

The Role of Resilience and Perception of Social Support on Flourishing in Medical Professional Education Students

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Abstract. Medical professional education students must flourish to cope with academic pressure and environmental demands. This study aims to determine the role of resilience and perceived social support in flourishing medical professional education students. This study used a quantitative approach with a cross-sectional design. The sample selection technique used proportionate stratified random sampling. The research subjects involved 177 medical professional education students. The research instruments used the Brief Resilience Scale, Multidimensional Scale of Perceived Social Support, and Flourishing Scale. Data analysis using multiple linear regression tests with the SPSS statistical program. The results showed that resilience and perceived social support significantly predict flourishing. The practical contribution of resilience and perceived social support to flourishing was 32.7%. Medical professional education students with high resilience and perceived social support then flourish.

Keywords: Flourishing; perceived social support; resilience.

1 Introduction

Medical schools are intended to train and produce competent physicians to improve public health and provide patient-centered care [1]. Medical education is divided into two processes, namely undergraduate medicine and medical profession [2]. Medical profession education students have dual responsibilities as students and members of the health care team so that the pressure experienced is greater [3]. Research shows that 41% of medical students in the clinical rotation stage experience depression, 35% experience burnout, 65.32% have poor sleep quality, 77.48% have low concentration levels, and 44.6% of clinical clerkship students experience insomnia [4], [5], [6]. Medical student stress is higher in the clinical year than in the preclinical year, this is due to academic pressure to learn a large amount of information in a limited time and fear of students' future as doctors [7].

Different findings were obtained from the research of [8] showing that out of 2,682 medical students in clinical clerkships, 1,409 (53.21%) students were flourishing. 41% of medical students in clinical clerkships were flourishing [9]. 55.2% of medical students were flourishing

[10]. That medical students flourish highly [11]. In addition, medical students obtained an average flourishing of 42.52 (score range 8-56) which means that the average medical student is far above the midpoint of the score range so that most medical students have relatively high flourishing [12]. Medical school is an opportunity for students to flourish and reach their full potential [13].

Flourishing is a well-being model that includes subjective and psychological well-being, meaning that it includes not only happiness and life satisfaction, but also life goals, social relationships, involvement in activities, optimism, competence, and self-esteem [14]. When individuals achieve high flourishing, it has an impact on positive mental health [15]. Medical students need to achieve high flourishing to be able to cope with academic pressure, environmental demands, and to be able to reduce the consequences of high levels of stress [9], [16]. In the medical field, medical students must achieve flourishing to understand their well-being and direct students in providing good and patient-centered health services [17].

Flourishing students show actions that are involved in certain activities, are willing to learn, are energetic, and lead to personal growth, but on the other hand, students who do not flourish show uninvolved, lazy, avoidant, and goalless behavior [18]. The flourishing condition experienced by individuals is caused by various factors [19]. The flourishing factors are age, gender, ethnicity, romantic relationship status, educational status, employment status, perception of family wealth, health status, social connectedness, social networks, having children, and chronic medical conditions [20], [21]. Individuals achieve high flourishing when they have high resilience [22]. The situational factor of social support is significant for flourishing [19].

Resilience is a factor that can contribute to flourishing [23]. Resilience is described as an individual's ability to bounce back from stress, adversity, or stressful situations [24]. The characteristics of resilient individuals are having more frequent positive emotional experiences to deal with difficult situations and lead to flourishing [25]. Resilient individuals are more likely to use constructive ways of coping with stress to proactively cultivate positive emotions that can counteract stressful experiences and enhance flourishing [26]. Resilient individuals create meaning in life that serves as an important mechanism in understanding everyday life, supporting the management of difficulties faced, having control over themselves which is an important aspect of flourishing [27]. Resilience can predict flourishing [28]. A significant relationship between resilience and flourishing, the higher the resilience, the higher the flourishing and vice versa [22].

Another factor that influences flourishing is the perception of social support [29]. The perception of social support is described as the support felt by individuals from those around them [30], [31]. The perception of social support can provide satisfaction of basic psychological needs, increase social interaction, self-esteem, find meaning in life, and increase individual feelings that contribute to flourishing [32], [33]. When individuals feel more social support, they form healthy interpersonal relationships and tend to show more prosocial behavior towards others that contribute to flourishing [34]. The perception of social support predicts flourishing, the higher the perception of social support, the higher the flourishing and vice versa [35]. The perception of family social support was able to predict flourishing, but the perception of social support from friends and significant others was not able to predict flourishing [36].

Based on the previous explanation, it is known that flourishing has an important role for medical students in living their lives as professionals in order to provide good and patient-centered care. High flourishing helps medical students in dealing with academic pressure and environmental

demands, and can reduce the consequences of high levels of stress. Factors that encourage students to achieve flourishing are resilience and perception of social support. In addition, research related to the role of resilience and perception of social support on flourishing is still limited in Indonesia. Therefore, researchers are interested in studying more deeply the role of resilience and perception of social support on flourishing in medical students.

The hypotheses in this study are as follows.

H1: There is a role of resilience and perception of social support (family, friends, and significant others) in flourishing.

H2: There is a role of resilience on flourishing.

H3: There is a role of perception of family social support flourishing.

H4: There is a role of perceived social support from friends towards flourishing.

H5: There is a role of perceived social support from significant others towards flourishing.

2 Method

Research Design. This study applies a quantitative approach and cross-sectional design to measure the outcomes and exposure of research subjects at the same time.

Research Participants. The population of this study were 327 students of the medical profession education, Faculty of Medicine and Health Sciences, Lambung Mangkurat University, class of 2022 and 2023. The sample selection technique in this study was proportionate stratified random sampling. This sample selection technique was carried out because the population was not homogeneous and stratified (class year), and to ensure that each stratum in the population was proportionally represented in the sample. The research sample consisted of 92 students from the class of 2022 and 85 students from the class of 2023. The age range of the research subjects was 20 to 26 years ($M = 22.95$; $SD = 1.010$). There were 46 male students (26%) and 131 female students (74%).

Research Instrument. This research instrument used three scales to collect data, namely the flourishing scale, the resilience scale, and the social support perception scale. The adaptation process of the research scale refers to the guidelines from [37] with the following stages: (1) translating the scale from the original language to Indonesian, (2) synthesizing to select the right words or sentences from the translation results, (3) back-translating the synthesis results from Indonesian to the original language, (4) reviewing the translation results, and (5) testing the measuring instrument.

Flourishing Scale. The flourishing scale is adapted from the Flourishing Scale [14], consisting of 8 items and unidimensional. This scale measures various important domains of human function including relationships, goals, self-esteem, optimism, and others. Items are assessed on a Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree). The results of the flourishing scale trial obtained a reliability coefficient value of 0.841 and an item correlation coefficient ranging from 0.381 to 0.714.

Resilience Scale. The resilience scale is adapted from the Brief Resilience Scale [24] consisting of 6 items designed to be unidimensional. This scale measures the capability to bounce back or recover from difficulties, setbacks, and failures. Items are assessed on a Likert scale, ranging from 1 (strongly disagree) to 5 (strongly agree). The results of the resilience scale trial showed that there was 1 item that had to be eliminated so that 5 items remained with a reliability coefficient value of 0.790 and an item correlation coefficient ranging from 0.408 to 0.753.

Perceived Social Support Scale. The perceived social support scale is adapted from the Multidimensional Scale of Perceived Social Support [31]. This scale measures perceived social support from various aspects, namely family, friends, and significant others. This scale includes 12 items assessed on a Likert scale ranging from 1 (strongly disagree) to 7 (strongly agree). The results of the trial of the social support perception scale obtained a reliability coefficient value of 0.872 and an item correlation coefficient ranging from 0.455 to 0.683.

Research Procedure. Data collection was carried out in a hybrid manner by distributing questionnaires offline, namely meeting directly with the subjects and distributing questionnaires online via social media (Instagram and WhatsApp) to the subjects. The questionnaire consists of several parts and each part will have special instructions. At the beginning of the questionnaire there is research information and a statement of subject agreement (informed consent). The researcher also explains the confidentiality of research data and the rights of subjects in the research. The duration of filling out the questionnaire ranges from 5-10 minutes. This research was declared ethical by the Health Research Ethics Commission, Lambung Mangkurat University with number 023 / KEPK-FKIK ULM / EC / II / 2024.

Research Data Analysis. Data analysis is divided into two processes, namely assumption testing and hypothesis testing and is carried out using the IBM SPSS Statistics 25 statistical program. If the classical assumption test is met, then the hypothesis testing is continued with multiple linear regression tests.

3 Result and Discussion

3.1 Result

The description of the research data was conducted to find out the general picture related to the research variable data. The results of the research data description can be seen in table 1 below.

Table 1. Data Description

Variable	Hypothetical Data				Empirical Data			
	Xmin	Xmax	Mean	SD	Xmin	Xmax	Mean	SD
<i>Flourishing</i>	8	56	32	8	23	56	44,71	6,961
Resilience	5	25	15	3,33	8	25	17,27	3,878
Perception of Family Social Support	4	28	16	4	6	28	22,87	4,467
Perception of Friends Social Support	4	28	16	4	8	28	20,90	4,285
Perception Social Support of Significant Others	4	28	16	4	4	28	20,50	6,310

The results of the data description show that the average empirical data on all variables is higher than the average hypothetical data. Meanwhile, the minimum score of empirical data on all variables tends to be higher than the minimum score of hypothetical data. This shows that the subjects in this study have high resilience, perception of social support, and flourishing in the field.

Table 2. Data Categorization

Variable	Categorization (in Percent)		
	Low	Medium	High
<i>Flourishing</i>	1,1%	21,5%	77,4%
Resilience	7,9%	48%	44,1%
Perception of Family Social Support	0,6%	21,4%	78%
Perception of Friends Social Support	1,7%	31,1%	67,2%
Perception Social Support of Significant Others	8,5%	30,5%	61%

N = 177

The results of data categorization showed that most subjects had high flourishing (77.4%), moderate resilience (48%), high perception of family social support (78%), high perception of friends social support (67.2%), and high perception of significant others social support (61%).

Table 3. Residual Normality Test Results

	Statistic	df	Sig.	Description
Unstandardized Residual	0,034	177	0,200	Normal Data

Residual normality test using Kolmogorov Smirnov Test. Data is normally distributed if the test significance is >0.05 [38] The results of the residual normality test obtained a test significance of 0.200 ($p>0.05$) so that the distribution of residual scores is normally distributed.

Table 4. Linearity Test Results

Variabel Prediktor	Linearity		Description
	F	Sig.	
Resilience	39,821	0,000	Linier Data
Perception of Family Social Support	33,855	0,000	Linier Data
Perception of Friends Social Support	27,760	0,000	Linier Data
Perception Social Support of Significant Others	29,870	0,000	Linier Data

The linearity test is carried out by looking at the significance in the linearity row, if the significance of the test results is <0.05 there is a linear relationship between the predictor variables and the criterion variables [39]. The results of the linearity test show that all predictor variables have a linear relationship with the criterion variables, the test significance is 0.000 ($p < 0.05$).

Table 5. Multicollinearity Test Results

Variabel	Tolerance	VIF	Description
Resilience	0,869	1,150	No Multicollinearity
Perception of Family Social Support	0,791	1,265	Occurs
Perception of Friends Social Support	0,737	1,356	
Perception Social Support of Significant Others	0,704	1,421	

Multicollinearity test looks at the value (VIF) and tolerance. If the VIF value <10 and the tolerance value > 0.1 then there is no multicollinearity [40]. The results of the multicollinearity test show that all variables in this study have a variance inflation factor (VIF) value <10 and a tolerance value > 0.1 , so the regression model does not find multicollinearity problems between variables.

Table 6. Heteroscedasticity Test Results

		Unstandardized Residual	Description
Resilience	Sig.	0,948	No Heteroscedasticity Occurs
Perception of Family Social Support	Sig.	0,352	
Perception of Friends Social Support	Sig.	0,999	
Perception Social Support of Significant Others	Sig.	0,961	

The heteroscedasticity test uses the Spearman's Rho test. If the significance of the test results is >0.05 , then there is no heteroscedasticity [39]. The results of the heteroscedasticity test show that there is no heteroscedasticity, this can be seen from the significance of the test of each variable, namely resilience ($p = 0.948$; $p > 0.05$), perception of family social support ($p = 0.352$; $p > 0.05$), perception of friends' social support ($p = 0.999$; $p > 0.05$), and perception of significant others' social support ($p = 0.961$; $p > 0.05$).

Table 7. Simultaneous Multiple Linear Regression Test Results

Model	Sum of Squares	df	Mean Square	F	Sig.
Regression	2785,785	4	696,446	20,860	0,000
Residual	5742,520	172	33,387		
Total	8528,305	176			

The results of the simultaneous multiple linear regression test obtained a significance value of 0.000 ($p < 0.05$). These results prove that resilience and perception of social support simultaneously predict flourishing in medical professional education students, $R^2 = 0.327$; $F(4; 172) = 20.860$; $p < 0.05$.

Table 8. Contribution of Predictor Variables to Criterion Variables

R	R Square	Adjusted R Square	Std. Error of the Estimate
0,572	0,327	0,311	5,778

In table 8, the R Square value is 0.327. This indicates that resilience and perception of social support significantly determine 32.7% of the flourishing conditions of medical professional education students, while 67.3% is explained by other variables not included in this study.

Table 9. Partial Multiple Linear Regression Test Results

Variabel	B	β	t	Sig.	95% CI
(Constanta)	19,680		6,737	0,000	[13,941; 25,446]
Resilience	0,547	0,305	4,541	0,000	[0,309; 0,785]
Perception of Family Social Support	0,309	0,199	2,822	0,005	[0,093; 0,526]
Perception of Friends Social Support	0,241	0,148	2,034	0,043	[0,007; 0,474]
Perception Social Support of Significant Others	0,169	0,154	2,059	0,041	[0,007; 0,332]

Based on the results in table 9, partial findings were obtained on the role of each predictor variable on the criterion variable. In the resilience variable, a significance value of 0.000 was obtained ($\beta = 0.305$; $t(172) = 4.541$; $p < 0.05$), namely resilience plays a significant role in

flourishing. In the perception of family social support variable, a significance value of 0.005 was obtained ($\beta = 0.199$; $t(172) = 2.822$; $p < 0.05$), namely the perception of family social support plays a significant role in flourishing. In the perception of friend social support variable, a significance value of 0.043 was obtained ($\beta = 0.148$; $t(172) = 2.034$; $p < 0.05$), namely the perception of friend social support plays a significant role in flourishing. In the variable of perception of social support of significant others, a significance value of 0.041 was obtained ($\beta = 0.154$; $t(172) = 2.059$; $p < 0.05$), namely the perception of social support of significant others plays a significant role in flourishing.

Based on the results of the hypothesis test, the following multiple regression equation was obtained.

$$Y = a + b_1X_1 + b_2X_2 + b_3X_3 + b_4X_4$$

$$Y = 19,680 + 0,547 + 0,309 + 0,241 + 0,169$$

The constant of 19.680 means that if resilience, perception of family social support, perception of friends social support, and perception of significant others social support are 0, then the value of flourishing is 19.680.

The resilience regression coefficient is 0.547, meaning that if other predictor variables are constant and resilience increases by 1%, then flourishing increases by 0.547. There is a positive relationship between resilience and flourishing, the greater the resilience value, the greater the flourishing value. The regression coefficient of perception of family social support is 0.309, meaning that if other predictor variables are constant and perception of family social support increases by 1%, then the flourishing variable increases by 0.309. There is a positive relationship between perception of family social support and flourishing, the greater the value of perception of family social support, the greater the value of flourishing.

The regression coefficient of perception of social support from friends is 0.241, meaning that if other predictor variables are constant and perception of social support from friends increases by 1%, then the flourishing variable increases by 0.241. There is a positive relationship between perception of social support from friends and flourishing, so the greater the value of perception of social support from friends, the greater the value of flourishing. The regression coefficient of perception of social support from significant others is 0.169, meaning that if other predictor variables are constant and perception of social support from significant others increases by 1%, then the flourishing variable increases by 0.169. There is a positive relationship between perception of social support from significant others and flourishing, the greater the value of perception of social support from significant others, the greater the value of flourishing.

3.2 Discussion

This study aims to determine the role of resilience and perceived social support on flourishing in medical students. This study proves that simultaneously there is a significant role between resilience and perceived social support on flourishing in medical students. Therefore, the first hypothesis is accepted. Resilience and perceived social support as significant predictors of flourishing, and highlights the important role of resilience and perceived social support as interrelated factors that collectively contribute to flourishing [41]. Resilience and perceived social support as protective factors that can increase an individual's ability to deal with stress more effectively and maintain positive well-being [42]. Individuals with high levels of

resilience and perceived social support can withstand the adverse effects of stress and encourage flourishing.

The research findings show that there is a significant role between resilience and flourishing separately. Therefore, the second hypothesis is accepted. Resilience significantly predicts flourishing [25]. Medical students with high resilience have distinctive characteristics, namely feeling positive emotions more often to help students bounce back from negative life events, forming meaning from difficult situations, and leading to flourishing [28]. Resilient medical students use constructive ways to deal with stress, have a positive and energetic approach to life, and have an influence on flourishing [26]. Resilient medical students have the ability to adapt, develop strategies for dealing with problems, create meaning from difficult life experiences as a mechanism for understanding life, see challenges as opportunities for learning, self-growth, and encourage students to flourish [27]. The results of the analysis showed that separately there was a significant role between the perception of family social support and flourishing. Therefore, the third hypothesis was accepted. The perception of family social support was able to predict flourishing [36]. Perceived family social support is an integral support in various aspects of life and a valuable resource to support students in meeting their needs [43]. Medical students who have close social relationships including with family tend to report higher levels of well-being and flourishing [44]. Perceived social support is seen as a protective mechanism that can improve well-being by maintaining positive emotional feelings and reducing stress [43], [45]

This study also proves separately that there is a significant role between the perception of social support from friends and flourishing. Therefore, the fourth hypothesis is accepted. The perception of social support from friends can predict flourishing [34]. When students feel more social support, they form healthy interpersonal relationships and show prosocial behavior towards others that contribute to encouraging flourishing [34]. Medical professional education students who have supportive friendships can encourage students to engage in better learning behaviors, such as participating in study groups that can fulfill personal growth and social acceptance. Having a supportive relationship is part of flourishing [46]. Perception of social support can provide satisfaction of basic psychological needs, increase initiative, willingness, and integrity of students that contribute to flourishing [32].

The results of the analysis show that separately there is a significant role between the perception of social support from significant others and flourishing. Therefore, the fifth hypothesis is accepted. The perception of social support from significant others significantly predicts flourishing [47]. Significant others in students are lecturers or staff in a university environment [48]. In medical education, medical students have mentors who will provide advice, teach less experienced students, and provide emotional support [49]. The perception of social support from significant others can help assess experiences as meaningful, increase positive feelings about an event, influence the way of viewing oneself that protects and improves student well-being [50]. The perception of social support from significant others can increase feelings of self-esteem, find meaning in life, and can increase flourishing in students [32].

Based on the R Square value, a value of 0.327 was obtained. This indicates that resilience and perception of social support simultaneously determine 32.7% of the flourishing conditions of medical students, while 67.3% is influenced or explained by other variables not included in this study. Factors that can influence flourishing include personality traits, socio-demographics, and situational factors [19]. In addition, factors that influence flourishing include gender,

employment status, education, living arrangements, and chronic medical conditions [20]. The categorization results of the resilience variable show that medical professional education students have moderate resilience.

The distribution of categorization data obtained 78 students with high resilience (44.1%), 85 students with moderate resilience (48%), and 4 students with low resilience (7.9%). Students with high resilience are characterized by being able to recover quickly after experiencing negative events, being able to regulate emotional reactions, being able to adapt to circumstances, having goals and meaning in life, being self-confident, maintaining personal and social relationships [51]. Students with moderate resilience are described as having sufficient ability to cope with stress, being able to adapt, but when they have complex problems and great difficulties they tend to need a longer time to recover, and have less stable emotions [52]. Students with low resilience are characterized by having low ability to cope with stress, finding it difficult to face challenges, feeling pessimistic, being unable to solve problems, and having less interaction with others [53], [54].

The categorization results on the social support perception variable show that medical professional education students have a high perception of social support. The distribution of categorization obtained 118 students with high perception of social support (66.7%), 55 students with moderate perception of social support (31.1%), and 4 students with low perception of social support (2.3%). Students with high perception of social support have a strong belief or perception that they get substantial and reliable support from their social network (family, friends, significant others), students with moderate perception of social support feel support at a certain level from their social network (family, friends, significant others) and the support obtained is not as strong, consistent, or pervasive as students with high perception of social support, while students with low perception of social support have the perception that they lack support from their social network (family, friends, significant others) [50].

The categorization results on the flourishing variable show that medical professional education students are in high flourishing. The distribution of categorization data obtained 137 students with high flourishing (77.4%), 38 students with moderate flourishing (21.5%), and 2 students with low flourishing (1.1%). Students with high flourishing are characterized by optimism, showing adaptive problem-solving skills, high levels of self-esteem, better emotional regulation, showing better interactions with their environment through developing meaningful relationships, and increased productivity [55]. Students with moderate flourishing are described as having a fairly healthy level of mental health, feeling satisfaction and meaning in several areas of life, but not consistently experiencing positive levels of functioning in all areas [56]. Students with low flourishing are characterized by not having positive emotions towards life, not functioning optimally socially or psychologically, not fulfilling potential or realizing goals, feelings of emptiness, emptiness, stagnation, avoidance, and hopelessness [56].

This study has obstacles and limitations. The obstacles experienced by researchers are the time to collect research data which tends to be long, this is because medical professional education students are carrying out clinical clerkships in a hospital environment so that they have a busy schedule of activities and researchers have difficulty in adjusting the time to collect data on the subjects. The limitations of the study are that this study uses a questionnaire in the form of a self-report that allows subjects to choose responses that are in accordance with community norms so that they do not represent the actual condition of the subject.

4. Conclusions

This study proves that there is a role of resilience and perception of social support towards flourishing in medical professional education students. The findings of this study show that resilience and perception of social support together determine 32.7% of the flourishing condition of medical professional education students, while 67.3% is explained by other variables not included in this study. Suggestions for study programs are to create intervention programs or social programs to improve flourishing in students that focus on developing resilience and perception of social support.

Study programs can create resilience building programs that focus on building long-term resilience such as providing stress inoculation training that gradually exposes students to stress triggers and effective stress coping mechanisms or providing mindfulness-based stress reduction that helps students be more aware of their thoughts and feelings that can reduce stress and increase resilience. In addition, study programs can also conduct social skills training to improve students' ability to initiate and maintain positive social interactions so as to increase perceptions of social support. Further researchers can use an experimental research design. If you want to do similar research, you can use other groups such as minority groups, refugees, migrants, athletes and athletes, caregivers and others to understand the usefulness of the results in a broader context. In addition, in the variable of perception of social support, researchers suggest to examine it dimensionally because it helps identify the type of perception of social support that is most influential for the subject in a particular situation and each subject has different preferences and needs regarding sources of social support.

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