



A Study on Family Support, Social Support and Mental Well-Being among Generation Z Students in Semi-Urban and Rural Karnataka

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ABSTRACT

Background: The mental health of Generation Z (born 1997–2012) students in semi-urban and rural educational environments in India has not been extensively studied. Family and social support systems are considered crucial protective factors in areas where formal mental health services are scarce.

Objectives: This study investigated the levels of family and social support and mental well-being among Generation Z students in Holenarasipura Taluka, Hassan District, Karnataka, and explored the relationship between these factors.

Methods: We conducted a cross-sectional descriptive-correlational study with 196 undergraduate and postgraduate students chosen through convenience sampling during the 2025–2026 academic year. The Warwick–Edinburgh Mental Well-Being Scale (WEMWBS) was used to evaluate mental well-being, and the Family and Social Support Scale (FSSS) measured perceived support. Data analysis involved descriptive statistics, Pearson's correlation, independent samples t-tests, and simple linear regression using IBM SPSS Statistics for Windows, version 26.0.

Results: Most participants indicated moderate to high levels of perceived support (88.3%) and mental well-being (96.4%). There was a significant positive correlation between family and social support and mental well-being ($r = .335, p < .01$). Regression analysis revealed that family and social support were significant predictors of mental well-being ($\beta = .335, p < .001$), accounting for 11.2% of the variance. No significant gender differences were found. However, postgraduate students reported higher perceived support than undergraduates, whereas students with disabilities showed lower mental well-being.

Conclusion: The results underscore the protective role of family and social support in enhancing the mental well-being of Generation Z students and highlight the importance of inclusive counseling and peer-support services in higher-education institutions.

INTRODUCTION

Mental health has emerged as one of the most pressing public health challenges of the 21st century, garnering increasing attention from researchers, clinicians, and policymakers worldwide. The burden of psychological distress is particularly pronounced among young adults navigating the demanding transitions associated with higher education, a period characterized by identity formation, academic pressures, social reconfiguration, and the gradual assumption of adult responsibilities. Within this broader demographic, Generation Z a cohort typically defined as individuals born between 1997 and 2012 (Twenge, 2017) occupies a particularly significant position. This generation has come of age in an era defined by unprecedented technological connectivity, social media ubiquity, information overload, and rapidly shifting social norms, all of which exert a measurable and often adverse influence on their psychological health and overall well-being (Twenge et al., 2018). Unlike preceding generations that encountered digital technology in later stages of development, Gen Z has been immersed in online environments from early childhood, making them simultaneously adept navigators of the digital world and uniquely vulnerable to its psychological consequences.

Mental health challenges confronting Generation Z emerge from a complex interplay of social, academic, cultural, and technological factors. The pervasive use of digital technology and social media platforms fosters persistent social comparison, cyberbullying, and fear of missing out (FOMO), all strongly associated with elevated levels of anxiety, depression, and emotional exhaustion (Fadillah & Long, 2025; Roni, 2025). Concurrently, high academic demands and profound uncertainty about future career prospects generate significant burnout and hopelessness among students (Singh, 2025). However, Generation Z is not a generation defined solely by vulnerability. Research increasingly documents their openness to help-seeking behavior, their commitment to mental health advocacy, and their capacity for peer solidarity and purposeful social engagement, characteristics that reflect a meaningful degree of psychological resilience in the face of adversity.

In the Indian context, the mental health landscape for Gen Z students is further complicated by structural and sociocultural factors specific to the subcontinent. Students enrolled in semi-urban and rural educational institutions face compounded disadvantages, including limited access to mental health services, family financial pressures, entrenched social expectations around academic and professional achievement, and the scarcity of trained mental health professionals in non-metropolitan regions. Areas such as Holenarasipura Taluka in Hassan District, Karnataka, are emblematic of settings that have undergone rapid educational expansion but remain significantly underrepresented in mental health research literature. The disruptions caused by the COVID-19 pandemic have left lasting marks on the academic and psychological lives of students in these communities, compounding pre-existing stressors with prolonged isolation, learning disruption, and economic uncertainty (Deb et al., 2021; Grover et al., 2020).

Against this backdrop, family and social support have been identified as the most significant protective factors for young people experiencing psychological distress. Family support, encompassing parental warmth, emotional guidance, academic encouragement, and financial assistance, and social support, comprising peer relationships, community belonging, and institutional resources, collectively form the social scaffolding upon which individuals construct their capacity to cope with adversity (Cobb 1976; Cohen and Wills 1985; Holt-Lunstad et al. 2010). Students who perceive themselves as embedded within supportive social networks demonstrate significantly greater psychological resilience, more effective coping strategies, and substantially better mental health outcomes than those who lack such networks (Hefner & Eisenberg, 2009; Thoits, 2011). In communities where formal mental health infrastructure is limited, these informal support systems are not only beneficial but also essential.

Despite the growing volume of research on student mental health in India, relatively few studies have systematically examined the combined influence of family and social support on the mental well-being of Generation Z students in semi-urban and rural Karnataka. Therefore, this study was designed to address this gap by comprehensively assessing the levels of mental well-being and perceived support among Gen Z students in this region and rigorously investigating the relationships between family support, social support, and mental well-being within the specific sociocultural context of Karnataka.

THEORETICAL AND CONCEPTUAL FRAMEWORK

The theoretical architecture of this study is based on three complementary frameworks drawn from social psychology, cross-cultural psychology, and developmental science. According to the World Health Organization (2004), mental well-being denotes a positive state of psychological functioning in which individuals recognize their capabilities, manage the everyday stresses of life effectively, contribute productively to society, and maintain a sense of personal agency and purpose. For Gen Z students, this multidimensional construct encompasses not only the absence of psychological distress but also the presence of positive emotional functioning, a sense of academic and social belonging, and a meaningful orientation toward the future (Arslan, 2021; Auerbach et al., 2018).

Social Support Theory (Cohen & Wills, 1985)

This study is grounded in Cohen and Wills' (1985) social support theory, which provides a robust conceptual basis for understanding the mechanisms through which interpersonal relationships protect individuals from the adverse psychological effects of stress. The theory proposes two distinct but complementary mechanisms. The

main effect model posits that social connections exert a direct and positive influence on well-being, independent of any particular stressor, by providing individuals with a stable sense of belonging, affirmation, and emotional security. The stress-buffering model posits that social support attenuates the deleterious effects of stressors on mental health by equipping individuals with the emotional, informational, and practical resources necessary to appraise and respond to challenging circumstances more effectively. Both mechanisms are directly relevant to the present study: Generation Z students in semi-urban and rural Karnataka face a constellation of concurrent stressors while simultaneously relying on family and peer networks as their primary source of psychological support. Family and peer support serve as critical protective factors that mitigate emotional distress, facilitate adaptive coping, and strengthen psychological resilience (Prati & Pietrantonio, 2010; Rueger et al., 2016).

Collectivist Cultural Framework

The collectivist cultural framework is indispensable for contextualizing the meaning and operation of support relationships within the Indian sociocultural environment. Unlike individualist societies, collectivist societies such as India are characterized by deeply interconnected social structures in which individual identity, emotional well-being, and social behavior are fundamentally embedded within family and community contexts (Mishra, 2012). In such settings, family relationships are the central axis around which individuals organize their psychological and social lives. Research has consistently affirmed that the quality of family relationships, specifically, the presence of parental warmth, open communication, and emotional availability, is a more powerful predictor of adolescent and young adult well-being than family structure or socioeconomic status alone (Segrin & Flora, 2011).

Positive Youth Development and Resilience Framework

The positive youth development (PYD) framework offers a strength-based counterpoint to risk-focused models of adolescent and young adult psychology (Lerner et al., 2005). Rather than conceptualizing young people primarily in terms of their vulnerabilities, the PYD framework foregrounds their competencies, assets, and developmental potential. In addition, resilience theory posits that individuals are not passive victims of adversity but active agents who mobilize available personal and social resources to navigate, adapt to, and recover from difficult circumstances (Masten 2001). For Gen Z students in semi-urban and rural Karnataka, resilience is likely cultivated through the sustained quality of familial relationships, the strength of peer solidarity within educational communities, and the availability of supportive institutional environments.

Conceptual Framework

Integrating the three theoretical perspectives above, the conceptual framework situates mental well-being, comprising emotional, psychological, and social dimensions, as the central dependent variable. Family support (encompassing emotional warmth, financial provision, academic guidance, and parental encouragement) and social support (encompassing peer relationships, institutional resources, and community connectedness) are positioned as the primary independent variables. Demographic characteristics, including gender, type of educational institution, residential background, disability status, and year of study, are incorporated as moderating variables. Digital engagement is further acknowledged as a contextual variable reflecting Generation Z's online behavior.

REVIEW OF RELATED LITERATURE

Family Support and Mental Well-Being

Family support has been identified across multiple research traditions as a foundational protective factor in the psychological health of adolescents and young adults. Yang et al. 's(2022) study investigated the interplay among family support, coping strategies, and social support in shaping mental health outcomes among university students in China during the post-COVID-19 period. Their findings demonstrated a robust positive association between family support and mental health, with coping strategies serving as a significant mediating variable, and perceived social support moderating the association between family support and effective coping, suggesting that these three constructs operate in a mutually reinforcing manner. Kasingku et al. (2023) further established

that emotional support from family members directly enhances adolescents' capacity to manage everyday stress, while a stable and nurturing family environment empowers young people to pursue their aspirations and maintain psychological equilibrium. These insights are reinforced by Segrin and Flora (2011), who demonstrated that the qualitative dimensions of family relationships, notably parental warmth, emotional responsiveness, and open communication, constitute more decisive predictors of student well-being than the structural composition of the family unit alone.

Social Support and Psychological Outcomes

Social support, understood as emotional, informational, and instrumental assistance made available through interpersonal and community networks, has emerged as one of the most consistently identified predictors of positive mental health outcomes across developmental stages and cultural contexts. Latifah and Komarudin (2024) demonstrated that perceived social support accounted for as much as 50.6% of the variance in life meaning among Gen Z individuals. Achmad (2024) reported that social support contributed 17.5% to overall mental well-being, affirming that accessible and responsive support networks translate into meaningful psychological benefits for Gen Z students. Cilar Budler et al. (2025) confirmed a strong positive correlation between perceived multi-source social support and mental well-being across adolescent groups, while also revealing that both perceived support and mental well-being declined progressively with age during adolescence. Safitri and Rahman (2026) found that peer support, encompassing emotional validation, informational guidance, and practical assistance, functioned as a powerful resource that enhanced students' emotional strength and fortified their optimism during the quarter-life crisis period, advocating for the institutionalization of peer-based mentoring programs as a systemic strategy for promoting Gen Z well-being.

The Digital Era and Gen Z Mental Health

Budiman et al. (2025) conducted a rigorous scoping review of Gen Z mental health in the digital era, applying the PRISMA framework to synthesise findings from peer-reviewed studies published between 2021 and 2025. The review identified a broad constellation of determinants shaping Gen Z mental health, including perceived social support, family environment quality, academic stress, exposure to social media content, and individual coping mechanisms. The review confirmed that excessive or unregulated digital exposure is associated with significantly elevated levels of psychological distress, loneliness, and negative self-evaluation, whereas positive social support functions as a robust protective factor. Crucially, Budiman et al. (2025) identified the near-total absence of comprehensive empirical studies simultaneously investigating the psychosocial and digital determinants of mental health within Indian Gen Z populations; this is precisely the gap that the present study aims to address.

Research Gap and Rationale

A critical appraisal of the existing literature reveals several important gaps. Most empirical research on Generation Z mental health and its relationship with family and social support has been conducted in urban Western or East Asian settings, which differ substantially from the sociocultural environment of semi-urban and rural Karnataka. While numerous studies have examined family or social support in isolation, very few have simultaneously assessed the combined influence of both types of support on mental well-being in a single study. The experiences of Kannada-speaking Gen Z students, who navigate the intersection of traditional collectivist values, rapid social change, and limited institutional mental health resources, have received little empirical attention.

Evidence from university students in England during the COVID-19 pandemic demonstrated that neighborhood greenspace quality and the availability of social support were significantly associated with mental well-being (Lemyre et al., 2023, 2024). Among adolescents more broadly, family cohesion has been identified as the single strongest predictor of positive mental health outcomes, surpassing even school climate and participation in leisure activities (Aasan et al., 2023). Rural communities are often characterized by tighter-knit but smaller social networks, which may amplify both the benefits and limitations of family and immediate social circles as sources of support (Dunne et al., 2024). Research has shown that parental control and overprotection can be associated with adverse mental health outcomes among university students, highlighting the nuanced and sometimes

paradoxical influence of family relationships on psychological well-being (Gandarillas et al., 2024). Studies among vulnerable populations have consistently affirmed that while social support is a key protective factor, its availability and effectiveness are substantially shaped by environmental and cultural contexts (Pierneef et al., 2022; Stokes et al., 2024).

Objectives of the Study

The present study was guided by the following objectives:

1. To examine the sociodemographic profile of Generation Z students participating in the study, including gender, type of institution, residential background, year of study, and disability status.
2. To assess the levels of mental well-being and the extent of family and social support perceived by Gen Z students in semi-urban and rural Karnataka.
3. To investigate the nature and strength of the correlations between family support, social support, and the mental well-being of Generation Z students.
4. To compare levels of mental well-being and perceived family and social support across selected sociodemographic variables, including gender, level of education, and disability status.
5. To examine the predictive influence of family and social support on the mental well-being of Generation Z students using an appropriate regression analysis.

Hypotheses of the Study

To achieve the study objectives, the following null hypotheses were formulated:

H₀₁: There is no statistically significant relationship between family and social support and the mental well-being of Generation Z students.

H₀₂: There is no significant difference in mental well-being and perceived family and social support between male and female Gen Z students.

H₀₃: There is no significant difference in perceived family and social support between undergraduate and postgraduate Generation Z students.

H₀₄: There is no significant difference in levels of mental well-being between undergraduate and postgraduate Generation Z students.

H₀₅: There is no significant variation in mental well-being and perceived family and social support based on disability status among Generation Z students.

H₀₆: Family support and social support do not significantly predict levels of mental well-being among Generation Z students.

METHODOLOGY

Research Design

This study adopted a cross-sectional descriptive correlational research design (Kumar 2019). The descriptive component characterizes the levels and distributions of variables, whereas the correlational component examines the relationships and associations among the selected variables without manipulation.

Study Setting

This study was conducted among undergraduate and postgraduate students enrolled in colleges situated in the Holenarasipura Taluka, Hassan District, Karnataka, during the 2025–2026 academic year. This region includes both semi-urban and rural communities with expanding higher education facilities, making it particularly



relevant for assessing baseline mental health and support levels among Generation Z students from diverse socio-geographic backgrounds.

Participants and Sampling

A total of 196 students participated in this study. Participants were selected through non-probability convenience sampling (Babbie, 2016), with the researchers visiting colleges in Holenarasipura Taluka and collecting data from Generation Z students (aged 18 years and above) after obtaining permission from institutional authorities. This sample size is consistent with the descriptive research guidelines, which recommend 100–200 participants to ensure adequate statistical power (Creswell, 2014). Of the 210 questionnaire forms distributed, 196 were completed and retained, yielding a response rate of 93.3%. Students who voluntarily provided written informed consent were included in the study.

Tools Used for Data Collection

(a) Socio-demographic data sheet: A researcher-developed questionnaire was employed to gather demographic data, including age, gender, course level, type of institution, family income, area of residence, and disability status of the respondents.

(b) Warwick–Edinburgh Mental Well-Being Scale (WEMWBS): The 14-item WEMWBS (Tennant et al., 2007; Stewart-Brown et al., 2009) uses a five-point Likert scale (1 = none of the time to 5 = all of the time). Scores range from 14 to 70, with higher scores indicating better mental well-being. The scale exhibits high internal consistency ($\alpha = .91$) and has been validated in samples of Indian college students (Maheswari & Bhuvaneshwari, 2016). The questionnaire was administered in English and Kannada to ensure linguistic accessibility of the questionnaire.

(c) Family and Social Support Scale (FSSS): The 16-item FSSS, adapted from the Multidimensional Scale of Perceived Social Support (MSPSS; Zimet et al., 1988) and the Social Support Questionnaire (Srivastava & Sinha, 2005), was used to assess perceived family and social support. The scale consists of two 8-item subscales rated on a five-point Likert scale (1 = strongly disagree to 5 = strongly agree); previous applications in India reported internal consistency values of $\alpha = .82$ –.86 (Kaur et al., 2019).

Data Collection Procedure

Data were collected using Google Forms over four weeks after obtaining institutional approval from the college principals and department heads. Ethical considerations included obtaining written informed consent, ensuring participant anonymity, facilitating voluntary participation, and upholding the right to withdraw at any time. The data were exported to SPSS version 26.0 for further analyses.

Statistical Analysis

Descriptive statistics, including frequencies, percentages, means, standard deviations, skewness, and kurtosis, were calculated for each variable. Pearson's product-moment correlation was employed to investigate the relationship between family and social support and mental well-being. Independent samples t-tests were conducted to compare scores across gender, course level and disability status. Simple linear regression analysis was used to assess the predictive influence of family and social support on mental well-being. Statistical significance was set at $\alpha = .05$ (Field, 2018).

RESULTS AND INTERPRETATION

Table 1: Socio-Demographic Profile of Generation Z Students (N = 196)

Variable	Category	Frequency	Percentage (%)
Gender	Male	62	31.6

	Female	134	68.4
Residence	Hostel / PG Accommodation	109	55.6
	Day Scholar – Living with Family	77	39.3
	Rented Room – Staying Alone	10	5.1
Parental Status	Both Parents Alive	166	84.7
	Single Parent – Mother Only	24	12.2
	Single Parent – Father Only	4	2.0
	Orphaned / No Parents Alive	2	1.0
Person with Disability	Yes	7	3.6
	No	189	96.4
Monthly Family Income	Below ₹10,000	104	53.1
	₹10,001 – ₹50,000	66	33.7
	₹50,001 – ₹1,00,000	26	13.3
Course	Undergraduate (UG)	91	46.4
	Postgraduate (PG)	105	53.6

Note. Income categories were expressed in Indian Rupees (₹). UG = undergraduate; PG = postgraduate.

Table 1 presents the respondents' sociodemographic characteristics. Among the 196 Generation Z students surveyed, the majority were female (68.4%), while males accounted for 31.6%. In terms of residential status, over half (55.6%) resided in hostels or paying guest accommodations, 39.3% were day scholars living with their families, and 5.1% lived independently in rented accommodations. Regarding parental status, 84.7% reported having both parents alive, 12.2% were from single-mother families, 2.0% from single-father families, and 1.0% were orphans. A small minority (3.6%) identified themselves as persons with disabilities. A significant proportion of respondents came from economically disadvantaged backgrounds, with 53.1% reporting a monthly family income of less than ₹10,000. Postgraduate students constituted 53.6% of the sample, compared with 46.4% who were undergraduates.

Table 2: Reliability and Descriptive Statistics of the Study Scales (N = 196)

Scale	Items	Cronbach's α	Mean	SD
Warwick–Edinburgh Mental Well-Being Scale (WEMWBS)	14	.871	55.54	10.39
Family and Social Support Scale (FSSS)	16	.923	54.24	13.55

Note. SD = standard deviation. Cronbach's $\alpha \geq .70$ is considered acceptable, and $\alpha \geq .90$ is considered excellent.

The WEMWBS exhibited good internal consistency ($\alpha = .871$), whereas the Family and Social Support Scale demonstrated excellent reliability ($\alpha = .923$), both surpassing the acceptable threshold of .70. The mean WEMWBS score of 55.54 (SD = 10.39) indicates moderate to high mental well-being, whereas the mean FSSS[P1] score of 54.24 (SD = 13.55) suggests a moderate level of perceived support among participants.

**Table 3: Levels of Mental Well-Being and Family and Social Support (N = 196)**

Variable	Level	Frequency	Percentage (%)
Family and Social Support	Low	23	11.7
	Moderate	95	48.5
	High	78	39.8
Mental Well-Being (WEMWBS)	Low	7	3.6
	Moderate	51	26.0
	High	138	70.4

Note. Note: Levels were categorized based on percentile distribution criteria.

Most students reported moderate to high levels of family and social support, with 48.5% and 39.8% falling into the moderate and high categories, respectively. Only 11.7% of participants reported low support. In terms of mental well-being, 70.4% of the students scored in the high range, 26.0% in the moderate range, and 3.6% in the low range of the scale. These findings suggest that, despite some variations in perceived social support, most Generation Z students in this semi-urban and rural context maintain relatively positive psychological well-being and perceive their support systems as adequate and strong.

Table 4: Correlation Between Family and Social Support and Mental Well-Being (N = 196)

Variable	Mental Well-Being	Family & Social Support
Mental Well-Being	1	.335**
Family and Social Support	.335**	1

Note. ** $p < .01$ (two-tailed).

The findings revealed a statistically significant moderate positive correlation between family and social support and mental well-being ($r = .335$, $p < .01$). Consequently, the null hypothesis H_{01} was rejected. This suggests that as perceived support from family and social networks increases, mental well-being tends to improve. Family support, including parental care, emotional bonding, and autonomy support, plays a crucial role in alleviating loneliness, stress, and social isolation (Jameel et al., 2024). Students who perceive greater support from their families and school environments report lower levels of depression, anxiety, and anger (Layman et al., 2023). A harmonious family environment is also associated with reduced social anxiety among university students (Bi, 2022). Beyond the family, social support from peers and digital platforms provides a sense of belonging and emotional comfort, enhancing psychological resilience (Wang et al., 2025). The moderate rather than strong correlation reflects the inherently multidimensional nature of mental well-being, which is also shaped by patterns of technology use, parental control, lifestyle behaviors, and individual personality traits (Gandarillas et al., 2024; Kilic et al., 2024; Sao et al., 2024).

Table 5: Independent Samples t-Test: Mental Well-Being and Family and Social Support by Selected Demographic Variables (N = 196)

Variable	Group	MW Mean $\pm$ SD	t	p	FSSS Mean $\pm$ SD	t	p
Gender	Male	54.53 $\pm$ 12.11	-0.919	.359	54.08 $\pm$ 13.39	-0.115	.908



	Female	56.00 ± 9.51			54.32 ± 13.68		
Course	UG	55.55 ± 9.68	0.017	.986	51.03 ± 15.07	-3.159	.002**
	PG	55.52 ± 11.02			57.03 ± 11.45		
Disability	Yes	45.14 ± 14.82	-2.738	.007**	49.00 ± 16.09	-1.043	.298
	No	55.92 ± 10.05			54.44 ± 13.46		

Note. MW = mental well-being (WEMWBS); FSSS = Family and Social Support Scale. ** $p < .01$.

Gender

No statistically significant differences were found in mental well-being ($t = -0.919$, $p = .359$) or family and social support ($t = -0.115$, $p = .908$) between male and female students, supporting H_{02} . Previous studies on university students have similarly shown that psychological well-being and perceived social support are comparable across sexes (Huang & Kou, 2025; Mahasneh, 2022). Although female students may experience increased anxiety in certain situations and male students may underreport distress due to societal masculine norms, these tendencies did not result in significant mean differences in the WEMWBS (Underwood et al., 2024; Zhang et al., 2024).

Course Level

Mental well-being was comparable between undergraduate and postgraduate students ($t = 0.017$, $p = .986$), retaining H_{04} . However, postgraduate students reported significantly higher levels of family and social support ($M = 57.03$ vs. 51.03 ; $t = -3.159$, $p = .002$), rejecting H_{03} . Postgraduate students often have stronger social networks, higher self-esteem, and more effective coping strategies, which enhance their perceived support (Ooi et al. 2023). The similarity in mental well-being, despite differing support levels, may reflect the common academic pressures that persist across educational stages (Dost, 2025).

Disability Status

Students with disabilities reported significantly lower mental well-being than those without disabilities ($M = 45.14$ vs. $M = 55.92$; $t = -2.738$, $p = .007$), leading to the rejection of H_{05} . No significant difference was observed in perceived family and social support ($t = -1.043$, $p = .298$). This finding aligns with research indicating that students with disabilities are more likely to experience heightened psychological distress, including depression and anxiety (Seaborne et al., 2025). Many students with disabilities face gaps in social, emotional, and extracurricular support, despite perceiving some degree of academic assistance (Chipchase et al., 2023), while structural barriers further contribute to poorer mental health outcomes (Witham & Brewer, 2023).

In summary, gender did not significantly influence mental well-being or perceived support; however, academic level affected perceived support but not mental well-being. Disability status significantly impacts mental well-being without affecting perceived support levels, underscoring the need for inclusive, targeted, context-specific support systems.

Table 6: Simple Linear Regression Analysis Predicting Mental Well-Being from Family and Social Support (N = 196)

Model	R	R ²	Adj. R ²	Std. Error	F	p
Regression	.335	.112	.108	9.819	24.565	.000***

Note. Dependent variable: mental well-being. Predictor: family and social support. *** $p < .001$.

Family and social support emerged as significant predictors of mental well-being ($R = .335$, $R^2 = .112$, $F = 24.565$, $p < .001$); therefore, null hypothesis H_{06} was rejected. The model explained 11.2% of the variance in mental well-being scores, indicating a significant and meaningful relationship between the constructs.

Table 7: Regression Coefficients Predicting Mental Well-Being from Family and Social Support (N = 196)

Predictor	B	Std. Error	β	t	p
Constant	41.590	2.900	—	14.342	.000***
Family and Social Support	.257	.052	.335	4.956	.000***

Note. Dependent variable: mental well-being. *** $p < .001$.

Family and social support significantly and positively predict mental well-being ($\beta = .335$, $t = 4.956$, $p < .001$). The unstandardized coefficient ($B = .257$) indicates that each one-unit increase in family and social support corresponds to an approximate 0.257-unit increase in mental well-being scores. The overall regression model is statistically significant ($F = 24.565$, $p < .001$), accounting for 11.2% of the variance in well-being scores — a moderate but meaningful proportion. Despite Gen Z's extensive digital engagement, including high social media use linked to negative mental health outcomes, strong family and social support continues to positively influence psychological well-being (Sao et al., 2024; Tabatabaei et al., 2024). This finding is consistent with the literature emphasizing the importance of social connectedness and support quality in shaping mental health outcomes among emerging adults adapting to college and societal demands (Zhuhra et al., 2022).

DISCUSSION

This study investigated the relationship between family support, social support, and mental well-being among Generation Z students in semi-urban and rural educational settings in the Holenarasipura Taluka, Hassan District, Karnataka. The findings revealed that most students experienced moderate to high levels of perceived family and social support as well as mental well-being. A statistically significant positive correlation was established between support systems and mental well-being ($r = .335$, $p < .01$), consistent with Cohen and Wills' (1985) stress-buffering model, which posits that social connections serve as a critical protective mechanism against the adverse psychological effects of stress. Regression analysis confirmed that family and social support function as significant predictors of mental well-being ($\beta = .335$, $F = 24.565$, $p < .001$), accounting for 11.2% of the variance in well-being scores. These findings are consistent with prior research demonstrating that students who perceive robust support networks are better equipped to manage academic, social, and personal stressors and are more likely to employ adaptive coping strategies (Jameel et al., 2024; Layman et al., 2023; Zhuhra et al., 2022). In the Indian sociocultural context, this association assumes particular significance given the deeply collectivist character of social organization, wherein family relationships constitute the primary emotional and relational infrastructure upon which individual well-being is constructed (Mishra, 2012).

The moderate magnitude of the observed correlation reflects the multidimensional nature of mental well-being, which is shaped not only by interpersonal support but also by individual psychological traits, patterns of digital behavior, academic self-efficacy, and broader environmental stressors characteristic of semi-urban and rural contexts (Gandarillas et al., 2024; Kilic et al., 2024; Sao et al., 2024).

Demographic Findings and Their Significance

The present study found no statistically significant difference in mental well-being or perceived social support between male and female students, suggesting that within the specific context of semi-urban and rural higher education in Karnataka, male and female students experience and access support systems in broadly comparable ways (Huang & Kou, 2025; Mahasneh, 2022). Postgraduate students reported significantly stronger support systems relative to their undergraduate peers, attributable to greater social maturity, more established peer networks, and more developed interpersonal coping capacities (Dost, 2025; Ooi et al., 2023). Most critically, students with disabilities reported substantially lower levels of mental well-being despite perceiving support at

levels broadly comparable to those of their peers without disabilities. This discrepancy points to a critical structural inadequacy: the existing support systems available within these institutions appear insufficient to address the specific, compounded, and often invisible challenges faced by students with disabilities (Chipchase et al., 2023; Seaborne et al., 2025; Witham & Brewer, 2023). This finding aligns with the mandates of the Rights of Persons with Disabilities Act (2016).

Digital Behavior, Psychological Flexibility, and Well-Being

In addition to interpersonal support, the mental well-being of Gen Z students is meaningfully influenced by individual psychological characteristics and patterns of digital engagement. Excessive or unregulated use of social media has been associated with heightened anxiety, depressive symptoms, and emotional exhaustion (Sao et al., 2024). Conversely, new media literacy and psychological flexibility, including unconditional self-acceptance and adaptive cognitive processing, have been identified as important personal resources that moderate the relationship between digital engagement and mental well-being (Lim et al., 2024). Therefore, effective support for Gen Z well-being must extend beyond relational interventions to encompass digital literacy education and psychologically flexible thinking.

Social Work Implications

The findings of the present study have substantial implications for social work practice, educational policy, and institutional strategies across three interconnected levels: institutional, familial, and community.

Institutional-Level Interventions

Colleges must move beyond a reactive model of mental health care toward a proactive, prevention-oriented approach that embeds mental health into the institutional culture. Social workers embedded within campus environments are optimally positioned to lead this transition within comprehensive preventive ecological frameworks (Brooke-Sumner et al., 2022). Colleges should invest in training faculty and administrative staff to recognize early indicators of psychological distress and respond with sensitivity and appropriate referral (Boman et al., 2025). Peer mentoring and student-led support groups represent powerful mechanisms for fostering social connections and alleviating emotional distress, with evidence consistently supporting the effectiveness of peer support in reducing mental health stigma and empowering students (Jiang et al., 2024; Loeper & Schwartz, 2023). Facilitating frequent student engagement in collective social activities is also associated with reduced loneliness and improved life satisfaction (Cipolletta et al., 2025). Improving digital competencies and new media literacy has been shown to enhance the positive effects of psychological flexibility on mental well-being (Lim et al., 2024). Institutions must adopt genuinely inclusive mental health services for students with disabilities; community-based initiatives and targeted peer mentoring within disability groups have been shown to be effective in improving mental health access (Hayward, 2024; Koly et al., 2024; Witham & Brewer, 2023).

Family-Level Interventions

The family remains the most influential and enduring source of social support for Gen Z students, particularly within the collectivist cultural context of Karnataka. Family-focused interventions, including family counselling, psychoeducational workshops, and structured family involvement programs, can reinforce the relational support system surrounding students and enhance parents' capacity to provide emotional responsiveness, academic encouragement, and practical guidance (Harris & Holman Jones, 2023; Xun & Cui, 2022). Loving, empathic, and emotionally available family relationships are more strongly associated with positive psychological outcomes than the mere presence or size of the family network (Souza-Talarico et al., 2021). Social workers must also be attentive to the risks associated with excessive parental control and overprotection, which can inadvertently increase student stress and undermine autonomous coping capacities (Gandarillas et al., 2024). For LGBTQ+ students, students from low-income families, or students navigating family conflict, alternative support networks through peer communities, mentorship relationships, and community-based organizations may be essential (Stokes et al., 2024).

Community-Level Interventions

Active participation in community life, characterized not merely by the receipt of support but also by the provision of support to others, is associated with superior cognitive and psychological health outcomes (Souza-Talarico et al., 2021). In rural and semi-urban Karnataka, where access to formal mental health services is limited, community-level networks function as the primary social infrastructure through which students navigate distress and seek informal support. Multi-level social work approaches that combine counselling, including cognitive-behavioral therapy and motivational interviewing, with structural environmental support have demonstrated meaningful improvements in mental well-being across diverse populations (Larisch et al., 2024). Professional social workers, equipped with expertise in assessment, counselling, psychoeducation, crisis intervention, and community development, are uniquely positioned to coordinate and deliver interventions across all three levels.

CONCLUSION

This study provides meaningful empirical insights into the relationship between family support, social support, and mental well-being among Gen Z students in semi-urban and rural educational settings in Karnataka. The findings demonstrate that the majority of students in the Holenarasipura Taluka experienced moderate to high levels of perceived family and social support and broadly satisfactory levels of mental well-being, reflecting the enduring protective function of informal support systems in communities where formal mental health infrastructure remains limited. The study established a significant positive correlation between family and social support and mental well-being ($r = .335$, $p < .01$), and regression analysis confirmed that these support variables significantly predict mental well-being ($\beta = .335$, $p < .001$), accounting for 11.2% of the variance in well-being scores. These results provide robust empirical support for Cohen and Wills' (1985) stress-buffering model and affirm the centrality of interpersonal support relationships in sustaining the psychological health of young adults navigating higher education. The findings are further illuminated by the collectivist cultural framework (Mishra, 2012), which contextualizes the profoundly important role of family and community bonds within the Indian sociocultural environment.

Gender did not significantly influence either mental well-being or perceived support. Postgraduate students reported significantly stronger support systems relative to undergraduates, attributable to greater social maturity and more established peer networks. Most critically, students with disabilities reported substantially lower levels of mental well-being despite perceiving support at levels comparable to their peers, a finding that demands urgent institutional and policy attention in accordance with the Rights of Persons with Disabilities Act (2016). These findings collectively underscore the need to bolster family involvement, strengthen peer support networks, expand counselling services, and advance inclusive institutional practices within higher education environments in Karnataka and beyond (Brooke-Sumner et al., 2022; Jiang et al., 2024; Lim et al., 2024; Souza-Talarico et al., 2021).

Limitations of the Study

1. This study utilized convenience sampling, which restricts the generalizability of the findings beyond the study area.
2. The cross-sectional design limited our ability to infer causality from observed relationships.
3. Self-report questionnaires may be subject to social desirability bias.
4. Collecting data online through Google Forms may have excluded students with limited access to digital resources.
5. This study focused on semi-urban and rural educational environments in Holenarasipura Taluka, Karnataka; therefore, caution should be exercised when applying the results to urban or other student populations.

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