

## The Relationship between Social Support and Academic Self-Efficacy of Students with Mental Health

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**Abstract:** The main objective of this study investigated the relationship between social support and mental health of students with academic self-efficacy was the Islamic Azad University of Ahvaz. The study sample consisted of 400 undergraduate students at the Islamic Azad University of Ahvaz were selected through sampling. Collect data from the scale of social support and questionnaire Khvkaramdy students and the Mental Health Inventory is used. Results of Pearson correlation coefficient showed that psychological variables, social support and self-efficacy has a significant positive relationship. ( $P < 0 / 05$ ). Results of multivariate regression analysis showed that social support and self-efficacy had a significant share of students directly based upon the provision of mental health. The variables of social support and self-efficacy, mental health at the University are expected.

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### 1.Introduction

Health, by definition the World Health Organization statement of case in which the person physically, mentally and socially healthy, and in him any symptoms of the disease and neuroticism observed to be (The world health reports. 2009). The definition of health means that Health assessment, not only traditional indicators of the health (mortality rate) and (illness) can be given, but must also consider the quality of life of people went (Saxena S, O'Connell K. 2002).

One of the psychological and physical resources, communication is satisfactory. People who have more social support, lower mortality, lower risk for being diagnosed with psychological distress and psychiatric disorders and the mental and physical health are better (Dennis, 2003; Svlbrg and Tvrys, 2001; Karadymas, 2006; Marino, satiety, Rayvv Alksvpvlvs, 2008; IAP and Dyvyly, 2004). Research shows that social support can affect health (mental and physical) is the direct and indirect Dashdh (Karadymas and Kalantzy, 2004; Jknvz, 2004). Social support can also increase the efficacy of education and academic stress is reduced (Karadymas,2006). Many complex human behaviors and social support have an important influence on the way people Are doing their social roles are Demographic studies suggest a relationship between mental health status, their perception of social support. Many studies on the potential beneficial effects of social support can have on people, has focused. (Kaufman, Kosberg, Leeper& Tang, 2010).

The traditional model of social support, three models of bumpers (bumper), the main effect and mediation model is included. The effect is to cushion the social protection of individuals against stressful

experiences can support. Shock stress, reduce negative effects of stress on health is. In fact, social protection prevent or reduce stress by providing better resources to deal with the stress. Also, by improving social support and encourage healthy behavior, reduce stress (IO, Lai and Lao, 2009 and Farn, 2005). Model raises the impact of situational factors (eg social support, empathy for others) or certain personality characteristics (for example, being social) can contribute to reducing the negative effects of stress, be. Dygrayn point that social support, there are the diseases caused by stress, can have a protective effect (Stein and Larvz, 2005, Marino et al, 2008; Manning and Fvsylyr, 1999; Hvlahan and Hvlahan2003).

The main effect model, social support through providing positive experiences and sense of self and stability in social life, has a beneficial effect, in this model, it is assumed that the lack of social support, stress can cause this model, the expression creates positive social support for people who are supported and can communicate this way with health. Overall, according to this model, social support because of positive affect, sense of predictability, stability in living situations and the promotion of self worth on the health effects (Karadymas, 2006, Marino et al, 2008; IAP and Dyvyly, 2004). Mediated effects model, social support as a variable that indirectly (for example through self-efficacy) on the health effects, considers, under the mediation effect, indirectly through social communication: 1- Strengthening perform a positive duty, 2 - to provide alternative experiences and learning viewed through Benchmarking of 3 - Provide opportunities for social comparison; 4 - teaching coping strategies and positive commentary about the person of his ability;

5 - Interpretation of positive arousal Emotional and 6 - to encourage cognitive restructuring through a collaborative guidance, influence on health (IO et al, 2009; Bynayt and Bandura, 2004; Dennis, 2003; Saltzmn and Hvlahan,2002).

Qanvng model assumes that stress, texture features that affect the perception of stress. We caused emotional responses, cognitive, behavioral and physical events is that we (Cassidy, 1999). Also, the Hvbvl, Mvnyr and Dvnahv (1995, quoted from the IAP and Dyvyly, 2004), the indigenous people are motivated to maintain their individual and social resources, and when these resources are threatened or be reduced, are experiencing stress.

One of the other variables that affect health status (mental and physical) person affects efficacy. Efficacy of Bandura, the most fundamental human essential mechanism for managing and controlling the events that affect her life (and Kysantas Zimmerman, 2005). While high self-efficacy is associated with better health (Dennis, 2003), low self-efficacy with symptoms of anxiety, depression and psychosomatic symptoms above are associated with (Bynayt and Bandura, 2004). Vega, Miranda and Hvq (1985; quoted Svlbrg, Brvyn, Vylarl, Knyl and Davis, 1993) was proposed as a mechanism of self-efficacy plays an important role in facilitating mental health. Efficacy as a mediator, compatibility students who are experiencing stress, will facilitate. Students believe themselves to be efficient, time on task management and the demands of academic and emotional - stress reduction - on the impact (Bandura, 1988; quoting Zimmerman, 2000).

Academic self-efficacy judgment about his ability to organize and perform a variety of instructional design task, it is called. Individuals with high academic self-efficacy than students with lower academic self-efficacy, are more confident that they can carry out training assignments. High levels of academic self-efficacy, leading to higher scores and persistence to complete the assignments. Students with high academic competence, performance and compatibility have a better education. On the other hand, educational effectiveness, to help students in stressful situations. Students with higher academic self-efficacy, compatibility problems and are less anxious and able to deal more effectively with stress, Zaha are students (Bandura, 1997; quoted Bynayt and Bandura, 2004). Efficacy not only on how the threats affect the organization, but they also affect the compatibility of individuals with high self-efficacy, stressful events can cause chaos in front of (Bynayt and Bandura, 2004, Marino et al, 2008).

What seems clear, one of the major orientation in psychology today, to prevent illness and maintain mental health, because of the benefits, reducing the

human costs will be Vmady. The new trend in psychology today as health psychology, extensive research and publish papers and books in this field abroad, it is confirmed. Due to the growing Iranian students in the universities, if they could identify factors that influence mental health, could improve its results in the micro and macro planning, educational, social, cultural, health and enhance mental health - physical and prevention of disease in Iranian students, benefited. on what was said, was to study the relationship between social support, students will examine the efficacy of education and mental health.

## 2. Material and Methods

Statistical population, sample and method of implementation:

This study investigated the correlation. Psychological variables in this study is considered as the criterion variable of academic self-efficacy and social support are as predictive variables. Statistical Society in this study were all students of Islamic Azad University of Ahvaz in the year to 90 undergraduate students were employed. After the necessary explanations about the objectives of their research and cooperation of students' self-efficacy questionnaire (CASEA), the scale of social support (SSI) and the mental health questionnaire (SCL90-R) responded.

### Measurement tools

**Academic self-efficacy questionnaire (CASE) and I Franmn** (1918, quoted Tryvatan, 2002): This questionnaire is designed to measure students' academic self-efficacy beliefs. Academic self-efficacy questionnaire has 33 questions and based on a Likert scale of 5 degrees. To answer questions, students should be one of the letters A, B, C, D, E (high confidence that the continuum Tapayyn - to do things above - has been sorted) with drawing a circle, are specified. She and Franmn (1988) to check the reliability of the questionnaire, it was conducted on 88 students, and reliability of this scale with the 8-week retest on 90/0 won (quoting Tryvatan, 2002). Prsshnanmh concurrent validity of the use of two criteria do any homework and enjoy each task is obtained, each of which have been raised by self-efficacy theory (and I Franmn, 1988; quoted Tvyvatan, 2002). Choi (2005) internal consistency of the questionnaire, 93/0 is reported. The results come Koo (2005) also examine the validity of the questionnaire showed that students' self-efficacy questionnaire and Franmn (1988), relatively high positive correlation (77/0) with academic self-efficacy questionnaire Svlbrg and colleagues (1993) is.

**Scale of social support (SSI):** This questionnaire Samty, Najarian and Shokrkon (1376) and factor analysis has 28 questions that the two families (15 questions) - SSI1 - and friends (13 questions) - SSI2 - are measures. Article 28 The social support questionnaire responses on a scale continuum Samty and colleagues (1376) and the rankings are based on incorrect range and zero, respectively, and a score is allocated to each response. In RESEARCH Samty and colleagues (1376), SSI scale for assessing the reliability and internal consistency of the two methods is used to retest. In the retest, the total scale correlation coefficients SSI, 73/0, operating SSI2, 68/0, respectively. Internal consistency SSI, 83/0, for operating SSI1, 63/0 and for operating SI2, 93/0, is obtained. SSI scale to verify validity of the scale of social support (Fleming et al, 1982; quoted Sameni et al 1376) is used. Correlation coefficients between subjects' scores on the scale and scale SSI FSSI, 70/0, respectively. Correlation between factor scores and SSI2 SSI1 and SSI2 FSSI scale, respectively, 64/0 56/0 is obtained.

**The mental health questionnaire SCL90-R:** The questionnaire includes 90 questions are. First time by Dragvstyn, Kvy Lippman (1973) was introduced and later on clinical experience and psychological analysis in 1976 by a Dragvstyn, Ryknr and rock were revised. Revised final about it by Dragvstyn, Moreau, Ftyng, and Holland (1984) was published. The initial questionnaire by Mirzaei (1359) in Iran on Bymarrvany 2241, addicts and healthy subjects were examined and the results were quite satisfactory (quoting Talebzadeh, 1386). Reputation:

Correlation results indicate convergence between the two tests is high. Range correlation between 37% - 36% and in 001/0 and 0/05 is significant.

**Reliability:**

Nanaly (1970) on 94 mentally ill in America score reliability coefficients, the overall mental health and a revised list of symptoms of mental disorders 9 SCL90-R trial with an open approach to calculate the amplitude coefficient of the Week reliability, all of them 95% - 78% was reported. Reliability coefficient of this questionnaire survey Talebzadeh (1386) has fluctuated between 58% to 95%.

**3. Results**

Table 1 Statistical characteristics of the subjects' scores on social support, academic self-efficacy and mental health of college students shows. The simple correlation coefficient between the above amounted results in Table 2 and the results of multivariate correlation coefficients between variables before and criterion variables are shown in Table 3.

Table 1: Mean and standard deviation of social support, academic self-efficacy and mental health in university students:

Standard deviation(SD)	Average	variables
2/86	16/86	<i>social support</i>
1/32	8/80	college academic self-efficacy
7/37	74/88	<i>mental health</i>

Table 2: Simple correlation coefficients between variables before and mental health in

mental health	Predictive variables
%23**	social support
%22**	college academic self-efficacy

\*\* p<0/01

Table 3: Multiple regression coefficients of social support and academic self-efficacy in students with mental health

4/63 (<0/001)	4/15 (<0/001)	T (p)
%271	0/218	BETA
%190	%181	B
%41	%44	SE
0/355	0/256	R2
0/596	0/523	R
36/41 (<0/001)	52/867 (<0/001)	F (P)
15/29	16/84	MS
395	397	df
4052/21	4498/15	SS
remaining	remaining	Index
college academic self-efficacy	social support	Predictive variables

To determine the relationship between social support and efficacy of each of the variables, these variables as predictive variables and mental health as a criterion variable in the regression equations were analyzed. In Table 2, the observed rate is significant F (001/0> P) and about 36% of the variance show that social support and self predictive variables able to explain significant variance in mental health. Multiplier effect of social support (181/0 = B) and efficacy (190/0 = B) with respect to the t-statistics show that 99% can be confidently predicted changes are related to mental health in university students.

#### 4. Discussions

Analysis of results showed that direct and indirect effects of social support on mental health. These findings are consistent with results on Io and colleagues (2009), Stein and Larvz (2005), Bynayt and Bandura (2004); Inkvz (2004), Dennis (2003), and Hvlahan Saltzmn (2002); Svibr and Tvrys (2001) and Kalantzy Karadymas (2004), Marino and colleagues (2008); Hvland and Hvlahan (2003), Yang and Farn (2005).

Solitude and loneliness, sadness, and has been linked to health problems while being with family and friends, happiness, warmth, health and wellbeing is relevant. People with more social connections are established, compared with people who have fewer social contacts, less severe mental illness - are physically and if their disease is also less. Researchers have suggested that they receive more social support, social support has impact bumpers.

The results also showed the effects of social support on academic self-efficacy. These findings were consistent with Svibr and Tvrys (2001) and Bandura's theory. Social support can be because of different ways to reward and punishment when a person engages in activities on academic self-efficacy influence dominate their influence.

Other findings from this study, direct and indirect effects on mental health was an efficacy study.

These findings are consistent with studies Bynayt and Bandura (2004); Svibr and Tvrys (2001), and Kalantzy Karadymas (2004), Marino and colleagues (2008), and theories of Bandura and Vega.. While high self-efficacy is associated with better health, lower self-efficacy with symptoms of anxiety, depression and psychosomatic symptoms above are associated with (Bynayt and Bandura, 2004). Vega and colleagues (1985; quoted Svibr et al, 1993) were also suggested as a mechanism of self-efficacy plays an important role in facilitating mental health. According to the mental health, resulting from the interaction of three factors, the characteristics of texture, stress, Zaha and Mediators. Efficacy as a mediator, compatibility students who are experiencing stress, will facilitate.

At the theoretical level, recent research findings are relevant to current theories Tvanndpzhvsh and social protection, education and mental health confirmed the efficacy and Howe's theory of new questions about the research variables and their relationships with each other to raise. An example of these questions include: whether the proposed model the relationships between variables in girls and boys is the same?The answers to these questions requires that independent research is recommended to those

interested in examining it, the proposed results will lead to greater comprehensiveness. At a practical level to obtain the estimate of the importance of mental health and academic self-efficacy and social support on mental health can be expected Drpysh students mental health and to prevent mental disorders, and improve its performance in the field of physical and psychosomatic different (eg, academic and social) can be used.

This study also has limitations. Study of correlative nature, so it can not be obtained from any cause and effect relationship was assumed. To study the role of cultural factors on the variables of interest is not paid because of cultural factors on perception of social support, self-efficacy and health effects.

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