
A STUDY ON GENDER DIFFERENCE IN THE LEVEL OF SOCIAL SUPPORT PERCEIVED BY RURAL AND URBAN ADOLESCENTS

Shatabdi Das

Osmania University, Department Of Psychology, Hyderabad,
Telangana State -500007, Shatudas@gmail.com

Abstract: The empirical paper was advanced to compare and determine the gender difference in level of social support perceived by adolescents hailing from rural and urban sectors. For the purpose of the study sample selection was done by using Random sampling method and consisted of 101 participants, with 51 adolescent girls and 50 adolescent boys, and 51 rural adolescent and 50 urban adolescent. The data collection was done from Hyderabad (Urban sample), Adilabad and Nalgonda Districts (rural sample), in Telangana State. Social Support Questionnaire (SSQ) an Indian adaptation, in Hindi language (Nehra et al., 1998), of the Pollack and Harris scale (Pollack and Harris, 1993) was administered on the selected samples of adolescent girls and boys from rural and urban areas to measure the perceived social support. The items in the scale refer to help, concern, support, reinforcement and criticism that a person gets from one's family, friends, social acquaintances and working colleagues. The result analysis indicated no statistically significant difference in the level of social support perceived to be received by adolescent girls and boys. Further it was also found that there exists no statistically significant difference in the level of social support perceived to be received by rural and urban adolescents.

Keywords: Gender Differences, Social Support, Adolescents, Rural And Urban Sectors.

Introduction: Man is a social being. His social relations are essential to his existence. Some of the biologists think that the "social instinct" is cultivated in man because of his inability to cope with nature single-handed; therefore, the biological instinct of self-preservation is the basis of his social instinct. We cannot help but disagree with the biologists in our study of the psychological aspects of human effort and activity. We do not deny that part of the social urge is connected with self-preservation, yet it is incorrect to say that this is entirely so. The urge to love is present in man. This urge, seeks an outlet in his various thought patterns and activities. Man does not seem to be happy until or unless he can express love and have it from others. He cannot satisfy the urge of love without being socially conscious. Even animals give evidence of having social instincts beyond the point of self-preservation. There are psychological reasons for the social tendencies in man. He wants to express his emotions of love and sympathy and he wishes the same from others. Men and women are miserable if they do not have the love and sympathy of others. They can bear all sorts of struggles, pain, and agony if they are assured of sympathetic consideration and a little expression of love from those around them. The mental life of an individual does not develop and does not have satisfaction without the opportunity for the expression of love and sympathy.

Social support is a human interaction in which social, emotional, instrumental, and recreational resources are exchanged. Social support in general, and the availability of help from family or friends, is positively associated with medication adherence. An assessment of a person's perception of, and need for, a social support network can be as important as the person's readiness to change when determining his or her level of motivation. This social phenomenon is associated with stress, depression, and mental health problems. The notion of social support includes both social embeddedness and emotional support that informs the people suffering from diseases that they are valued and cared about (Cobb, 1976). Social support, either elicited or provided spontaneously, goes a long way in determining how people deal with the life challenges and threats. Supportive interactions and the presence of supportive

relationships in peoples' lives have been shown to play a major role in emotional well-being and physical health. Mother Teresa said it best: "Being unwanted is the worst disease that any human being can ever experience" (as quoted in Muggeridge, 1997, p.17). Although supportive ties may create dilemmas for both the providers as well as the recipients of social support, belongingness to a reliable support system of kin and friends often reduces the risk of disease and enhances the recovery from mental and physical illness (Uchino, Uno, & Holt-Lunstad, 1999).

Life's major changes are experienced during adolescence – academic pressure, gaining independence from parents, intimate relationships with peers, physical maturation, starting romantic relationships, expectations from parents, etc. – are accompanied by a drastic increase in the frequency at which stressful events occur (Hankin, B. L., Mermelstein, R., & Roesch, L. (2007). Social support has been proposed as one of the protective factors to stress that include social systems as a source of well-being (Cohen, S., & Wills, T. A., 1985). Particularly in children and adolescents studies, social support is seen as a manifestation of community social capital (Ellonen, N., Kääriäinen, J., & Autio, V., 2008). The main sources for adolescents are family, peers, college mates and staff, cultural, sports, social organisations and groups, and online social networks. Parental support deficits, and not peers', have been shown to predict depressive symptoms (Stice, E., Ragan, J., & Randall, P., 2004). Social support has been found to be protector to distress, seeking help strategies will be essential to cope with interpersonal stress.

Adolescence is a time of tremendous growth and change. It can also be a time of stress and uncertainty that can lead to increasing levels of both internalizing and externalizing distress for some adolescents. However, supportive relationships have been shown to buffer against the deleterious effects of stress (Malecki & Demaray, 2006) and contribute to adaptive outcomes during this developmental period (Harter & Whitesell, 1996). In addition, there have been suggestions that early adolescence could be an ideal time to intervene in a preventative way, that is, to prevent the development of negative outcomes in later adolescence, and facilitate a healthy trajectory of psychosocial development (Colarossi & Eccles, 2003). Thus, continuing in the quest to understand the role of social support on various outcomes in this developmental time period will be especially important as the literature begins to inform prevention efforts in schools as well as clinical settings.

Nautiyal R, Velayudhan A, Gayatri Devi S (2017), in their study examined the perceived social support of the adolescents in an urban and a rural setting. Multidimensional Scale of Perceived Social Support (MSPSS) developed by Zimet, Dahlam, Zimet and Farley (1988) was used in the present study. Based on the statistical analysis the results indicate that the adolescents from urban feel that the social support that they receive from their family is less as compared to their rural counterparts. However there was no significant difference found in the way adolescent's judged support from their friends or significant others. The data also illustrated that there was a significance difference in the way adolescents perceive social support with rural teenagers having a more positive social support than the urban teenagers. The data obtained indicated that adolescent boys felt they got more social support from their friends than their female counterparts. However the females felt their significant others provided more support to them than what the boys got from their significant others.

Tam.C. L, et.al (2011), examined the relationship between self-esteem and perceived social support among the Malaysian adolescents. Gender differences of perceived social support and self-esteem among the respondents were also investigated. To achieve the objectives of the study, a survey was conducted with a relatively large (n=460) random samples of adolescents, aged 16-20, drawn from schools, colleges and universities in Malaysia. The Self-esteem Rating Scale (SERS) and the Multidimensional Scale of Perceived Social Support (MSPSS) were used in the study. The results indicated that there were no gender differences in perceived social support and self-esteem among adolescents. However, a positive correlation was found between perceived social support and self-esteem. The study also found peer support was the highest form of perceived social support.

Rueger, S.Y., Malecki, C.K., & Demaray, M.K. (2008), in their study investigated the early adolescents' perceptions of social support from parents, teachers, classmates, and close friends, and how that support

is related to measures of students' adjustment on a range of behavioural indices. Data were collected on a sample of 246 students in Grades 6 through 8 using the Child and Adolescent Social Support Scale (CASSS), and the Parent Rating Scale of the Behavior Assessment System for Children (BASC-PRS). Analyses using the social support subscale scores (Parent, Teacher, Classmate, and Close Friend) replicated past research in finding gender differences on mean levels of perceived social support, with girls perceiving higher levels of classmate and close friend support than boys. In addition, girls reported significantly more support from close friends than any other source, whereas boys reported significantly less support from classmates than any other source. Finally, results demonstrated gender differences in the relationship between social support and several indices of student adjustment, and provided evidence for the importance of considering gender differences in planning future research related to social support.

Colarossi. L. G., (2001), in the he study survey data on 364 adolescents to examine gender differences in perceptions of support across three different constructs: (1) structural support related to the number of adults versus friends; (2) the quantity of support provided by mothers, fathers, peers, and teachers; (3) satisfaction with support from friends and family. Results indicate that young women report a greater number of supportive friends and receive more frequent support from their friends than do young men. However, young men are just as satisfied with friend support as are young women. No gender differences were found in the number of adult supporters, but males received more frequent support from fathers. Non-parental adults emerged as important sources of support for both genders.

Methodology:

Aim: The study aims to compare and determine the difference in level of social support perceived by adolescent girls and boys and from rural and urban sector.

Hypotheses: Null Hypotheses were formed as follows;

1. There will be no significant difference in the level of social support perceived by adolescent Girls and Boys.
2. There will be no significant difference in the level of social support perceived by Rural and Urban adolescents.

Test Material Used: Social Support Questionnaire (SSQ) an Indian adaptation, by Nehra et al., (1998), of the Pollack and Harris scale (Pollack and Harris, 1993) was used to measure the perceived social support. It has 19 items, a higher score indicates more perceived social support. The items in the scale refer to help, concern, support, reinforcement and criticism that a person gets from one's family, friends, social acquaintances and working colleagues. It has a test-retest reliability of 0.59 and correlation with clinician's assessment at 0.80 and with items of social support from Family Interactions Pattern Scale (Bhatti et al., 1986) at 0.65.

Sample Selection: The sample selection was done by using Random sampling method and consisted of 101 participants, with 51 adolescent girls and 50 adolescent boys, and 51 rural adolescent and 50 urban adolescent. The data collection was done from Hyderabad (Urban sample), Adilabad and Nalgonda Districts (rural sample), in Telangana State.

Procedure: The Social Support Questionnaire (SSQ) was administered on the selected samples of adolescent Girls and Boys from rural and urban sectors. After the collections of the data scoring was done with the help of the guidelines provided in the manual to determine the level of social support perceived by the sample.

Statistics Used: For the analysis and interpretation of the data the statistical Mean, Standard deviation, Variance and t- test were done.

Results & Discussion:

Table No. 1: Shows the statistical Mean, Standard deviation, Variance and t- test values for Gender difference in level of social support perceived by adolescents.

	Adolescent Girls	Adolescent Boys
Mean	48.313	47.222
SD	4.8	4.9
Variance	23.6	24.134
Observations (N)	51	50
df	99	
t- test value P(T<=t) two-tailed	0.26	
t Critical two-tailed value	1.98	
Significance	NS	

From the results depicted in Table No. 1, the scores on level of social support perceived to be received by adolescent girls and boys, when statistically calculated were found to be as follows, the mean for level of social support perceived to be received by adolescent girls is 48.313 and for adolescent boys it is 47.222. The SD was found to be 4.8 and 4.9 respectively for adolescent girls and boys. The variance score was found to be 23.6 and 24.134 for adolescent girls and boys respectively. With N= 101, and df = 99, the t-test value on two tailed test was found to be 0.26, as the critical value of 1.98 was more than the t- test value, it determined that there were no statistically significant difference in the level of social support perceived to be received by adolescent girls and boys. Thus, leading to acceptance of the null hypothesis -1, that is, "There will be no significant difference in the level of social support perceived by adolescent Girls and Boys".

Table No. 2: Shows the statistical Mean, Standard deviation, Variance and t- test values for difference in level of social support perceived by rural and urban adolescents.

	Rural Adolescents	Urban Adolescents
Mean	47.17	48.38
SD	4.5	5.17
Variance	20.9	26.7
Observations (N)	51	50
df	97	
t- test value P(T<=t) two-tailed	0.218	
t Critical two-tailed value	1.98	
Significance	NS	

From the results depicted in Table No. 2, the scores on level of social support perceived to be received by rural and urban adolescents, when statistically calculated were found to be as follows, the mean for level of social support perceived to be received by rural adolescents was 47.17 and for urban adolescents it was 48.38. The SD was found to be 4.5 and 5.17 respectively for rural and urban adolescents. The variance score was found to be 20.9 and 26.7 for rural and urban adolescents respectively. With N= 101 and df = 97, the t-test value on two tailed test was found to be 0.218, as the critical value of 1.98 was more than the t- test value, it determined that there were no statistically significant difference in the level of social support perceived to be received by rural and urban adolescents . Thus, leading to acceptance of the null

hypothesis -2, that is, "There will be no significant difference in the level of social support perceived by Rural and Urban adolescents".

Conclusion: From the present study it can be concluded that, there exists no statistically significant difference in the level of social support perceived to be received by adolescent girls and boys. The reason can be attributed to better social support network used by both adolescent girls and boys of today's generation. Further it was also found that there exists no statistically significant difference in the level of social support perceived to be received by rural and urban adolescents. So, the reason cannot be attributed to the difference in the lifestyles of those living in rural or urban sectors. Thus, the results can be considered as an indicator of influence on maintenance of better living of the young generation, irrespective of the influence of gender or living areas.

References:

1. Cobb, S. (1976). *Social support as a moderator of life stress*; Psychosomatic Medicine, 38, 300-314.
2. Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. Psychological Bulletin, 98, 310-357.[Crossref], [PubMed], [Web of Science ®][Google Scholar]
3. Colarossi, L. G., (2001), Adolescent gender differences in social support: Structure, function, and provider type; *Social Work Research*, Volume 25, Issue 4, 1 December 2001, Pages 233-241, <https://doi.org/10.1093/swr/25.4.233>
4. Colarossi, L.G., and Jacquelynne S. Eccles. 2003. "Differential effects of support providers on adolescents' mental health." *Social Work Research*, 27(1), 19-30.
5. Ellonen, N., Kääriäinen, J., & Autio, V. (2008). Adolescent depression and school social support: A multilevel analysis of a Finnish sample. *Journal of Community Psychology*, 36, 552-567.[Crossref], [Web of Science ®][Google Scholar]
6. Hankin, B. L., Mermelstein, R., & Roesch, L. (2007). Sex differences in adolescent depression: Stress exposure and reactivity models. *Child development*, 78, 279-295.
7. [Crossref], [PubMed], [Web of Science ®] [Google Scholar]
8. Harter, S., Marold, D. B., Whitesell, N. R., & Cobbs, G. (1996). A model of the effects of perceived parent and peer support on adolescent false self behavior. *Child Development*, 67(2), 360-374. <http://dx.doi.org/10.2307/1131819>
9. Malecki, C. K., & Demaray, M. K. (2006). Social support as a buffer in the relationship between socioeconomic status and academic performance. *School Psychology Quarterly*, 21, 375-395.[Crossref], [Web of Science ®][Google Scholar]
10. Muggerridge, M. (1997, September 9). In a 1968 BBC interview: Being unwanted is the worst disease. *Daily Telegraph*, p. 17.
11. Nautiyal R, Velayudhan A, Gayatri Devi S (2017), Perceived Social Support of the Adolescents from Rural and Urban Setting, *International Journal of Indian Psychology*, Volume 4, Issue 2, No. 89, ISSN:2348-5396 (e), ISSN:2349-3429 (p), DIP:18.01.098/20170402, ISBN:978-1-365-74162-3
12. Rueger, S.Y., Malecki, C.K., & Demaray, M.K. (2008). Gender differences in the relationship between perceived social support and student adjustment during early adolescence. *School Psychology Quarterly*, 23(4), 490-514. DOI: 10.1037/1045-3830.23.4.496
13. Stice, E., Ragan, J., & Randall, P. (2004). Prospective relations between social support and depression: Differential direction of effects for parent and peer support? *Journal of Abnormal Psychology*, 113, 155-159.[Crossref], [PubMed], [Web of Science ®] [Google Scholar]
14. Tam, C. L, Lee, T.H, Har, W. M, & Pook, W. L. (2011), Perceived Social Support and Self-Esteem towards Gender Roles: Contributing Factors in Adolescents; *Asian Social Science* ; Vol. 7, No. 8; August 2011; doi:10.5539/ass.v7n8p49, www.ccsenet.org/ass.
15. Uchino, B. N., Uno, D., & Holt-Lunstad, J. (1999). Social support, physiological processes, and health. *Current Directions in Psychological Science*, 8, 145-148.
