient components such as communication within the family, social support, spending time with other family members, humor, religion, spirituality, loyalty, and so on.^[10,14]

One of the variables affecting resilience is social support. Studies show that social support has a significant correlation with resilience. Social support is described as various types of help provided by family, friends, and others.^[13,15]

Social support is a network of communication that provides camaraderie, cooperation, and emotional empowerment and is a kind of awareness. As a result of this kind of awareness, one believes that s/he is cared for and loved and has value, credibility, and respect. Social support is a very broad concept that can have many applications in different physical, psychological, and social aspects of humans and increases their physical, psychological, and social well-being.[16] Shin and Lee's study shows that perceived social support generally allows a person to cope with problems and recover from adversity(21). The greater the number of support resources (family friends and others) and the amount of assistance, the greater is the person's ability to adapt to his/her problems and the better is their health. Studies have also shown that social support can increase people's resilience. [17-19] Studies also show that people who are more supportive have better health.[12]

Another variable that can affect resilience is self-esteem. It is a part of a person's self-concept that includes cognitive, behavioral, and emotional aspects; it refers to how a person thinks about or evaluates himself. [20,21] In fact, it is the degree of approval, value, and judgment that individuals have toward their values. [20] A review of studies shows that people with higher self-esteem are more resistant to life issues, problems, and stress than people with low self-esteem and are more likely to succeed. [22,23]

People with high self-esteem feel powerful and valuable in different areas of life and they are sure that their efforts will pay off. They see most of the good aspects of problems and do their utmost to take control of things and overcome them. Also, these people have more resistance to life issues, problems, and psychological pressures, and as a result, the probability of their success in doing things is higher.^[16]

Health-care students face many stressors during their educational experiences, such as various pandemics, hospital environment, caring for dying patients, interacting with others, and living with a person with a chronic illness in the family that can affect the mental state of students. So, it is necessary to create conditions by recognizing the factors affecting them, ^[24] so that they can increase their abilities and contribute to the growth of the country. Helping students by determining and increasing predictors of resilience, followed by increasing their resilience and self-esteem can prevent their Physical,

psychological, and academic problems and thus reduce waste Education costs. [25,26]

Therefore, due to the increase in the number of people with chronic diseases and due to the fact that the family is the most valuable and vulnerable resource for disabled patients and family members also play a major role in supporting their patients, strengthening the family members and using flexible models are important. Adaptability and resilience in the family seem to be essential and knowing the nature and influencing factors of their resilience, especially social support and self-esteem, is of great importance. Therefore, this study was designed and conducted with the aim of determining the predictive level of social support and self-esteem with resilience in the students of University of Medical Sciences who have a chronic patient in their families.

Materials and Methods

Study design and setting

The present study is a descriptive cross-sectional study of correlation type that was conducted in 2019 with the participation of 201 students of University of Medical Sciences, Ardabil, Iran.

Study participants and sampling

The statistical population included 3500 students, and the number of samples was determined using Cochran's formula of 345 people. Purposeful sampling was performed on students of medical, nursing, health, and paramedical schools. Inclusion criteria included being employed in one of the colleges and having a chronic illness (internal diseases: diabetes and rheumatism, asthma and allergies, cancer, mental illness) in the family. A total of 220 students completed the questionnaires, and 201 questionnaires were entered into the software. First, a short interview was conducted with students about having a chronic patient in the family. If there was a chronic patient in the family and the student was satisfied and interested, s/he could enter the study. Then, the objectives of the research and confidentiality of the information of the questionnaires were fully explained to the candidates, and finally, the research questionnaires were provided to them.

Data collection tool and technique

Demographic, social support, resilience, and self-esteem questionnaires were used to collect data. The social support questionnaire consisted of 12 questions, each of which had five items: strongly agree (score 5) agree (score 4), have no opinion (score 3), disagree (score 2), and strongly disagree (score 1). A score between 12 and 20 indicated a low level of perceived social support. A score between 20 and 40 showed a moderate level of perceived

social support. A score above 40 indicated a high level of perceived social support. In Afzalan's[27] (2014) research, the reliability of the questionnaire by Cronbach's alpha method was 0.083. This scale measures perceptions of social support adequacy in three important sources: family, friends, and others. Questions 3, 4, 8, and 11 measure the source of family support, questions 6, 7, 9, and 12 measure the source of friends' support, and questions 1, 2, 5, and 10 measure the source of support from important others. The Connor and Davidson Resilience Questionnaire consists of 25 questions, and each question consists of four items with a score of zero meaning completely false, a score of 1 meaning rarely true, a score of 2 meaning sometimes true, a score of 3 meaning often true, and a score of 4 meaning always true, and the test scores range from 0 to 100. Higher scores indicate more resilience of the subject. In a study conducted by Samani^[28] et al. (2006) among students, its reliability was reported to be 0.93. Rosenberg Self-Esteem Questionnaire consists of 10 questions, and each question consists of four items, that is, strongly agree, agree, disagree, and strongly disagree, and its validity and reliability was approved on Shahid Chamran university dormitory students. Its validity and reliability with the results of internal consistency coefficients was 0.84 in the total student sample, 0.87 in male students, and 0.80 in female students. Cronbach's alpha was assessed after 30 questionnaires were completed by 30 students participating in the study. After completing the questionnaires, coding was done and data were entered into Statistical Package for the Social Sciences (SPSS). To analyze the results from the mean, standard deviation was used. To measure the correlation between research variables, Pearson's correlation test was used. For finding normality of the data for performing the regression test, Kolmogorov-Smirnov test was used. To find the contribution of predictor variables in predicting resilience, the linear regression test was performed using SPSS 16 statistical software.

Ethical consideration

All participants provided informed consent, and the study protocol was approved by the Human Ethics Committee of IR.ARUMS.REC.1398.265.

Results

Participants' sociodemographic characteristics

A total of 220 students completed the questionnaires, and 201 questionnaires were entered into the software. The demographic characteristics of the participants are given in Table 1.

The Table (1) shows that most of the participants in the present study were girls (143, 71.1%) and singles (184, 91.5%). Moreover, 32% of the participants in the present

study belonged to the School of Nursing and Midwifery. Also, 43.3% of diseases in students' families were related to internal diseases such as diabetes, goiter, rheumatism, and so on. The average age of students was 21.49 years.

Table 2 shows that students had a high mean social support. Students' resilience and self-esteem were also high. Among the dimensions of social support, family support had the highest mean with a mean and standard deviation of 16.99 ± 2.79 , which indicates a high level of social support. Furthermore, the average resilience of students was 56.94 with a standard deviation of 1.54.

To determine the normality of data distribution, Kolmogorov–Smirnov test was used, which showed that the variables of resilience, social support, and self-esteem had a normal distribution (P < 0.05). The results of the correlation between the variables of resilience, social support, and self-esteem are given in Table 3.

Table 1: Frequency distribution of research units by gender, marital status, relevant faculty, type of family illness, and semester

Variable	Number	Percentage
Gender		
Female	143	71.1
Male	58	28.9
Marital status		
Single	184	91.5
Married	14	7
Other cases	3	1.5
College		
Nursing	65	32.3
Medical	37	18.4
Paramedical	48	23.9
Health	51	25.4
Type of disease		
Cardiovascular	84	41.8
Internal diseases (diabetes, goiter, rheumatism, and others)	87	43.3
Asthma and allergies	21	10.4
Mental illness	6	3
Cancer	3	1.5
Semesters		
Odd semesters	145	72.1
Even semesters	56	27.9

Table 2: Descriptive indicators of the variables of social support, resilience, and self-esteem in students

Variable	Score (mean±SD)	Score range		
Dimensions of social support				
Family support	16.99±2.7	4-20		
Friends support	14.92±3.37	4-20		
Other resources support	14.81±3.62	4-20		
Social support	46.72±7.51	13-60		
Resilience	56.94±1.54	25-100		
Self-esteem	21.07±5.11	0-30		

SD=standard deviation

The results showed that the correlation coefficient between resilience and social support was 0.411 and the correlation between resilience and self-esteem was 0.396. Among the dimensions of social support, the highest correlation was obtained for other support sources, except family and friends (r = 0.354). To analyze the linear regression analysis, the variable of resilience as an independent variable and the variables of social support and self-esteem as dependent variables were entered into the model as a process. The results of linear regression analysis are given in Table 4.

Table 4 shows that the total variance explained by the model for the social support variable was 0.270 and the perceived social support variable significantly predicted resilience (β = 0.698, P < 0.05). Moreover, the self-esteem variable of 7% could predict the resilience of students with chronic illness in the family (β = 0.971, P < 0.05). Besides, the standardized beta coefficient showed that when the control factors were kept constant, self-esteem had a greater positive effect on resilience than perceived social support, social support (0.343), and self-esteem (0.325).

Discussion

The results of the study showed that students' social support, resilience, and self-esteem have a high mean, which is in line with the results of studies by Behzadfar *et al.*^[26] and Bagci *et al.*^[27,29] In explaining this finding, we can refer to Maslow's view that providing social support increases people's self-esteem and helps them to more effectively confront with their individual and social problems and conflicts. Naturally, the greater the number of these supportive resources and the amount of assistance provided to the individual, the greater his/her ability to adapt to his/her problems.^[26]

The results of the study showed that the social support variable significantly predicted resilience, which was also observed in the study by Narayanan^[30] and Onn Social support modifies the effects of stressful events and leads to the experience of positive emotions. The higher the level of support a person receives from others, the more resilient he/she is.

The results of the study showed that among the dimensions of social support, the mean of family support dimension was higher than other dimensions, which is consistent with the findings of Behzadfar *et al.*^[26] and Lakzaei and Reid31who stated that strong ties with family and friends are widely associated with resilience.^[31] In explaining this finding, it can be pointed out that the family with an active presence of the individual can provide this platform to increase the individual's resilience by providing social support.

Table 3: Relationship between resilience, social support, self-esteem, and dimensions of social support in students

Variables	Resilience		Self-e	Self-esteem		Social support		Dimensions of social support				
							Family support		Friends		Other sources	
	R	P	R	P	R	P	R	P	R	P	R	P
Resilience	1	0.000	0.396	0.03	0.411	0.01	0.316	0.00	0.290	0.001	0.354	0.003

R=correlation coefficient

Table 4: Determining the relationship between variables using linear regression analysis

Variable	В	SE	SE Beta		ADSR ²	P	Watson	
							camera	
Social support	0.698	13.15	0.343	0.270	0.262	0.000	1.988	
Self-esteem	0.971		0.325	0.270		0.000		
SE=Standard error, ADSR ² =Adjusted <i>R</i> Square								

The greater the number of support resources and the amount of assistance provided to the individual and the clearer and more confident the person is about potential assistance, the greater the ability to adapt to their problems.

This finding also contradicted the results of the study of Narayanan and Onn31 which showed that perceived social support from friends was a stronger predictor of resilience than family.^[31]

Furthermore, on examining the relationship between social support and resilience, there was a direct and significant correlation between them, which is consistent with the results of the study by Lakzaei and Reid^[31] Paknahad and Ebrahimy, [32] and Weidong et al. [33] In other words, with an increase in the score of social support, the score of students' resilience increases. These results are in line with the results of the studies of Paknahad and Ebrahimy^[32] and Sabouripour and Roslan.^[34] This means that students' resilience is influenced by friends, family, relatives, and special people in their lives who support them financially and emotionally. Moreover, in explaining this point, it should be said that the support of family, friends, and important people in students' lives, as well as strong social relationships and interactions can help a person to face and adapt better to life issues. According to the results of the present study and other studies, it can be stated that informal support and the perception and efficiency of family and friends as sources of support can play an essential role in curbing and reducing stress. Thus, the protective umbrella of family, friends, and important people in the life of students, as well as strong social relationships and interactions can help a person face and adapt better to life issues. A possible explanation in this regard is that social support may reduce the harmful effects of stress in two ways. First, social support reduces psychological stress by i immunization the individual against experiencing stressors before they occur. If one has a rich social network in terms of advice, resources,

and financial support, potential stressors are not a cause for concern. It won't be because of him. Secondly, social support networks act as a shield against mental pressure. Knowing and being sure that a person can take refuge in a social network during mental pressure gives him/her the possibility to make life events less threatening. Finally, social support can increase people's resistance against the negative effects of stressful factors.

The results showed that students have a high average self-esteem. Also, students' resilience and self-esteem have a high level, which is in line with the results of the study of Asgari *et al.*^[35] Explaining this finding, it can be said that human beings experience the desire to have self-esteem as a basic need.^[5]

Self-esteem is the core and structure of a person's psychology that protects him/her against anxiety and provides him/her with peace of mind. Likewise, as a protective shield, it protects the person against stress and negative stressful life events. A person with a high sense of self-respect is easily able to face external threats and stressful events without experiencing negative stimulation and disintegration of the psychological organization.^[31]

The findings also showed that there was a direct relationship between self-esteem and resilience. The results of the study are in line with the findings of Soheylizad *et al.*^[5] In explaining this relationship, it can be said that high self-esteem increases personal abilities and self-sufficiency and also increases a person's resilience. Self-esteem reduces a person's passivity and causes adaptation and better management of challenges and individual problems thus predicts resilience's passivity and causes adaptation to problems, and challenges the person with problems, and better management of individual problems, and thus predicts resilience.

Limitation and recommendation

The limitations of this study were the limited statistical population, the small number of samples, and the large number of questions. Also, since few studies have been conducted on the relationship between social support and self-esteem and student resilience, the biggest limitation of the present study was that it was not possible to compare its results with the results of other studies. Therefore, it is recommended that more studies

be done in this regard and the results of the studies be compared with each other. Also, as there is a relationship between the variables of social support and self-esteem and resilience, it is possible to take action by identifying the risk factors and conducting educational programs in various dimensions to increase social support and self-esteem in young people, and accordingly, resilience is also improved.

Conclusion

Since the variables of social support and self-esteem are directly related to student resilience, plans can be made to strengthen and promote resilience by promoting perceived support and students' self-esteem. Since various factors can affect students' resilience, it is suggested that more research be done on other contributing factors. The present study investigated the predictive value of social support and self-esteem on resilience, and the findings of this study are proof of the importance of social support and self-esteem in promoting resilience. Acceptance by the members of society and support from family and friends are important sources for resilience. The results showed that self-esteem is also one of the predictors of resilience; so, by improving the perceived support and self-esteem of students, plans can be made to strengthen and promote resilience. Since various factors can affect students' resilience, it is suggested that more research be done on other effective factors.

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Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms Oral and written. In the form, the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest

There are no conflicts of interest.

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