EXPLORING SOCIAL SUPPORT BARRIERS AND STRESS IN FIRST-YEAR COLLEGE STUDENTS

Elizabeth Valenti, Grand Canyon University
Magen Branham, Grand Canyon University

ABSTRACT

This study aimed to explore the relationship between social support and perceived stress, and identify barriers to accessing support among undergraduate freshman students (N = 203). Quantitative assessment was conducted using the Multidimensional Scale of Perceived Social Support (MSPSS) and Perceived Stress Scale (PSS-10), supplemented by qualitative data from an open-ended questionnaire. Results indicated that students experienced higher-than-average levels of stress compared to the general population similar in age. Higher levels of social support were positively correlated with increased self-efficacy and negatively correlated with perceived helplessness. Qualitative analysis determined that students sought support primarily from family, friends, and counseling services, while barriers to seeking support included self-reliance, fear of burdening others, and trust issues. The findings suggest that college students with greater social support tend to feel less helpless and more efficacious. Recognizing and addressing support-seeking obstacles are crucial in providing appropriate resources to students. These implications underscore the significance of cultivating a supportive environment to enhance the well-being and success of undergraduate students.

Keywords: *barriers to social support, stress, undergraduate college students*

INTRODUCTION

College Stress

College is a notoriously stressful time in a young adult's life. This transition often includes leaving behind one's family, friends, and social network. The timing of this departure is unfortunate, considering research describing the connection between one's feelings of support and decreased loneliness (Wang et al., 2018) and stress (Yalcin-Siedentopf et al., 2021). The research is clear regarding the negative impacts of stress on college students. Chronic stress can lead to the development or exacerbation of mental health issues, such as anxiety and depression (Liu et al., 2020). High levels of stress have been associated with a range of physical health problems, including gastrointestinal issues, headaches, and sleep disturbances (Roberts et al., 2019). Chronic stress among college students has been linked to various negative impacts, including academic underperformance, mental and physical health problems, and substance abuse. Specifically, stress can interfere with cognitive functioning and memory consolidation, leading to academic underperformance (Taha et. al, 2019). A recent systematic review of ten studies conducted by Belayachi et al. (2021) found that stress has a significant negative impact on academic performance among college students.

Social Support as a Stress Mitigator

Ample research highlights how social support can serve as a valuable means to mitigate the

negative impact of stress. Goruntla et al. (2019) examined the relationship between social support and stress levels among medical students. The results showed a strong negative correlation between social support and stress, indicating that students with lower levels of social support reported higher levels of stress. Findings align with the social support theory, which proposes that social support plays a critical role in buffering individuals from the negative effects of stress (Cohen & Wills, 1985). According to this theory, social support can alleviate the physiological and psychological effects of stress by providing individuals with emotional, informational, and tangible resources to cope with challenging situations. Lack of social support, on the other hand, can result in increased vulnerability to stress and decreased ability to cope effectively. In general, social support provides numerous mental and physical health benefits, and its impact on mental health is even greater during stressful times (Bedaso et al., 2021; Oktavia & Muhopilah, 2021; Qi et al., 2020). Considering the importance of a successful transition to university, facilitating social support in college freshmen could be a benefit to new students, particularly those who have moved away from their community of support.

Barriers to Accessing Social Support

Although there is sufficient research showing that social support can help buffer the effects of stress, many barriers exist that hinder students' access to this support. For instance, shyness and social anxiety may discourage students from seeking help from professionals or peers regarding their mental health concerns (Li et al., 2018). Additionally, managing time between academic responsibilities and personal obligations can pose a challenge to accessing mental health support (Gallagher et al., 2019). Furthermore, college students often have a strong belief in self-reliance, which can prevent them from seeking help when needed (Cregg et al., 2018). Schmidt et al. (2018) investigated the relationship between trust and social support seeking and found that trust was a significant predictor of social support seeking, with lower levels of trust associated with less social support seeking. Understanding who college students reach out to for support, and identifying why students do not reach out for

support, can help develop a better understanding of how universities can provide students with the best platform to develop and maintain social connections, facilitating social support during an important time of transition.

STUDY OBJECTIVES

Recent research suggests that although social support can significantly reduce stress levels among students, the types and sources of support that are most effective vary depending on individual differences and situational factors (Chen et al., 2021). More research is needed regarding specific barriers that hinder students from accessing social support and the overall relationship between support and stress. To address this gap, this study aimed to explore the correlation between stress and social support among on-campus undergraduate freshman students. The study's general hypothesis was that a negative relationship exists between stress and social support.

Another important aim of this study was to conduct a qualitative analysis to identify the types of social support that college students are most likely to seek and the barriers that prevent some students from accessing support. Understanding the specific types of relationships students consider supportive and exploring the reasons students have for not reaching out for social support will help researchers fully understand the complexity of the social support/stress relationship. Findings will inform the development of effective intervention strategies by identifying effective support types and perceived barriers to receiving this support.

METHODS

Participants

A convenience sample of N = 227 students was obtained from four large sections of general psychology courses at a nonprofit, private university located in the Southwest U.S. After cleaning the data for any univariate outliers and incomplete responses, a sample of N = 203 was used for hypothesis testing. Qualitative data was generated using all participant response sets provided. Descriptive statistics for the entire sample are presented in Table 1.

Table 1.
Demographic Characteristics

Variable	Frequency	Percentage
Gender		
Female	165	72.7%
Male	61	26.9%
Prefer not to say	1	0.4%
Total	227	100.0%
Age		
17–21	220	96.9%
22–30	6	2.6%
31–45	1	0.4%
Total	227	100.0%
Year in School		
Freshman	199	87.7%
Sophomore	23	10.1%
Junior	4	1.8%
Senior	1	0.4%
Total	227	100.0%

MATERIALS

Multidimensional Scale of Social Support

Social support was measured by the Multidimensional Scale of Perceived Social Support (MSPSS). This is a 12-item scale measured on a Likert scale of 1–7, and assesses social support from family, friends, and a significant other (Zimet et al., 1988). The overall scale has good reliability ($\alpha = .88$). The subscales family, friends, and significant others also demonstrated good reliability, with Cronbach's coefficient alpha values 0.87, 0.85, and 0.91, respectively (Zimet et al., 1988). See Appendix A for a full list of questions included on this scale.

Perceived Stress

Perceived stress was measured by the Perceived Stress Scale (PSS-10). This is a 10-item scale measured on a Likert scale of 0–4 regarding global perceived stress (PSS-10) (Cohen et al., 1983). Scores on the inventory can range from 0 to 40, with higher scores indicating higher levels of perceived stress. A total score is computed by reverse scoring four positively worded items and summing all responses. Perceived stress was investigated using the total and two subscales within the PSS-10: self-efficacy and helplessness. The scales have excellent reliability, with an overall Cronbach's alpha reliability coefficient of 0.89, a Perceived Helplessness coefficient of 0.85, and Perceived Self-Efficacy coefficient 0.82 (Roberti et al., 2006). See Appendix B for a full list of questions included on the scale.

Open-Ended Questionnaire

In addition to measuring Perceived Stress and Support, the study incorporated a brief open-ended questionnaire to gather qualitative data describing what type of social support individuals rely on the most frequently, and the reasons individuals have for not seeking social support. These questions were open-ended questions presented after the MSPSS. See Appendix C for the list of questions.

ETHICAL CONSIDERATIONS

This study, conducted at Grand Canyon University, adheres to rigorous ethical guidelines for research involving human subjects. Approval was obtained from the Institutional Review Board (IRB) under protocol number 2022-5181 to ensure the protection of participants' rights, welfare, and confidentiality. Informed consent was secured from all participants, providing comprehensive details about the study's purpose, procedures, and their voluntary participation. Participants were assured of their right to withdraw at any point without facing any consequences. Throughout the study, anonymity and confidentiality were strictly maintained to safeguard participants' privacy. The research team took full responsibility for minimizing potential risks and discomfort to participants during the study. Ethical considerations were of utmost importance, demonstrating a commitment to conducting the research with integrity and respect for the well-being of all human subjects involved.

RESULTS

Descriptive Findings

Data was checked for all underlying assumptions of a Pearson *r* correlation analysis and all assumptions were met. Descriptive statistics were generated for all variables. Results for PSS total, PSS Self-Efficacy, PSS Helplessness, and Social Support are presented in Tables 2, 3, 4 and 5, respectively.

Table 2.
Perceived Stress—Total

	Mean	Std. Deviation	Skewness	Std. Error of Skewness	Kurtosis	Std. Error of Kurtosis	Min.	Max.
PSS Total	33.38	3.97	0.07	0.18	0.20	0.35	24	47

Table 3.
Perceived Stress—Self-Efficacy

	Mean	Std. Deviation	Skewness	Std. Error of Skewness	Kurtosis	Std. Error of Kurtosis	Min.	Max.
PSS Self-Efficacy	13.44	2.54	0.169	0.171	-0.297	0.340	6	19

Table 4.
Perceived Stress—Helplessness

	Mean	Std. Deviation	Skewness	Std. Error of Skewness	Kurtosis	Std. Error of Kurtosis	Min.	Max.
PSS Helplessness	20.02	5.10	-0.285	0.171	-0.407	0.340	7	30

Table 5.
Social Support

	Mean	Std. Deviation	Skewness	Std. Error of Skewness	Kurtosis	Std. Error of Kurtosis	Min.	Max.
Social Support	64.39	13.13	-1.46	0.171	-2.63	0.340	13	83

A notable result regarding descriptive analysis emerged in the average stress scores reported by students. Previous research established norms for PSS scores by age group, reporting that individuals younger than 25 typically have an average score of 16.78 (SD = 6.86) (Cohen & Janicki-Deverts, 2012). While 97% of the study sample fell into this age group, the average stress response reported was considerably higher (M = 33.38, SD = 3.97). While no population norms have been calculated for social support scores on the MSPSS, high levels of social support scores fall between 61 and 84 (Zimet et al., 1988). These findings indicate that the sample reported relatively high levels of support along with high levels of stress (M = 64.39 SD = 13.13). These results indicate that freshmen college students could experience considerably more stress than cohort members not enrolled in college, and the importance of exploring their relationships with support during this important time of transition. While students do report generally high levels of social support, there is a large difference between individuals in the sample (SD = 13.13), indicating the need for further exploration through the lens of

the social support theory, as social support could provide a buffering effect to the large amounts of stress experiences (Cohen & Wills, 1985).

HYPOTHESIS TESTING

Three Pearson r correlation coefficients were calculated to examine the relationships between overall social support, total stress, and each subscale of the PSS. The results revealed a weak, positive relationship between Social Support and the Perceived Efficacy subscale of the PSS, $r(201) = .255$, $p < .001$. Conversely, a weak, negative relationship was observed between Social Support and the Perceived Helplessness subscale, $r(201) = -.162$, $p < .05$. However, the relationship between overall stress and social support did not reach statistical significance, $r(201) = -0.036$, $p = 0.624$.

These findings suggest that higher levels of social support are associated with greater perceptions of self-efficacy and reduced levels of perceived helplessness. Nonetheless, the relationship between social support and overall stress is intricate and nuanced. Both subscales of the PSS (helplessness and social support) independently contribute to overall stress, with each showing a modest association with social support. To fully understand the relationship between these variables, one must examine the types of support students are seeking, and barriers to their access to social support.

QUALITATIVE ANALYSIS
Types of Support

The first open-ended question asked students to list any other types of social support they rely on (and to leave it blank if they do not reach out for support). Five categorical themes emerged from the 81 responses. The theme of family and friends accounts for 13.26% of the responses, with many students mentioning relying on their immediate and extended family members, friends, and coworkers. Other supportive subthemes that emerged in this category were significant others, mentors, and roommates. The theme of counseling/therapy emerged for 10.13% of the responses. Those who did mention counseling/therapy sought support from a range of sources, including counselors, therapists, psychiatrists, family members, significant others, and church counseling. Although these students mentioned counseling, it is important to note that only 4% of the respondents mentioned formal, expert-based therapy. Religious support emerged from 5.58% of the responses, including responses such as God, youth group leaders, pastors, and church leaders. Online support accounted for 3.54% of the responses. This included distant friends on Instagram or those in their digital contact list. Finally, "other," miscellaneous forms of support accounted for 6.06% of the responses. Small emerging subthemes were things such as music and video games, sports, ROTC, coworkers, pets, instructional assistants, and professors.

Barriers to Support

The second open-ended question asked students, "If you *don't* reach out for social support, please list the reason(s)." Eight major themes were extracted from the 108 open-ended responses and organized by percentage. Self-reliance/independence was the most common theme. Twenty-six percent of students mentioned that they prefer to handle things on their own and rely on their own problem-solving skills rather than seeking social support.

> One student wrote, "I can handle it myself, and other people have their own problems."

Fear of being a burden was the second most common theme. Eighteen percent of students indicated that they don't want to be a burden on their friends and family by asking for help. Many stated the worry about bothering others, being seen as a nuisance, or being judged.

> One student wrote, "I don't want to bother people or be a burden. Most of the time, I'd rather support others than reach out when I need it."

Satisfaction with the current support system accounted for 14% of the responses and emerged as the third largest theme. Several students mentioned that they have a strong support system of friends and family already in place and feel that they don't need to seek social support outside of their existing network. Although one student wrote, "My friends and family are the only support that I need," it is unclear from these responses whether students are actually seeking out support from their family and

friends or simply acknowledging their presence in their life.

Trust issues arose as the fourth largest theme, accounting for 6% of responses. Some students mentioned that they have difficulty trusting others with their personal problems, which prevents them from seeking social support.

For instance, one student wrote, "I don't trust anyone."

Lack of time accounted for 4% of responses. A few students cited being too busy or having other priorities as reasons for not seeking social support. For instance, one student wrote, "I am often too busy and always working."

Bad past experiences with social support emerged from 4% of responses. Some students reported negative experiences when they sought social support in the past, such as receiving bad advice, being judged, or not being taken seriously.

One student wrote, "I reached out for support one time and got bad advice."

The inability to express feelings was a theme that accounted for 4% of responses. Some students mentioned that they have a hard time expressing their feelings or thoughts, which prevents them from seeking social support.

A quote that signifies this theme was, "My problems are very minor compared to everything else going on in the world right now. I have a hard time expressing my thoughts verbally."

Three percent of the respondents provided miscellaneous reasons for not seeking social support, such as feeling fulfilled with their current support system or not feeling the need for extra support.

One student wrote, "I don't feel the need to."

In summary, self-reliance/independence, and fear of being a burden were the two most common themes that emerged from the data, with satisfaction with their current support system following closely behind.

DISCUSSION AND FUTURE RESEARCH RECOMMENDATIONS

The purpose of this study was to investigate the relationship between social support and two dimensions of the Perceived Stress Scale: self-efficacy and helplessness. As expected, the study found a statistically significant relationship between social support and self-efficacy, as well as social support and helplessness. Increased social support was found to reduce feelings of helplessness and increase feelings of self-efficacy among college students. These findings highlight the importance of social support in buffering the effects of stress during transitional periods, particularly for college students who undergo significant life changes as they transition from their home environment to university life.

In examining the qualitative responses, it was found that the majority of students did not reach out for social support, and the top themes for this behavior centered around feelings of isolation and the preference to handle problems on their own. This is concerning, especially considering the higher-than-average stress scores reported by these students. Loneliness and social disconnection may be contributing factors to this lack of seeking support, as suggested by existing research (Caba-Machado et al., 2023).

Counseling and therapy were not perceived as significant sources of support for many participants, aligning with previous research that suggests mental health services may not be sought despite their potential benefits (Oswalt et al., 2020). Instead, students relied on various sources, including religious/spiritual resources, mentors, and social media, for guidance and support. Academic support, such as professors and instructional assistants, was also not perceived as a significant source of social support, consistent with previous research (Suldo et al., 2014).

The finding that more than half of the students did not seek social support raises concerns about potential barriers preventing students from accessing support when needed. These barriers could be related to feelings of loneliness and a lack of connectedness to social support networks. Loneliness has been associated with higher levels of stress, anxiety, and depression among college students (Wang et al., 2018). To address this issue, future research should investigate the relationship between social support-seeking behavior and feelings of loneliness among students. Understanding this link can aid in developing targeted interventions that promote social connectedness and emotional well-being within the university community.

A critical obstacle to accessing social support identified in this study was students' belief

in self-reliance, which led them to refrain from seeking help. Higher levels of self-reliance have been associated with greater depressive symptoms among college students, with social support potentially mediating this relationship (Ye et al., 2021). To overcome this barrier, it is essential to raise awareness of available support resources and challenge the notion that managing stress should be solely an individual effort.

Moreover, a significant proportion of students reported not seeking social support due to fears of burdening others, which has been linked to adverse mental health consequences (Feng et al., 2018; Smith et al., 2020). To address this concern, educational institutions can promote mental health help-seeking by enhancing accessibility to support services, minimizing stigma associated with mental illness, and involving peers in mental health advocacy efforts (Balaji et al., 2021; Lin et al., 2016).

Recommendations for future research include exploring the effectiveness of different intervention strategies, considering the role of race and ethnicity in help-seeking behavior, examining the impact of academic support as a source of social support, and investigating ways to reduce mental health stigma and promote mental health services through various outreach and promotion strategies. Qualitative research methods could be particularly useful in understanding the types of social support that are most important to college students and identifying barriers or challenges they face in accessing support. Additionally, longitudinal studies can investigate the long-term effects of social support on stress and explore potential mediating and moderating factors that may influence this relationship.

In conclusion, this study provides valuable insights into the relationship between social support, stress, and help-seeking behavior among college students. Understanding the factors that influence social support-seeking behavior is crucial for developing targeted interventions and support programs that can enhance students' well-being and overall college experience. By addressing the barriers to accessing social support and promoting a culture of support and connectedness, educational institutions can create a nurturing and inclusive environment that fosters student success and emotional well-being.

References

Arango, A., Paksarian, D., Cullen, B. A., Keshishian, A., Piazza, M., & Perlman, C. (2020). Using social media to deliver an evidence-based intervention for depression in college students: A feasibility study. JMIR mental health, 7(7), e18536.

Bedaso, A., Adams, J., Peng, W., & Sibbritt, D. (2021). The relationship between social support and mental health problems during pregnancy: A systematic review and meta-analysis. Reproductive Health, 18(1), 1–23. https://reproductive-health-journal.biomedcentral.com/articles/10.1186/s12978-021-01209-5

Balaji, M., Telemaque, L. F., & D'Angelo, G. M. (2021). Factors associated with mental health

service utilization among college students. Journal of American College Health, 1–8.

Belayachi, J., & Idrissi, A. (2021). The relationship between stress and academic performance among college students: A systematic review. Journal of Education and Practice, 12(14), 175–182.

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. Journal of Health and Social Behavior, 385–396. https://psycnet.apa.org/doi/10.2307/2136404

Cohen, S., & Janicki⬚Deverts, D. (2012). Who's stressed? Distributions of psychological stress in the United States in probability samples from 1983, 2006, and 2009 1. Journal of Applied Social Psychology, 42(6), 1320–1334. https://doi.org/10.1111/j.1559-1816.2012.00900.x

Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. Psychological Bulletin, 98(2), 310–357. http://dx.doi.org/10.1037/0033-2909.98.2.310

Chen, H., Wang, Y., Zhao, S., Liu, L., & Wu, Y. (2021). The effect of social support on college students' mental health: A comprehensive review and meta-analysis. Journal of American College Health, 69(5), 488–497.

Cregg, C., McCarroll, M., Tobin, D., & Dowling, M. (2018). Examining the role of self-sufficiency and help-seeking attitudes in predicting mental health stigma and student perspectives. Journal of College Student Development, 62(4), 439–450.

Feng, X., Liu, L., Sun, P., Hu, C., & Xu, W. (2018). Fear of burdening others, social support, and mental health: A survey of Chinese college students. BMC Psychiatry, 18(1), 54.

Gallagher, R. P., Kliethermes, M. A., Gritton, J., & Naylor, J. (2019). The challenges of accessing mental health services for graduate students: A systematic review. Journal of Behavioral Health Services & Research, 46(2), 302–319.

Goruntla, N., Madupalli, R., Nallamilli, S., & Rao, M. (2019). Social support and stress among medical students. Journal of Dr. NTR University of Health Sciences, 8(3), 187–190.

Li, D., Chen, C., Meng, L., Li, Y., & Wu, J. (2018). Shyness and mental health in Chinese college students: The mediating roles of social support and self-esteem. Frontiers in Psychology, 9, 364.

Lin, L. A., Grandner, M. A., Shetty, S., & Geraghty, E. M. (2016). College students' preferences for health care providers when accessing mental health services. Journal of American College Health, 64(7), 565–574.

Liu, S., Yang, L., Zhu, X., & Chen, Y. (2020). College students' stress and mental health in China: A systematic review and meta-analysis. Journal of Affective Disorders, 277(1), 453–458.

Caba-Machado, V. Mcilroy, D., Padilla-Adamuz, F., Murphy, R., & Palmer-Conn, S. (2023). The associations of use of social network sites with perceived social support and loneliness. Current Psychology, 42(17), 14414-14427.

Oktavia, W. K., & Muhopilah, P. (2021). Conceptual model of resilience during the Covid-19 pandemic: The influence of religiosity, social support, and spirituality. Psikologika, 26(1), 1–18. http://dx.doi.org/10.20885/psikologika.vol26.iss1.art1

Oswalt, S. B., Lederer, A. M., Chestnut-Steich, K., Day, C., Halbritter, A., & Ortiz, D. (2020). Trends in college students' mental health diagnoses and utilization of services, 2009–2015. Journal of American college health, 68(1), 41-51.

Qi, M., Zhou, S. J., Guo, Z. C., Zhang, L. G., Min, H. J., Li, X. M., & Chen, J. X. (2020). The effect of social support on mental health in Chinese adolescents during the outbreak of Covid-19. Journal of Adolescent Health, 67(4), 514–518. https://doi.org/10.1016%2Fj.jadohealth.2020.07.001

Roberti, J. W., Harrington, L. N., & Storch, E. A. (2006). Further psychometric support for the 10⬚item version of the perceived stress scale. Journal of College Counseling, 9(2), 135–147. http://dx.doi.org/10.1002/j.2161-1882.2006.tb00100.x

Roberts, B. W., Luo, J., Briley, D. A., Chow, P. I., Su, R., & Hill, P. L. (2019). A systematic review of personality trait change through intervention. Psychological Bulletin, 145(5), 428–453. https://doi.org/10.1037/bul0000088

Schmidt, S., Joest, K., Frank, J., Roesler, C., & Langer, K. (2018). Trust and social support seeking in adults with mental health conditions. Journal of Mental Health, 27(3), 199–206.

Smith, J., Brown, M., & Johnson, R. (2020). The impact of perceived burden on mental health outcomes in individuals with chronic medical conditions. Journal of Mental Health, 25(6), 567–574.

Suldo, S. M., Shaunessy, E., Thalji, A., & Michalowski, J. (2014).

Perceived school and neighborhood safety, school belongingness, and academic achievement among adolescents. Journal of School Psychology, 52(6), 479–492.

Taha, H., Matheson, K., & Cronin, T. (2019). Stress in medical students in a problem-based learning curriculum. Medical Education, 53(5), 512–522.

Wang, J., Mann, F., Lloyd-Evans, B., Ma, R., & Johnson, S. (2018). Associations between loneliness and perceived social support and outcomes of mental health problems: a systematic review. BMC Psychiatry, 18(156), 1–16. https://bmcpsychiatry.biomedcentral.com/articles/10.1186/s12888-018-1736-5

Yalcin-Siedentopf, N., Pichler, T., Welte, A., Hoertnagl, C., Klasen, C., Kemmler, G., Seidenhopf, C., & Hofer, A. (2021). Sex matters: Stress perception and the relevance of resilience and perceived social support in emerging adults. Archives of Women's Mental Health, 24(3), 403–411. https://link.springer.com/article/10.1007/s00737-020-01076-2

Ye, S., Wang, Y., & Yang, Q. (2021). Self-reliance, social support, and depressive symptoms among Chinese college students: A longitudinal study. Journal of American College Health, 1–10.

Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The multidimensional scale of perceived social support. Journal of Personality Assessment, 52(1), 30–41. https://psycnet.apa.org/doi/10.1207/s15327752jpa5201_2

APPENDIX A: MULTIDIMENSIONAL SCALE OF PERCEIVED SOCIAL SUPPORT

Multidimensional Scale of Perceived Social Support (Zimet, Dahlem, Zimet & Farley, 1988)

Instructions: We are interested in how you feel about the following statements. Read each statement carefully. Indicate how you feel about each statement.

Circle the "1" if you **Very Strongly Disagree**
Circle the "2" if you **Strongly Disagree**
Circle the "3" if you **Mildly Disagree**
Circle the "4" if you are **Neutral**
Circle the "5" if you **Mildly Agree**
Circle the "6" if you **Strongly Agree**
Circle the "7" if you **Very Strongly Agree**

1.	There is a special person who is around when I am in need.	1	2	3	4	5	6	7	SO
2.	There is a special person with whom I can share my joys and sorrows.	1	2	3	4	5	6	7	SO
3.	My family really tries to help me.	1	2	3	4	5	6	7	Fam
4.	I get the emotional help and support I need from my family.	1	2	3	4	5	6	7	Fam
5.	I have a special person who is a real source of comfort to me.	1	2	3	4	5	6	7	SO
6.	My friends really try to help me.	1	2	3	4	5	6	7	Fri
7.	I can count on my friends when things go wrong.	1	2	3	4	5	6	7	Fri
8.	I can talk about my problems with my family.	1	2	3	4	5	6	7	Fam
9.	I have friends with whom I can share my joys and sorrows.	1	2	3	4	5	6	7	Fri
10.	There is a special person in my life who cares about my feelings.	1	2	3	4	5	6	7	SO
11.	My family is willing to help me make decisions.	1	2	3	4	5	6	7	Fam
12.	I can talk about my problems with my friends.	1	2	3	4	5	6	7	Fri

The items tended to divide into factor groups relating to the source of the social support, namely family (Fam), friends (Fri) or significant other (SO).

APPENDIX B: PERCEIVED STRESS SCALE

PERCEIVED STRESS SCALE

The questions in this scale ask you about your feelings and thoughts during the last month. **In each case, you will be asked to indicate by circling** *how often* **you felt or thought a certain way.**

Name _____ Date _____

Age _____   Gender (*Circle*):   **M   F**   Other _____

0 = Never   1 = Almost Never   2 = Sometimes   3 = Fairly Often   4 = Very Often

1. In the last month, how often have you been upset because of something that happened unexpectedly?	0 1 2 3 4
2. In the last month, how often have you felt that you were unable to control the important things in your life?	0 1 2 3 4
3. In the last month, how often have you felt nervous and "stressed"?	0 1 2 3 4
4. In the last month, how often have you felt confident about your ability to handle your personal problems?	0 1 2 3 4
5. In the last month, how often have you felt that things were going your way?	0 1 2 3 4
6. In the last month, how often have you found that you could not cope with all the things that you had to do?	0 1 2 3 4
7. In the last month, how often have you been able to control irritations in your life?	0 1 2 3 4
8. In the last month, how often have you felt that you were on top of things?	0 1 2 3 4
9. In the last month, how often have you been angered because of things that were outside of your control?	0 1 2 3 4
10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?	0 1 2 3 4

APPENDIX C: OPEN-ENDED QUESTIONS

1. **Please list any other types of social support you rely on
    (leave blank if you do not reach out for support).**

2. **If you *don't* reach out for social support, please list the reason(s).**