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SOCIAL SCIENCE AND EDUCATION | RESEARCH ARTICLE

The Relationship Between Social Support and Mental Health Degrees in Emerging Adulthood of Students

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Abstract: This study aims to examine the relationship between sources of social support and mental health degrees in emerging adulthood. The participants of this research are undergraduate students at Universitas Hasanuddin. The sampling technique utilized in this research is stratified random sampling, while the number of participants in this research is 411. The scale applied in this study is the sources of social support scale adapted from the Multidimensional Scale of Perceived Social Support (MSPSS) (12 items, = 0.888) and the mental health degree scale adapted from the Mental Health Inventory (MHI-38) (24 items = 0.941). The results showed a significant relationship between sources of social support and mental health degrees in emerging adulthood of Universitas Hasanuddin students. The correlation level obtained based on the results of data processing shows that the Pearson Correlations value of the research variable of 0.445 is included in the moderate relationship criteria. An average relationship can be interpreted as a medium relationship based on the correlation coefficient criteria. This shows that the relationship between the variable's sources of social support and the variable mental health degree is in moderate measures. This study also found that friend support was the most common source of social support.

Keywords: Social Support, Mental Health, Emerging Adulthoods

1. INTRODUCTION

Mental health integrates health conditions and individual well-being, which play an essential role in holistically realizing human health. Mental health is as important as physical health because physical and psychological factors drive humans to have a good functioning life. Mental health is often described as something positive, with happiness and a sense of mastery over the environment (Galderisi et al., 2015). This situation is related to the enjoyment of life, the ability to cope with stress and sadness, the fulfillment of one's potential and purpose in life, and a sense of connection with other individuals (United Nations, 2020). The degree of individual mental health can be likened to being in a particular range. The range is characterized by excellent or healthy function on one hand and negative or lousy function on the other (Delphis, 2019). This is reinforced by Dewi (2012), who states that the degree of mental health in humans can be described on a continuum. This is what underlies the word "degree of mental health" to mean an individual's mental health condition. Therefore, it is essential to remember that mental health is a condition that is more than the absence of mental disorders because it is subjective to each individual (World Health Organization, 2018).

One of the stages of human development that is most likely to impact an individual's mental health is the developmental stage known as emerging adulthood. Emerging adulthood is a new stage of development among adolescents and young adults. This term describes individuals between 18 and 25 years of age (Arnett, 2000). In emerging adulthood, individuals will face responsibilities for independence, social roles, and normative expectations from their social environment. Individuals will experience a phase of identity exploration by trying various possibilities in life, such as love, work, and worldview, and gradually moving towards making decisions that last (American Psychological



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Association, 2015). Distinctive individual characteristics will also form in emerging adulthood (World Health Organization, 2018). Therefore, most of the behaviors, ways of thinking, and degrees of mental health of individuals that change in emerging adulthood are believed to respond to this stage of development. To support this idea, researchers surveyed students at Universitas Hasanuddin to find an overview of the mental health status of emerging adulthood. Participants investigated initial data obtained from 28 people, including ten men and 18 women, aged 19-25 years. As many as 39.3% of participants stated that they felt nervous when facing unexpected situations in the past month. A total of 32.1% of participants also noted that participants almost every time thought they were at the lowest point in their lives in the past month. As many as 35.7% of participants stated that they spent almost all the time contemplating something negative in their lives in the past month.

This finding is in line with the statement put forward by Arnett (2007) that, psychologically, various challenges were emerging from adulthood in its development. Emerging adulthood requires them to face developmental challenges that impact their mental health and well-being. This situation illustrates that the degree of individual mental health is subjective, and each individual has a tendency to have mental health problems. This follows the concept of mental health degrees which states that mental health is a condition that is more than the absence of mental disorders but rather refers to whether or not the individual's mental health condition (Delphis, 2019; Dewi, 2012). In connection with these findings, the researcher also conducted interviews with three student participants at Universitas Hasanuddin with the initials A, B, and C to obtain initial data on the description of mental health challenges in emerging adulthood. Based on the results of the interviews that have been conducted, the researchers found that when the participants were in a state of depression or frustration over something they were facing, the three participants would invite each other to take part in harmful activities. This action is carried out by abusing alcohol and certain drugs and substances together to entertain themselves or each other. This certainly provides an understanding that how individuals overcome their challenges certainly harms their functioning and well-being (Jenzer et al., 2019).

Students' mental health challenges at Universitas Hasanuddin as emerging adulthood are supported by data from the Director-General of Higher Education (PDDikti) Database. Universitas Hasanuddin is the best university in Eastern Indonesia and is ranked 7th nationally (Good News From Indonesia, 2021). Universitas Hasanuddin's position as the best public university in Eastern Indonesia certainly makes Universitas Hasanuddin students have enormous challenges, especially in academics, compared to students from other universities. Research conducted by Rosyidah (2020) states that the most common stress experienced by Universitas Hasanuddin students is academic stress, which generally occurs due to the responsibilities and demands of academic life. Malawat (2019) also added a relationship between adaptability and stress levels in Universitas Hasanuddin students. New students are believed to have more difficulty adjusting, and the failure of students to adapt can cause individuals to experience stress.

The case above can explain that the poor adaptation process in emerging adulthood can cause them to feel overwhelmed and reflect on their situation, switching to coping unhealthy et al., 2021). Mechanisms of coping can be described by drug and alcohol abuse self-harm and can even lead to severe mental health problems. Furthermore, when emerging adulthood experiences difficulties and even failures to adapt to this period, individuals are vulnerable to various psychological and physical health problems. Different mental health problems include depression, bipolar disorder, anxiety, psychosis, schizophrenia, substance use disorders, etc. (Arnett, 2007). Data from the Ministry of Health of the Republic of Indonesia (2019) states that in 2017 the three most significant mental disorders in Indonesia were occupied by depression, anxiety disorders, and schizophrenia. This data is strengthened by research conducted by Kaligis et al. (2021), which states that the most common mental health problem experienced by students in Indonesia is anxiety, with a percentage of 95.4%. In connection with this, about 50% of them reported having committed acts of self-injury and had suicidal thoughts. Data from the 2018 Basic Health Research shows that the potential for depressive disorders in Indonesia has started to occur since the age range of 15 - 24 years with a prevalence of 6.2% and continues to increase with increasing age (Ministry of Health of the Republic of Indonesia, 2019).

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Concerning the degree of mental health, social support is believed to improve individual welfare when facing problems (Oktavia & Muhopilah, 2021; Wu et al., 2020). Sarafino & Smith (2011) state that social support is various forms of care, support, and assistance provided by other individuals or groups. The sufficiency of social support received by individuals is directly related to the physical and psychological conditions felt by the individual (Zimet et al., 1998). In general, social support can affect a person's physical and mental health. If it is associated with mental health, social support is an effort to regulate the body's response system and prevent extreme responses that can cause dysfunction (Cohen, Underwood, & Gottlieb, 2000).

Sources of social support can come from interpersonal relationships in an individual's social network, such as family, friends, partners, and social communities (Sarafino & Smith, 2011). The above idea is in line with the research conducted by Scardera et al. (2020) that found emerging adulthood with high sources of social support had fewer mental health problems, even though the participants experienced various mental health issues during their teenage years. A high source of social support was associated with symptoms of anxiety, depression, and lower suicidal thoughts and attempts. This can explain that the high social support authorities can protect individuals against mental health problems during their transition to adulthood. An overview of the importance of sources of social support in an individual's life can provide a picture that follows the natural human drive that individuals will always involve other individuals in their lives (Oktavia & Muhopilah, 2021; Zaki & Williams, 2013). Individuals need sources of social support in their lives to make themselves feel loved, cared for, valued, respected, and involved in their existence (Sarafino & Smith, 2011). Some theories review social support, one of which is from social cognition. The provision of social support is measured by evaluating cognitive representatives of the social roles played by others so that these evaluations impact themselves and others. (Cohen, Underwood, & Gottlieb, 2000).

The presence of sources of social support can make individuals better able to face difficult times in their lives, easier to control emotions, and improve mental health status for the better (Oktavia & Muhopilah, 2021; Fong et al., 2017; Zaki & Williams, 2013; Lakey & Orehek, 2011). This is supported by Oktavia & Muhopilah's (2021) statement that various forms of support can positively affect individuals and can be a means for individuals to overcome mental health problems such as stress and depression. With the study of several articles, theoretical studies, and the phenomenon of several cases that occur in universities, this is an opportunity for researchers to conduct further research related to social support and mental health degrees. Based on the descriptions above, the objective of this study is to analyze the relationship between sources of social support and the degree of mental health in emerging adulthood students at Universitas Hasanuddin.

2. Literature Review

2.1. Social Support

Zimet et al. (1988) define social support as an individual's belief in the existence of support from family, friends, and partners in his life. Social support can come from interpersonal relationships in an individual's social network, such as a spouse, family, friends, and social community. Individuals who get social support believe that they are loved, valued, and part of their social environment, such as families and communities who can help when needed (Sarafino & Smith, 2011). Individuals with high social support will experience more positive experiences and desired events in their lives, have higher self-esteem, and have a more optimistic outlook on life than individuals with low social support. In general, low social support is associated with locus of control because it is motivated by relative dissatisfaction with life and difficulty sticking to personal responsibilities. Therefore, in general, social support is often associated with other individuals who can be relied upon and show care, appreciation, and love for the support recipients (Sarason et al., 1983). Sarason et al. (1983) stated that two factors influence social support: the number of available sources of social support & the level of satisfaction with general social support. The number of public authorities of social support, namely through the individual's perception of many other individuals who can be relied upon when the individual needs help (quantity-based approach). The level of satisfaction with



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available social support is related to the individual's perception that his needs can be met according to his expectations (a quality-based approach).

However, not all individuals get the social support they need. Due to several factors, individuals may also not have the opportunity to get social support. For example, if the individual is unfriendly, insensitive to the needs of other individuals, never helps different individuals, and does not tell the environment if they need help. Some individuals are not firm enough or do not dare to ask others for help. Generally, this incident is motivated by the belief that the individual must be independent, feel uncomfortable sharing his condition, not burden other individuals, or know who to ask for help. This is also following the presence or absence of potential support providers. For example, individuals do not have someone they need, so the impact on individuals is under their pressure (Sarafino & Smith, 2011). In this regard, sources of social support can be grouped into three categories (Zimet et al., 1988), including family support, friend support, and significant other support. Family support is a form of support given to individuals in terms of emotional needs and in making decisions (Zimet et al., 1988). The availability of sources of support from the family is a determining factor in how individuals seek other social support (Alsubaie et al., 2019; Camara, Bacigalupe, & Padilla, 2017). Friend support is a form of support for individuals in their daily activities and activities (Zimet et al., 1988). In the individual development stage at the age of 18-24 years, the presence of friends is increasingly essential as a source of social support compared to family (Alsubaie et al., 2019; Kugbey, 2015). When individuals try to show their individuality from the family, significant other support is a form of support given by someone who has meaning in their lives to make them feel comfortable and valued (Zimet et al., 1988). Significant others in an individual's life play a role in helping manage psychological conditions and assist individuals in mastering their emotional burdens. Types of social support can be grouped into four categories (Sarafino & Smith, 2011), including emotional support, instrumental support, informational support, and companionship support. Emotional support refers to the act of conveying empathy, care, concern, encouragement, and other positive things to individuals. Instrumental support refers to actions that involve assisting in the form of materials or services. Informational support refers to providing advice, direction, advice, or feedback on how the attitudes and behavior of individuals are carried out. Companionship support refers to the presence of other individuals to spend time with that individual to create a sense of belonging to the same interests and social activities.

2.2. Mental Health

Veit & Ware (1983) define mental health as an individual's condition that is not only seen based on the presence or absence of symptoms of psychological distress (psychological distress) that appear but also based on the characteristics of psychological well-being that affect the individual's life. Galderisi et al. (2015) state that mental health is a dynamic state of internal balance that allows individuals to utilize their abilities to be in harmony with the universal values of society. This ability is reflected through cognitive and social skills in recognizing, expressing, regulating emotions, and empathizing with others. This ability can be demonstrated through the ability to function in social roles and adaptively cope with stressful life events (World Health Organization, 2018).

The degree of mental health possessed by individuals is also believed to manifest a harmonious relationship between the body and mind. The implication of this definition states that mental health is not only the absence of mental disorders but rather a prosperous mental health condition (World Health Organization, 2018). The paradigm used to explain the concept of mental health is based on the biopsychosocial model. Biopsychosocial is a view that states that the idea of health and illness can best be understood through the interaction between physiological, psychological, and sociocultural factors. The biopsychosocial concept was first put forward by George L. Engel (1977), who viewed that human health and disease are influenced by the interconnection between three domains, namely biological, psychological, and social functions. The natural domain is shown through genetic factors, illness, hormones, age, diet, and individual lifestyle. The psychological field is demonstrated through a description of mental health, beliefs, emotions, resilience, coping skills, emotional intelligence, self-esteem, behavior, etc. Finally, the social domain is shown by describing the individual's relationships



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and circumstances with family, peers, the environment, and culture (Taukeni, 2020; Delphis, 2019; Gellman & Turner, 2013).

In general, human mental health conditions can be divided into two categories: psychological distress and psychological well-being. The American Psychological Association (2015) defines psychological distress as a series of adverse mental and physical symptoms associated with mood fluctuations in individuals. Generally, psychological distress is characterized by high anxiety levels, a tendency to depression, and a loss of control over personal actions and emotions (Veit & Ware, 1983). In connection with this, the emergence of irritability, anger, anxiety, fatigue, and a tendency to isolate oneself and stay away from activities with other individuals are typical symptoms of psychological distress. If the individual experiences these symptoms for two weeks, it is likely that the individual is experiencing psychological distress.

In some cases, psychological distress is considered an early symptom of various psychological disorders such as major depressive disorder, anxiety disorder, somatization disorder, schizophrenia, and other clinical conditions (American Psychological Association, 2015). On the other hand, Ryff (1989) defines psychological well-being as individuals who have positive attitudes towards themselves and other individuals. This condition can be demonstrated through the individual's ability to make decisions and regulate personal behavior, create and manage an environment that suits his needs, have a purpose in life, make life meaningful, and seek to explore and develop himself. Generally, psychological well-being is associated with happiness, the balance of life, and feelings of high selfesteem. In this situation, individuals can build self-efficacy in building new relationships and involve themselves in activities with other individuals (Veit & Ware, 1983). Veit and Ware (1983) stated that to increase the accuracy of measuring the mental state of humans, the definition of mental health needs to be expanded beyond the frequency or intensity of symptoms of psychological distress alone. This assumption is the beginning of the presence of the characteristics of psychological well-being (such as feelings of cheerfulness, interest, and life satisfaction) as a joint measurement of psychological distress. This idea is the basis for psychological distress and psychological well-being in the concept of mental health. Generally, psychological distress is characterized by anxiety, depression, and a loss of control. Meanwhile, psychological well-being is usually characterized by positive emotions, feelings of love, and life satisfaction (Veit & Ware, 1983; Aziz, 2015).

2.3. Emerging Adulthood

The American Psychological Association (2015) defines emerging adulthood as the stage of individual development between adolescence and early adulthood and is generally marked by a range of 18–25 years. Emerging adulthood emerged as a new framework in the construction of human development. This theory was created by Arnett (2000), who states that emerging adulthood is a developmental stage that differs demographically, subjectively, and in terms of identity exploration from other developmental stages. In emerging adulthood, individuals will face relative independence, social roles, and normative expectations from their social environment. Individuals will experience a phase of identity exploration by trying different life possibilities, such as love, work, and worldview, and gradually making decisions that last. This theory provides an overview of the unique characteristics of emerging adulthood that distinguish it from adolescents and young adults.

Emerging adulthood is a stage of development that still requires more recognition of its existence. One thing that still needs to be considered is the theory of evolution that has been known so far, leading us to think that adolescence through the late twenties is only a transition before entering young adulthood. Most of this research is exciting and informative, but it focuses only on how individuals change, which still ignores the "who" and "how" of individuals at that time. There are so many things that happen during this stage of development. If this period is referred to as a transition period, attention can be diverted to understanding the unique characteristics during these years (Arnett, 2015). Even when viewed statistically, emerging adulthood which lasts from the age of about 18-25 years, will take seven years which is even longer than infancy, early and middle childhood, and almost as long as adolescence (Arnett, 2015). It can be believed that every period of life that humans go through is a period of transition. However, emerging adulthood is a transition and a developmental



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stage that must be studied separately and independently. Arnett (2015) states that five things will be experienced in emerging adulthood, namely:

- 1. The period of identity exploration.
- 2. The period of instability.
- 3. The period of self-focus.
- 4. The period of feeling in-between.
- 5. The period of possibilities.

The age of identity exploration is described by exploring various possibilities of life to build an understanding of "who" they are. The age of instability is represented by the journey of life that will be filled with various improvements to understand what life is like. The age of self-focus is described by emerging adulthood as focusing on oneself. The age of feeling in-between is described as feeling responsible for oneself but not yet fully mature. Finally, the age of possibilities is defined as a period full of opportunities and optimism.

3. Research Method and Materials

3.1. Participant

A population is a group of subjects who want to generalize research results (Azwar, 2017). A group of subjects consists of individuals with at least one trait or characteristic in common. The population in this study were active students at Universitas Hasanuddin at the undergraduate level. The sample is part of the population in numbers and characteristics that represent a population (Sugiyono, 2014). In this study, researchers used a stratified random sampling technique. Stratified random sampling is a sampling technique that considers a level (strata) in the population element. Researchers found the number of the active student population at Universitas Hasanuddin for undergraduate level in the odd semester 2021–2022 as high as 30,173 people (Ministry of Education and Culture of the Republic of Indonesia, 2021). In this regard, the researcher is oriented to the sample determination table from Isaac & Michael (1976) to determine the number of research samples. The number of samples from the total population of 30,173 people who were fulfilled to become 40,000 is 345 for an error rate of 5%, which the researchers then added to 350 people.

3.2. Instrument and Measurement

The data collection method used in this study used a research scale. The scale used to measure the source of social support in this study is the source of social support developed by Juniastira (2018) from the adaptation of The Multidimensional Scale of Perceived Social Support (MSPSS) scale by Zimet et al. (1988). Sources of social support include (e.g., support from family (family support), support from friends (friend support), and support from someone special (such as a boyfriend or closest friend) (significant other support). The type of scale used in this study is the Likert scale, used to measure the social support source variable, consisting of 12 question items, all of which are favorable. The scale used to measure the degree of mental health in this study is an adapted mental health scale developed by Aziz (2015) from The Mental Health Inventory (MHI-38) by Viet & Ware (1983). The dimensions revealed by this measuring instrument are psychological distress and psychological well-being. Psychological distress is characterized by anxiety, depression, and loss of control. Psychological well-being is characterized by positive emotions, feelings of love, and life satisfaction. The type of scale used in this study is the Likert, used to measure the degree of mental health variables consisting of 24 question items that are unfavorable and favorable.

4. Results and Discussion





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4.1. Statistical Result

The results of the normality test were obtained by measuring the One-Sample Kolmogorov-Smirnov Test using the SPSS 26.0 for Mac with the significance values shown in table 1 as follows:

Table 1: Table of Normality Test Results

	N	Asymp. Sig. (2-tailed)
Unstandardized Residual	411	.200

Based on table 1, it is known that the significance value of Asymp. Sig. (2-tailed) indicates the number 0.200 is more significant than 0.05. Following the basis for decision making in the Kolmogorov-Smirnov One-Sample Normality Test, it can be understood that the data is normally distributed. Thus, the assumptions or requirements for normality have been met. The results of the hypothesis test were obtained by measuring the Bivariate Pearson Correlation using the SPSS 26.0 for Mac with correlation values and significance values shown in table 2 as follows:

Table 2: Table of Hypothesis Test Results

	N	Pearson Correlation	Sig. (2-tailed)
Social Support Mental Health Degree	411	.445	.000

Hypothesis testing in a study can be interpreted in two ways: the significance value (Sig. 2-tailed) and the Pearson Correlation value (calculated R-value). Based on the table above, it is known that the number of participants in this study was 411 respondents, as indicated by the symbol N in the table. The research variable's significance value (Sig. 2-tailed) was 0.000 less than 0.05. Following the basis of decision making in the Bivariate Pearson Correlation hypothesis test, it can be understood that there is a significant relationship between the social support source variable and the variable degree of mental health. Thus, the assumptions or requirements of the hypothesis have been met.

Table 3: Significance of R-estimated

N	The Level of Significant 5%
400	0.098

Hypothesis testing can also be done by comparing the calculated R-value with the stable R-value. Based on the table above, it is known that the Pearson Correlation value (calculated R-value) of the research variable is 0.445, which is more significant than R table 0.098 with an error rate of 5%. Following the basis of decision making in the Bivariate Pearson Correlation hypothesis test, it can be understood that there is a significant relationship between the social support source variable and the variable degree of mental health. Thus, the assumptions or requirements of the hypothesis have been met. Figure 1 shows that three aspects underlie the variables of social support sources, namely family support, friend support, and significant other support. The data processing results showed that most of the participants' conceptions of social support were in the moderate category. The source of social support that was received the most by participants was friend support.

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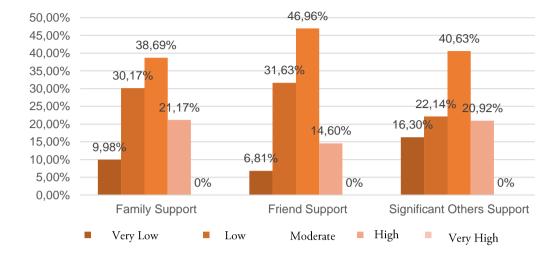


Figure 1. Graph of Participant Social Support by Aspect Social Support Source Variable

Discussion

Sources of social support can be defined as the belief in the support felt by individuals through various forms of attention that come from family, friends, and someone special (such as a boyfriend or closest friend) in their lives. The degree of mental health can be defined as a condition of a prosperous individual who is aware of his abilities, can cope with the normal stresses of life, can work productively and fruitfully, and can contribute to his community based on the characteristics of psychological distress and psychological well-being. Based on the research that has been done, it can be understood that the hypothesis "There is a relationship between sources of social support and the degree of mental health in emerging adulthood at Universitas Hasanuddin students" is accepted. This is based on data processing results, which show a significant relationship between the variable sources of social support and the varying degree of mental health. These results are also in line with research conducted by Tahmasbipour and Taheri (2012), which states that social support and mental health have a positive and significant relationship among university students. Life as a student is a time full of stress. The factor behind this is the expectations of social and academic functions that students must bear. In this case, parents and university administrators certainly expect students to complete their education perfectly. This situation makes students vulnerable to stress factors in the face of this significant change. Therefore, to function effectively, students need various forms of mental health support appropriate for them. The results obtained from this study also show that the relationship between variables is within the moderate relationship criteria. This relationship can occur because it is influenced by various factors such as racial or ethnic minority status, low economic status, overseas, not living with significant others (Hefner & Eisenberg, 2009), gender, family function (Pettit et al., 2011), level of family support and communication (Iouannou, Kassianos, & Symeou, 2019), support from friends and partners (Sharp et al., 2017), self-esteem, and the process of internalizing and externalizing problems (Szkody & McKinney, 2019). In connection with this, various previous studies also have the same result: the source of social support is significantly related to individual mental health. Individuals with familiar sources of social support were found to have a greater tendency to depression than individuals with high sources of social support (Van den Berg et al., 2021; Ioannou, Kassianos, & Symeou, 2019; Pettit et al., 2011; Hefner & Eisenberg, 2009).

In general, the study results illustrate that participants' sources of social support are in the moderate category. This shows that most individuals receive a source of social support either from family, friends, or someone special (such as a boyfriend or closest friend) as a giver of help or comfort in their lives. Of the three sources of social support, friend support is the most widely accepted source of social support by research participants compared to other sources of social support. In connection with this, Kugbey (2015; Alsubaie et al., 2019) states that in the individual development stage at the age of 18 - 24 years, the presence of friends as a source of social support becomes more significant than



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support from family. Priority in life that shifts from parents to peers occurs when individuals try to show their individuality from the family. This happens because most of the experience and closeness of individuals is done with their peers. The university environment encourages students to meet new settings and create social networks (Alsubaie et al., 2019). Therefore, sources of social support from friends (friend support) are crucial in the developmental stage of emerging adulthood.

On the source of social support from the family (family support), it is known that the family provides space for adolescents to become adults and independent but does not ignore the support needed by adolescents. This has a significant impact on student academic achievement. This is supported by the results of research conducted by DeFauw et al. (2018), which shows that family involvement in student academic achievement is demonstrated through fulfilling social, emotional, spiritual, and financial needs. Six main factors affect student academic achievement, including frequency of contact with family, parental financial involvement, individual independence, academic level of siblings, parental, spiritual involvement, and parental educational status. This is in line with Sarason, Sarason, & Pierce (1990; Dupont, Galand, & Nils, 2015), which states that family support can provide a sense of security that allows individuals to explore, actively participate, and experiment in various life experiences, including life experiences—learning as the basis of social skills and selfconfidence (Dupont, Galand, & Nils, 2015; Sarason, Sarason, & Pierce, 1990). The source of social support from someone special (such as a girlfriend or closest friend) was related to research conducted by Zimet et al. (1988), which states that significant other support provides meaning in an individual's life and makes the individual feel comfortable and feel valued. Significant others in an individual's life play a role in helping manage his psychological condition and emotional burden. In addition, social support from significant others was found to positively influence the degree of individual mental health in the student age group (Alsubaie et al., 2019; Kugbey, 2015). This is supported by research conducted by Song, Son, & Lin (2011), which states that the presence of significant others can be a place to share tasks, be a resource for various aspects of life, be it material, supplies, skills, and even additional cognitive guidance, which can help individuals deal with multiple individual life situations.

In general, the study results also illustrate that the participants' mental health is in the moderate category. This shows that most individuals are in a relatively prosperous state through awareness of their abilities, can cope with the stresses of life, work productively and fruitfully, and contribute to their community. The positive emotional aspect of most of the participants is in the medium category and is the aspect that individuals mainly own compared to other elements. However, as a contrast, parts of feelings of love and life satisfaction are in a low category. This indicates that most of the participants do not have complete psychological well-being. Individuals who follow the dimensions of psychological well-being and positive attitudes are necessary to develop because individuals will be happier and feel satisfied in their lives (Winefield, Winefield, & Tiggemann, 1992). Psychological well-being at this stage of development is an important step that must be achieved. Individuals have happiness due to early life satisfaction conducted later (Papalia, Olds, & Feldman, 2009). Generally, individual failure in this stage occurs because of environmental conditions, both family and community, which do not have a significant role in the emotional state of the individual (Winefield, Winefield, & Tiggemann, 1992). As for several other aspects that follow the dimensions of psychological distress on the mental health degree variable, anxiety is mainly in the moderate category, depression is primarily in the low sort, and loss of control is primarily from the high class. This indicates that most of the participants have not had the potential to develop psychological distress at the level of depression. Still, increased anxiety and loss of control need to be a concern at this time. In this regard, life as a student is generally an important and most impactful period for mental health problems. Research conducted by James et al. (2017; Granieri, Franzoi, & Chung, 2021) stated that students consistently reported the level of difficulty they faced more often than the general population. This is because college students are often characterized by high depression, anxiety, and suicide risk. In addition, stress related to academic activities, health, and lack of social support is also predicted to affect an individual's mental health status negatively.

The data processing results based on age showed that on the variable source of social support and the varying degree of mental health, the age group 21 - 23 years had the highest value compared to other age groups. Sources of social support and the degree of mental health of the 21-23-year-old



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participants were also mainly in the moderate category. In this regard, in his research, Arnett (2015) states that one of the stages of human development that is most likely to impact mental health is emerging adulthood. In emerging adulthood, individuals aged 18-25 years will face a developmental task of self-exploration with responsibilities for independence, social roles, and normative expectations from the social environment. This is in line with research conducted by Rahmania and Tasaufi (2020), which found that social support in support groups positively impacts emerging adulthood. Therefore, to face these developmental challenges, the existence of sources of social support will undoubtedly play a role in optimizing the welfare of individuals.

5. Conclusion

Based on the results of the research that has been conducted, it was found that there is a significant relationship between sources of social support and the degree of mental health in emerging adulthood students at Universitas Hasanuddin. The correlation level obtained from the data processing results is 0.445, a value included in the moderate relationship criteria. This shows that the relationship between sources of social support and the degree of mental health in emerging adulthood at Universitas Hasanuddin students is within reasonable standards according to the correlation coefficient criteria used as a reference. This study also found that friend support was the most common source of social support for participants compared to other sources of social support, and most of the participants' mental health degrees were in the moderate category.

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