

THE ROLE OF PERCEIVED SOCIAL SUPPORT ON PSYCHOLOGICAL DISTRESS (STUDY ON EMERGING ADULthood IN JAKARTA DURING THE COVID-19 PANDEMIC)

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ABSTRACT

The COVID-19 pandemic that has lasted for three years had a negative psychological impact. Individuals feel depression, anxiety, restlessness, mental exhaustion, and feelings of worthlessness. The above condition is called psychological distress. This is felt by every individual, including emerging adulthood. In the developmental stage, early adult individuals are in a transitional period where there are changes in life that make individuals subject to psychological stress. Psychological distress is predicted by perceived social support [16]. Perceived social support can reduce the level of psychological distress. The purpose of this study was to determine the description of psychological distress and perceived social support, as well as to examine the role of perceived social support on psychological distress but in early adulthood in Jakarta. This study uses a non-experimental quantitative study method. Based on data analysis, the level of psychological distress of early adult individuals in Jakarta is low. Meanwhile, the level of perceived social support is quite high. Then, perceived social support is not significantly related to psychological distress. Thus, perceived social support may not necessarily reduce the level of psychological distress.

Keywords: Perceived social support, psychological distress, emerging adulthood, covid-19, pandemic

1. PREFACE

Today, the COVID-19 pandemic has become a major problem for every country. Based on data from the worldometer [1] as of September 19, 2021, there are 223 countries affected by the COVID-19 pandemic with a total case of 229.059,017. The Indonesian nation is also inseparable from the spread of the COVID-19 virus. The case of COVID-19 in Indonesia was first reported on March 2, 2020, by President Joko Widodo, where since the first case until now the cases have been increasing [2]. The number of COVID-19 cases as of September 3, 2021, is 4,116,890 [3].

The condition of the COVID-19 pandemic generally has a negative impact on psychological conditions. The Indonesian COVID-19 Task Force stated that 80% of the problems in the COVID-19 pandemic were psychological problems. This is supported by research conducted by the Indonesian Psychiatric Association showing that of the 1,552 respondents, 63% experienced anxiety, and 66% experienced depression due to the COVID-19 pandemic [4].

The Association of Indonesian Mental Medicine Specialists and the Indonesian Clinical Psychology Association collaborated to conduct research on the psychological condition of the community amid the COVID-19 pandemic.

The results of the study describe data related to several psychological problems, especially in the early adult age group. Symptoms of anxiety in the age group of 20-29 years by 71.5 percent and

in the age group of 30-39 years by 58.8 percent. On symptoms of depression 48 percent of respondents think it is better to die or want to hurt themselves in any way and it occurs in the age range of 18-29 years. Meanwhile, 73.4 percent of psychological trauma occurred at the age of 20-29 years and 76.5 percent at the age of 30-39 years [5]. This is supported by research conducted by Condinata et al. [6] who found that the level of psychological distress in emerging adulthood was moderate or average. In other words, early adult individuals feel quite psychological distress.

A psychological problem that can also occur during the COVID-19 pandemic is anxiety. Anxiety occurs when the public hears information that the number of COVID-19 cases continues to increase [7]. The new variant of the COVID-19 virus that continues to emerge in the world, including in Indonesia, makes people more anxious and worried [8]. Mental fatigue is one of the effects of the COVID-19 pandemic. The prolonged COVID-19 pandemic can make many people feel psychologically exhausted. Factors such as age, physical condition, mental status, and gender also encourage a person to experience fatigue [9].

The limitations that exist lead to feelings of depression that can manifest in feelings of worthlessness. Symptoms of depression from a psychological perspective include loss of self-confidence, sensitivity, feeling useless, feeling guilty and feeling burdened [10]. Feeling useless is one of the characteristics of someone experiencing psychological problems [11].

The events above are known as psychological distress. Kessler states that psychological distress is a condition characterized by symptoms or characteristics in the form of: (a) depression, which is a condition with symptoms such as sadness, loss of hope, and feeling very depressed; (b) restlessness (c) fatigue; (d) guilt; and (e) anxiety.

Psychological distress is an important thing to be discussed in depth. Psychological distress has an impact on sleep quality [12]. Individuals who experience psychological stress such as feeling hopeless, feeling depressed, feeling restless, and feeling tired can relate to decreased sleep quality such as reduced sleep time, and others. Psychological distress can have a more fatal impact, namely death [13]. Individuals who feel hopeless, feel depressed, feel restless, and feel tired can increase the risk of death from both chronic diseases. Psychological distress at all levels is associated with increased mortality from several causes such as chronic diseases, especially cardiovascular (CVD), ischemic heart disease, and heart failure. Death related to psychological distress may also be caused by suicide. This is because individuals feel that they are not strong enough with the pressure they experience so they decide to commit suicide [13].

Psychological distress is predicted by perceived social support [14,15,16]. Perceived social support is an individual's perception of the adequacy of receiving social support from three specific sources, namely family, friends, and closest people. [17]. The results of the three studies state that perceived social support has a significant negative relationship with psychological distress. research by Urano and Ikeda states that when individuals have high perceived social support, the effect of maladaptive strategies that can increase psychological distress is weak. Maladaptive strategies, for example, are blaming yourself for problems or events that occur. Thus, if there is perceived social support, even though the individual blames himself, he will not feel too depressed. In addition, perceived social support reduces maladaptive strategies, and perceived social support can also weaken the effects of adaptive strategies. Adaptive strategies, for example, are taking positive things from problems or events that occur. Thus, if there is perceived social support, individuals will not feel too depressed without having to take positive

things from the problems or events that occur. Thus, it can be concluded that perceived social support can predict psychological distress.

Research conducted by Khatiwada et al., Reti et al., Urano and Ikeda have successfully tested the role of perceived social support on psychological distress. However, these studies have not discussed the role of perceived social support on psychological distress in the early adult age group (18-25 years). There are two reasons why the role of perceived social support on psychological distress studied in the early adult age group will be different from previous research. Both reasons will be discussed in the next paragraph.

In the research of Chan et al. there are differences in psychological distress in each age group, Research from Chan et al. found that most of the younger participants (18 – 25 years) experienced the highest stress compared to the young adult age group (26 – 40 years) and the middle adult age group (40 – 60 years). This is because early adulthood at the age of 18 to 25 years is a period of transition from adolescence to adulthood which has risk factors due to stressors associated with biological changes and specific events of early adult life, namely graduating from school, entering college, starting a career, starting a career. romance and gain greater independence [18, 19]. The changes and uncertainties that occur make individuals in early adulthood experience stress and depression [20].

In addition to different psychological distress at certain age stages, there is a reason that perceived social support is different in emerging adulthood and the young adult age group. In the early adult age group, it was found that perceived social support was lower than in the young adult age group [21]. Perceived social support comes from family, friends, and special people (friends and boyfriends) [17]. Arnett says that individuals in early adulthood are more dependent on friends for social support compared to the family because, in early adulthood, individuals tend to leave home to show their independence. This can make the social support received from the family to be low. Individuals at this age also tend to just start building a romantic relationship and do not necessarily immediately have a partner that suits them so it is possible that social support from their partner is not yet stable. [22].

Based on the phenomena, urgency, previous research, and the arguments that the authors propose above, in this study the researchers wanted to examine the role of perceived social support on psychological distress in early adulthood in Jakarta. It is hoped that this study will provide further explanation of the research conducted by Khatiwada et al., Reti et al., Urano and Ikeda.

Psychological distress

Veit and Ware state psychological distress as a form of mental health aspect, where individuals experience anxiety, depression, and loss of behavioral/emotional control. Kessler states that psychological distress consists of five dimensions, namely (a) depression, namely conditions with symptoms such as sadness, loss of hope, and feeling very depressed; (b) restlessness (c) fatigue; (d) worthless guilt; and (e) anxiety. Another opinion from Ross and Mirowsky & Ross states that psychological distress is an unpleasant subjective state of depression and anxiety, which has emotional and physiological manifestations. Thus, it can be concluded that psychological distress is a subjective condition characterized by symptoms or characteristics in the form of depression, anxiety, anxiety, fatigue, and a sense of worthless guilt.

Perceived social support

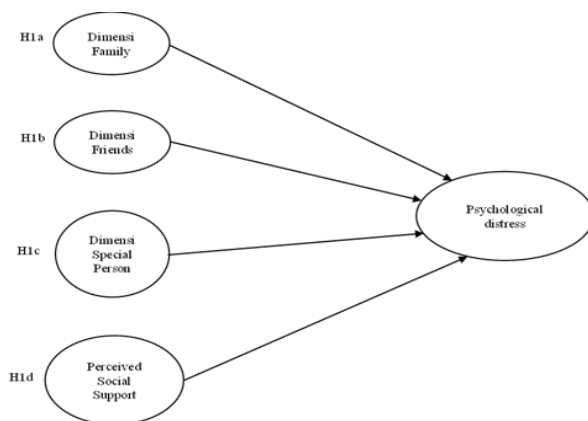
Social support is an individual's belief that his needs for support, information, and feedback are met by friends and family. [26]. Zimet et al. states that perceived social support is an individual's perception of the adequacy of receiving social support from three specific sources, namely family, friends, and closest people. Zimet et al. stated that perceived social support consists of three dimensions, namely support from friends, support from family, and support from other important people.

Theoretical framework

Psychological distress is predicted by perceived social support [15]. Zimet et al. states that perceived social support is an individual's perception of the adequacy of receiving social support from three specific sources, namely family, friends, and closest people. This is explained by stress and coping social support theory, where one hypothesis states that social support is a stable resource that reduces the negative impact of an event. The social support theory of stress and coping predicts that social support reduces levels of depression as a result of the negative event [27]. Based on the description above, the framework of thinking in this study can be described as follows.

Figure 1

The Role of Perceived Social Support on Psychological Distress



Based on the framework of thinking above, the hypothesis in this study is as follows.

H1a: Perceived social support from family plays a role in psychological distress

H1b: Perceived social support from friends plays a role in psychological distress

H1c: Perceived social support from special people contributes to psychological distress

H1d: Perceived social support plays a role in psychological distress

2. RESEARCH METHODS

Participant

This study uses a non-experimental quantitative study method with a survey as a research data collection technique. The criteria for participating in this study are individuals aged 18-25 years who live in DKI Jakarta and are in school or college or work during the COVID-19 pandemic. In the study there were 574 participants consisting of 344 women (59.9%) and 230 men (40.1%).

In this study, the domiciles of the participants were spread to five administrative cities in DKI Jakarta, 343 participants were in the administrative city of West Jakarta (59.8%), 74 participants were in the administrative city of North Jakarta (12.9%), 65 participants were in the administrative city of East Jakarta (11.3%), 51 participants were in the administrative city of

South Jakarta (8.9%), and 41 participants were in the administrative city of Central Jakarta (7.1%).

Social economic status is divided into three categories, namely below average, average, and above average. In this study, as many as 202 participants (35.2%) had a socioeconomic status below the average, 206 participants (35.9%) had an average socioeconomic status and 166 participants (28.9%) had an above average socioeconomic status.

A total of 387 participants (67.4%) in this study were single (unmarried) and did not have a partner, 174 participants (30.3%) had single relationship status (unmarried) but had a partner, and 13 participants (2.3%) had relationship status. married relationship.

Measures

The independent variable in this study is perceived social support, which is measured using the Multidimensional Scale of Perceived Social Support (MSPSS) (Cronbach's $\alpha = 0.93$) which was compiled by Zimet, et al. The MSPSS consists of three dimensions, where each dimension consists of 4 items, so that the total items of the MSPSS are 12 items. An example item would be "how often do you feel so depressed that nothing can comfort you?" which describes depression, "how often do you feel restless?" which describes anxiety.

The dependent variable in this study was psychological distress, which was measured using the Kessler Psychological Distress Scale (K10) (Cronbach's $\alpha = 0.92$) which was compiled by Kessler, et al. K10 consists of two dimensions, namely depression and anxiety. The depression dimension consists of six items and the anxiety dimension consists of four items, so that the total K10 items are ten items. Examples of items are "there is a special person who is around when I am in need", "I get the emotional help and support I need from my family", "I have friends with whom I can share my joys and sorrows".

3. RESULTS

The description of each variable is obtained by processing the data using descriptive statistical analysis. An overview of each variable is presented in Table 1.

Table 1

Descriptive Statistics of The Study Variables

Variabel	Mean	SD
Psychological distress	2.71	0.93
Dimensions of psychological distress (Depression)	2.76	0.92
Dimensions of psychological distress (Anxiety)	2.63	1.08
Perceived Social Support	4.54	1.13
Dimensions of perceived social support (Family)	4.58	1.45
Dimensions of perceived social support (Friends)	5.13	1.73
Dimensions of perceived social support (Special Person)	3.91	1.43

Based on the results of the normality test, the perceived social support was generally normally distributed. The results of the normality test showed a significance above 0.05. However, the dimensions of social support and psychological distress are not normally distributed. The results of the normality test showed a significance below 0.05. Therefore, the Spearman correlation test was used to examine the relationship between perceived social support and psychological distress. By using the Spearman Brown correlation test method, at an alpha level of 0.05, there is significant negative relationship between perceived social support (M=4.54, SD=1.13) and psychological distress (M=2.71, SD=0.93), $r_s(574) = -0.238$, $p < 0.05$. This means that perceived social support is able to reduce the level of psychological distress. Thus, hypothesis 1d can be supported by the results of this study.

Meanwhile, for perceived social support from family, using the Spearman Brown correlation method test, at an alpha level of 0.05, there is significant negative relationship between perceived social support from family (M=4.58, SD=1.45) and psychological distress (M= 2.71, SD=0.93), $r_s(574) = -0.296$, $p < 0.05$. This means that social support from the family may reduce the level of psychological distress. Thus, hypothesis 1a can be supported by the results of this study.

Then for perceived social support from friends, using the Spearman Brown correlation method, at an alpha level of 0.05, there is significant negative relationship between perceived social (M=5.13, SD=1.73) and psychological distress (M=2.71 , SD=0.93), $r_s(574) = -0.169$, $p < 0.05$. This means that social support from friends may reduce the level of psychological distress. Thus, hypothesis one b can be supported by the results of this study. Then for the perceived social support of the special person, using the Spearman Brown correlation method, at an alpha level of 0.05, there is between the perceived social support of the special person (M=3.91, SD=1.43) and psychological distress (M =2.71, SD=0.93), $r_s(574) = -0.117$, $p < 0.05$. This means that social

support from special people may reduce the level of psychological distress. Thus, hypothesis one c can be supported by results of this study. For more details can be seen in Table 1.

Table 2

Correlation Test Result Perceived Social Support and Psychological Distress

Variable	Psychological Distress	
	r	Sig.
Perceived Social Support	-0.238	0.000
Variable dimensions (Family)	-0.296	0.000
Variable dimensions (Friends)	-0.169	0.000
Variable dimensions (Special Person)	-0.117	0.005

The results of this study are in line with research conducted by Khatiwada et al., Reti et al., Urano and Ikeda who stated that there was a significant relationship between perceived social support and psychological distress. Thus, perceived social support can reduce the level of psychological distress. Further research can also consider to test variable self-esteem as a factor that can reduce psychological distress [28]. Further research can also conduct experiments by applying art therapy to reduce the perceived psychological distress [29].

There are some limitations to this study. The number of participants in this study was less than the number of participants in the previous study, where the number of participants in this study was only 574 participants, while the number of participants in the previous study was 1200 participants. The number of participants can affect the results of the study so that more participants can ensure the accuracy of the research results. Then, in this study, the researchers also did not include samples from the thousand islands, where a thousand islands are part of the DKI Jakarta Province. Therefore, it is important to include data from the Thousand Islands area.

4. CONCLUSION AND RECOMMENDATION

Based on the results of data analysis that has been carried out on the relationship between perceived social support and psychological pressure in new adulthood in Jakarta during the COVID-19 pandemic, it can be concluded that there is a significant negative relationship between perceived social support and psychological pressure in emerging adulthood in Jakarta during the pandemic. COVID-19. Then there is also a significant negative relationship between the perceived dimensions of social support and psychological distress.

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