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Resilience and perceived social support as predictors of emotional well-being

Murat YILDIRIM^{1*}, Mehmet Emin TURAN², Najwa Salem ALBELADI³, Pietro CRESCENZO⁴, Amelia RIZZO⁵, Gabriella NUCERA⁶, Giuseppe FERRARI⁷, Alla NAVOLOKINA⁸, Lukasz SZARPAK⁹, Francesco CHIRICO¹⁰

Affiliations:

- ¹ Department of Psychology, Agri Ibrahim Cecen University, Ağrı, Turkey. ORCID: 0000-0003-1089-1380.
- ² Department of Psychology, Agri Ibrahim Cecen University, Ağrı, Turkey; E-mail: meturan@agri.edu.tr **ORCID:** 0000-0001-8092-9642.
- ³ Communication Skills Department, College of Arts & Sciences Rabigh, King Abdulaziz University, Saudi Arabia.

 Department of Neuroscience Psychology & Behaviour, University of Leicester, Leicester, United Kingdom.

 E-mail: nsalbeladi@kau.edu.sa ORCID: 0000-0003-2940-2479.
- ⁴Department of Education, Psychology and Communication University of Bari, Bari, Italy. E-mail: pietrocrescenzo84@gmail.com ORCID:0000-0001-5240-315X
- ⁵Department of Clinical and Experimental Medicine, Universuty of Messina, Messina, Italy. E-mail: amrizzo@unime.it ORCID: 0000-0002-6229-6463
- ⁶Department of Emergency, Fatebenefratelli Hospital, ASST Fatebenefratelli and Sacco, University of Milan, Milan, Italy. E-mail: gabriella.nucera@asst-fbf-sacco.it **ORCID:** 0000-0003-1425-0046.
- ⁷SIPISS, Milan, Italy. E-mail: ferrari@sipiss.it **ORCID:** 0000-0003-1244-5931
- ⁸ European School of Medicine, International European University, Kyiv, Ukraine; E-mail: allanavolokina@ieu.edu.ua. ORCID: 0000-0003-1711-6002.
- ⁹ Institute of Outcomes Research, Maria Sklodowska-Curie Medical Academy, Warsaw, Poland. Maria Sklodowska-Curie Bialystok Oncology Center, Bialystok, Poland. Henry JN Taub Department of Emergency Medicine, Baylor College of Medicine Houston, Houston, TX, United States. E-mail: lukasz.szarpak@gmail.com. ORCID: 0000-0002-0973-5455.

 ¹⁰ Post-Graduate School of Occupational Health, Università Cattolica del Sacro Cuore, Rome, Italy. Health Service Department, Italian State Police, Ministry of the Interior, Milan, Italy. Email: francesco.chirico@unicatt.it ORCID: 0000-0002-8737-4368.

*Corresponding Author:

Associate Professor Murat Yıldırım, Department of Psychology, Faculty of Science and Letters, Agri Ibrahim Cecen University, Erzurum Yolu 4 Km 04100, Merkez, Ağrı, Turkey; tel: +90472215 98 63; e-mail: muratyildirim@agri.edu.tr or muratyildirimphd@gmail.com

Abstract

Introduction: Emotional well-being is a key ingredient of well-being and positive mental health. Resilience and perceived social support have been found to be important factors influencing emotional well-being. Age, gender, and personality traits have also been suggested as potential

predictors of emotional well-being. However, it is unclear to what extent resilience and perceived social support predict emotional well-being after controlling for these variables among Saudi adults. Therefore, this study aims to examine the unique contribution of resilience and perceived social support in predicting emotional well-being while controlling for age, gender, and personality traits. **Methods:** The participants were young Saudi adults (83.64% females) whose ages ranged from 18 to 60 years, with a mean age of 32.37 (SD = 8.64). They completed an online survey comprising the Brief Resilience Scale, Multidimensional Scale of Perceived Social Support, Scales of Positive and Negative Experiences, Ten-Item Personality Inventory, and a socio-demographic questionnaire.

Results: The results showed that after controlling for age, gender, and personality traits that showed an influence on emotional well-being, resilience and perceived social support exerted a statistically significant influence on the emotional well-being of international young adults by explaining a significant amount of unique variance.

Discussion: The findings of this study provide important insights into the factors that contribute to emotional well-being among young Saudi adults. The findings suggest that the development of effective interventions and programs aimed at promoting emotional well-being among young Saudi adults should focus on enhancing resilience and perceived social support.

Take-home message: Resilience and perceived social support are key predictors of emotional well-being in young Saudi adults, even after accounting for age, gender, and personality traits. Interventions aimed at promoting emotional well-being in this population should focus on enhancing resilience and perceived social support. Further research is needed to understand the underlying mechanisms and effectiveness of such interventions.

Keywords: Resilience; perceived social support; positive experiences; negative experiences; emotional well-being; young Saudi adults.

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INTRODUCTION

Positive psychology endeavours to understand the roles of psychological and social factors that promote well-being and positive mental health. This trend has resulted in an increase in empirical and theoretical studies in the field [1,2]. The negative circumstances that individuals experience in their day-to-day lives have also led to heightened interest among researchers in exploring the impacts of personal strengths on improved well-being.

Emotional well-being is usually characterized by individuals' positive or negative experiences [3]. Emotional well-being also refers to an individual's ability to regulate and cope with emotions and experience affective balance and satisfaction [4–6]. Emotional well-being is associated with positive emotions, maintaining positive relationships, and healthy behaviours. Emotional well-being is an essential factor to contributes to general health [6]. According to Fredrickson and Joiner [6], positive emotions can lead to an improvement in emotional well-being by broadening an individual's

thinking process through incremental changes. These changes can create a positive cycle of well-being, which not only benefits an individual's current emotional state but also strengthens their ability to cope with future difficulties [6–8]. Experiences of positive emotions were found to reduce mental health problems, while experiences of negative emotions exacerbated mental health problems [1].

It is also critical to determine whether psychological and social factors can contribute to individuals' emotional well-being [9–11]. However, there is a scarcity of evidence available in the extant literature to guide evidence-informed planning about understanding psychosocial factors associated with the emotional well-being of young people in Middle Eastern countries like Saudi Arabia. Therefore, this study examined whether resilience as a psychological factor and social support as a social factor predict emotional well-being beyond the effects of demographic factors and personality traits. Improving people's emotional well-being is an important strategy for promoting their well-being and positive mental health, and reducing risk factors, particularly for a vulnerable group of people striving for positive outcomes in school, family, work, and life.

Resilience as a predictor of emotional well-being

Resilience refers to an individual's capacity to "bounce back" from traumatic life events or challenging circumstances [12,13]. Resilience provides individuals with an opportunity to learn, grow personally, and adapt to a new situation [14,15]. Also, resilience is a process of functional adaptation to daily stresses and transition periods. Responses to events in daily life can turn into habits that affect one's emotional well-being and social relationships. In the context of positive psychology, resilience is a variable that enables individuals to thrive when faced with difficulties [16]. People with high levels of resilience use more adaptive coping mechanisms and support systems to deal with life's difficulties [17]. Therefore, promoting resilience helps to cope with emotional or behavioral problems and develop social skills, relationships, and strengths [13,14,18,19].

Research from the past has shown that there are many things that can lead to emotional well-being [20]. These factors include individual differences (e.g., personal strengths), environmental factors (e.g., social support), and past experiences. Collectively, all these factors typically represent resiliency factors [21,22]. In other words, these factors improve the capability of people to adapt to and effectively cope with challenges in the face of adversity or stressful situations. As a result of this, it can substantially contribute to emotional well-being and psychological health [16,23].

People with high levels of resilience are able to deal with stress and problems in a healthy way, which can lead to a higher level of emotional well-being [24]. Resilient individuals cope with difficulties successfully. Coping with challenges functionally can promote a sense of control, self-esteem, positive adaptive behaviours, and physical and mental health [25,26]. Individuals with low levels of resilience cannot cope with difficulties effectively [17,27]. A lack of ability to deal with difficulties can lead to negative emotional states such as depression, anxiety, and stress. Negative emotional states can have a negative impact on emotional well-being [5,28]. A study conducted during the COVID-19 pandemic showed that a higher level of resilience was significantly associated with lower levels of hopelessness, anxiety, lack of control over one's life, fear, anger, and aggression [29–31]. Moreover, a meta-analysis found that people with a strong characteristic of resilience tend to have better mental health, more adaptive coping abilities, better physical health, and more robust social networks [32].

Therefore, resilience can play an essential role in the prediction of emotional well-being [33]. *Social support as a predictor of emotional well-being*

Individuals are social beings who share positive and negative experiences with their social network, especially with people they perceive as close to and with whom they spend time. A strong link exists between being in close relationships, the number of close relationships, the quality of the relationship experience, and well-being [34]. Social support is an important social resource that individuals receive from friends, family, and significant others [35]. Social support is provided to the individual by others in various ways, including emotional support, tangible support, informational support, and social network support [35–37]. Social support is vital for the mental and physical health of the individual. Social support may reduce depression, anxiety, and stress while increasing immune function and well-being [38].

Social support is considered a vital positive resource that contributes to well-being and mental health. Prior research has demonstrated that social support can buffer negative emotions such as depression, anxiety, and stress and increase positive emotions such as a sense of belonging and approval [35,38,39]. A strong social support network significantly contributes to emotional well-being [36]. In addition, social support can improve emotion regulation skills [40]. Also, social support contributes to increasing emotional health by positively affecting physical health. A study carried out in Saudi Arabia revealed that an increased level of social support, particularly family support, was significantly associated with a decreased level of mental health problems such as emotional symptoms, conduct problems, hyperactivity, peer problems, and overall mental health challenges [41]. Another study with young adults showed that a greater level of perceived social support from family, friends, and others reduced symptoms of depression, anxiety, obsessive-compulsive disorder, somatization, interpersonal sensitivity, hostility, phobic anxiety, psychoticism, and paranoid ideation [42]. Together, all these findings indicate that social support is an essential factor in improving emotional well-being and positive mental health.

Controlling variables

As control variables, we looked at age, gender, and personality traits to improve the accuracy of our results when we looked at the different roles that resilience and social support play in predicting emotional well-being.

Age

Age is typically viewed as a significant predictor of emotional well-being in adults. However, the relationship between age and emotional well-being is relatively complex since there may be individual differences in emotional well-being as people get older. Some studies found an inverse relationship between age and emotional well-being [43] and this relationship was found to be related to various factors such as having more effective coping strategies, increased social support, and higher levels of resilience in older adults [44]. Other studies showed a positive relationship between these two variables [45]. This relationship could be pertaining to declining physical health, losses in social support networks, and reduced income due to retirement, all of which may contribute to decreased emotional well-being in older adults [46]. Despite the empirical and conceptual link between age and emotional well-being, it is also important to note that age is not always a reliable indicator of emotional well-being, as some people may report significant emotional distress and reduced well-being due to their older age. As such, it is vital to consider other psychological and

social factors (e.g., resilience and perceived social support) alongside age, to better understand the indicators of emotional well-being.

Gender

The impact of gender on emotional well-being has been widely studied [47]. The research findings suggest that gender plays a significant role in emotional experiences [48] and social-cultural factors contribute to well-being [49]. Social-cultural factors can affect social expectations and cause individuals to express their emotions differently according to gender. Men are often encouraged to suppress their emotions, while women are encouraged to express their emotions more openly [50]. Studies also indicate that women are more likely to experience negative emotional states than men [45]. However, it should be noted that gender differences are not universal and can differ in social and cultural contexts [51]. These findings suggest that gender is an important predictor of emotional well-being and should be taken into account when studying and addressing emotional well-being in different populations.

Personality traits

The Five-Factor Model of Personality is one of the most prevalent theories of personality [52,53]. This theory assumes that personality traits can be distilled into five fundamental factors, which include openness to new experiences, conscientiousness, extraversion, agreeableness, and neuroticism. Studies have shown that individuals who exhibit high levels of extraversion, openness, conscientiousness, and agreeableness tend to have high levels of emotional well-being, whereas those with high levels of neuroticism exhibit low levels of emotional well-being [54]. A recent study that examined the relationship between personality traits and affective experiences showed that higher levels of extraversion, agreeableness, conscientiousness, emotional stability, and openness to new experiences were significantly positively related to positive experiences and significantly negatively associated with negative experiences [2]. These findings provide support for the role of personality traits and their ability to explain individual differences in emotional well-being. Furthermore, it suggests that personality traits play an important role in determining how people experience and respond to their emotional experiences, and individuals with certain personality traits may be more likely to experience positive or negative emotions.

Current study

As the field of positive psychology continues to expand, it is becoming increasingly important to determine the psychological and social factors that contribute to well-being [2,55,56]. While previous research has established a link between resilience and social support and emotional well-being, there is a gap in the literature pertaining to the factors that predict emotional well-being among individuals in the context of Saudi Arabia. To address this gap, the present study aimed to examine the unique roles of resilience and perceived social support in predicting positive and negative experiences (emotional well-being) among young Saudi adults, after controlling for the effects of age, gender, and personality traits. The study was guided by two hypotheses, (H1) posited that after controlling for age, gender, and personality traits, resilience and perceived social support would significantly positively predict positive experiences, and (H2) posited that after controlling for age, gender, and personality traits, resilience and perceived social support would significantly negatively predict negative experiences. The results of this study have important implications for mental health

professionals in Saudi Arabia, as they provide insights into the factors that contribute to emotional well-being in this context. The hypothetical model used in this study is presented in Figure 1.

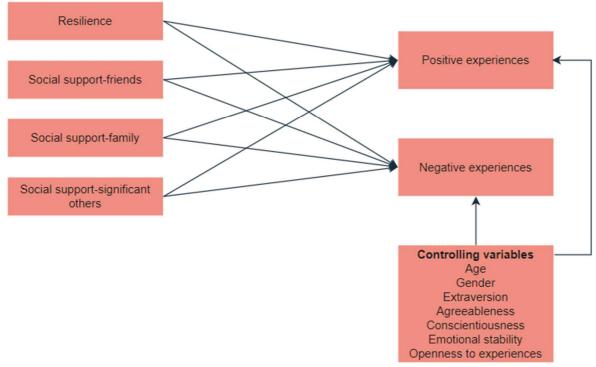


Figure 1. The proposed hypothetical model depicts the associations between the variables. **METHODS**

Participants

Participants comprised 324 young Saudi adults whose ages ranged from 18 to 60 years, with a mean age of 32.37 (SD = 8.64). There were 83.64% females and 16.36% males. Also, participants predominantly belonged to an average economic status (66.05%), followed by below-average (18.83%) and above-average (15.12%). Additionally, nearly two-thirds of participants were married (63.89%), while 32.41% were single, and 3.70% were separated or widowed. Concerning the highest level of education, most participants reported that they were doing or held postgraduate degrees (41.05%), followed by undergraduate degrees (39.51%), and a high school diploma or below (19.44%).

Measures

- The Brief Resilience Scale (BRS) was employed to measure the ability to bounce back from an adverse situation [12]. The BRS includes six self-reported items. Each of these items is scored on a 5-point Likert scale, varying between 1 (strongly disagree) and 5 (strongly agree). Good psychometric properties for the BRS have been reported in the Arabic language [57]. In the present study, Cronbach's alpha coefficient for the scale was found to be 0.70.
- The Multidimensional Scale of Perceived Social Support (MSPSS) was utilized to measure perceived social support from different sources [35]. The MSPSS contains 12 self-reported items that are grouped into three components: family, friends, and a significant other. Each question is rated on a 7-point Likert-type scale varying from 1 (strongly disagree) to 7 (strongly agree). The MSPSS was validated in Arabic by Merhi and Kazarian [58]. Internal consistency reliability for each subscale was found to be good to excellent (family α =.83; friends α =.90 and significant others α =.87).

- In this study, the Scales of Positive and Negative Experiences (SPANE) were used to measure emotional well-being in relation to positive and negative experiences [59]. The SPANE comprises 12 adjectives clustered into two domains: positive experiences and negative experiences. Each adjective is answered on a 5-point Likert-type scale that ranges between 1 (very rarely or never) and 5 (very often or always). The SPANE was found to have good psychometric properties in the Arabic language [60]. In this study, Cronbach's alpha coefficients were found to be .80 for positive experiences and .81 for negative experiences.
- The Ten-Item Personality Inventory (TIPI) was used to measure personality based on the five traits of extraversion, agreeableness, conscientiousness, emotional stability, and openness to experience [61]. Two items serve as the benchmarks for each trait. The TIPI uses a 7-point Likert-type scale ranging from 1 (disagree strongly) to 7 (agree strongly). The Arabic validation of the TIPI was carried out by Sabah et al. [62], who reported good evidence of validity. In this study, Cronbach's alpha for the TIPI was not computed due to the number of items on the TIPI (two items per subscale).

Procedure

This cross-sectional research design was conducted using an online survey. Prior to collecting the data, all participants were asked to give informed consent, which was presented on the first page of an online survey. On that page, detailed information about the purpose of the study, anonymity and confidentiality of responses, data protection, and participants' rights throughout the study was also presented to the participants. Only those who accepted to take part in the survey were allowed to proceed to answer questions. The dissemination of the survey was achieved using a secure link shared on different social media sites, including Facebook, Twitter, and Instagram. All participants were involved in the study voluntarily. As a result of this, they were not paid for their involvement.

Data analysis

Descriptive statistics and internal consistency reliability were reported prior to the main analysis. The Pearson correlation coefficient was computed to investigate the bivariate correlation between the variables. No violation of the assumptions of regression (e.g., multicollinearity, linearity, homoscedasticity, multivariate normality) was reported in the dataset. Hierarchical multiple regression analysis was conducted to examine the roles of resilience and perceived social support in the prediction of emotional well-being after controlling for demographic variables and personality traits. All data were analysed using SPSS 26.0 for Windows. The significance level was set to p < 0.05.

RESULTS

The findings of the preliminary analysis (see Table 1) revealed that the values of skewness ranged between -0.93 and 0.46 while the values of kurtosis ranged between -0.75 and 1.74. These results show that the variables in this study had a relatively normal distribution. Table 1 also shows the results of the bivariate correlation analysis. As can be seen from the table, resilience was significantly positively correlated with perceived social support received from friends, family, and significant others, all components of personality traits, and positive experiences, while it had a significant negative correlation with negative experiences. Additionally, all components of perceived social support had significant positive correlations with all components of personality traits and positive experiences, whereas they had significant negative correlations with negative experiences.

Furthermore, most components of personality traits shared significant positive correlations with positive experiences and significant negative correlations with negative experiences.

Two independent hierarchical multiple regression analyses were carried out to test the suggested hypothetical model. In the analysis, age, gender, and personality traits were taken into account as controlling variables and added in Step 1. Resilience and components of perceived support were viewed as the main predictor variables and included in Step 2. Also, positive and negative experiences as indicators of emotional well-being were considered outcome variables in the regression model. The regression results are presented in Table 2. The findings of the first regression analysis indicated that in Step 1, extraversion (β = .26, p<0.01), conscientiousness (β = .23, p<0.01), and emotional stability (β = .15, p<0.01) significantly predicted positive experiences by explaining 20% of the total variance in positive experiences. In Step 2, resilience (β = .20, p<0.01), friends support (β = .14, p<0.05), family support (β = .12, p<0.05), and significant others support (β = .13, p<0.05) significantly predicted positive experiences by accounting for 14% of unique variance in positive experiences. The findings of the second regression analysis demonstrated that in Step 1, extraversion $(\beta = -.16, p<0.01)$, agreeableness $(\beta = -.12, p<0.05)$, conscientiousness $(\beta = -.16, p<0.01)$, and emotional stability (β = -.28, p<0.01) significantly predicted negative experiences by explaining 23% of the total variance in negative experiences. In Step 2, only resilience (β = -.23, p<0.01) was found to significantly predict negative experiences by explaining 5% of unique variance in negative experiences.

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Table 1. The results of descriptive statistics, reliability, and correlation analysis.

	Descriptive					Correlations										
Variable	M	SD	Skew	Kurt	α	1.	2.	3.	4.	5.	6.	7.	8.	9.	1.	11.
1. Resilience	19.27	3.91	-0.19	0.02	0.70	1	.19**	.19**	.12*	.24**	.07	.12*	.32**	.21**	.35**	34**
2. Social support-friends	18.00	6.12	-0.45	-0.48	0.90		1	.52**	.57**	.14*	.20**	.20**	.24**	.11	.39**	20**
3. Social support-family	20.66	5.38	-0.93	0.44	0.83			1	.62**	.13*	.15**	.18**	.24**	.12*	.37**	17**
4. Social support significant	20.05	(0(0.05	0.00	0.07				1	1 17 **	1 17 **	1 7**	2.6**	07	20**	1.4*
others	20.95	6.06	-0.85	-0.08	0.87				1	.17**	.17**	.17**	.26**	.07	.38**	14*
5. Extraversion	8.40	2.01	0.10	0.80	N/A					1	07	.05	.02	.20**	.28**	16**
6. Agreeableness	10.86	2.13	-0.21	-0.75	N/A						1	.42**	.40**	.14*	.18**	28**
7. Conscientiousness	10.57	2.65	-0.49	-0.40	N/A							1	.36**	.20**	.32**	32**
8. Emotional stability	8.67	2.79	-0.04	-0.42	N/A								1	.16**	.26**	38**
9. Openness to experiences	9.49	2.49	-0.14	-0.24	N/A									1	.20**	05
10. Positive experiences	22.35	3.76	-0.80	1.74	0.80										1	41**
11. Negative experiences	14.55	4.21	0.46	0.47	0.81											1

Note: **. *p*< 0.01; *. *p*< 0.05; Skew=skewness, Kurt=kurtosis.

Cronbach's alpha did not compute for the personality traits due to including only two items per subscale.

Table 2. Predicting positive and negative experiences from resilience and social support after controlling for age, gender, and personality traits.

		Posi	tive experie	nces		Negative experiences						
Predictor	В	SE	В	t	р	В	SE	β	t	р		
Step 1	F	F(7, 323)=11	.54, <i>p</i> <0.01, <i>l</i>	$R=.45, R^2=.20$		F(7, 323)=13.16, p<0.01, R=.48, R ² =.23						
Age	-0.01	0.02	-0.02	-0.31	0.75	-0.04	0.02	-0.09	-1.80	0.07		
Gender	-0.08	0.52	-0.01	-0.15	0.88	0.18	0.58	0.02	0.32	0.75		
Extraversion	0.49	0.10	0.26	5.00	0.00	-0.33	0.11	-0.16	-3.11	0.00		
Agreeableness	0.05	0.10	0.03	0.48	0.63	-0.24	0.11	-0.12	-2.11	0.04		
Conscientiousness	0.32	0.08	0.23	3.83	0.00	-0.26	0.09	-0.16	-2.80	0.01		
Emotional stability	0.21	0.08	0.15	2.74	0.01	-0.42	0.08	-0.28	-4.99	0.00		
Openness to experiences	0.11	0.08	0.07	1.30	0.19	0.09	0.09	0.05	1.02	0.31		
Step 2	F(11, 3	323)=14.80,	<i>p</i> <0.01, <i>R</i> =.5	9, R²=.34, ΔR	2=.14	$F(11, 323)=10.70, p<0.01, R=.52, R^2=.27, \Delta R^2=.05$						
Resilience	0.20	0.05	0.20	3.98	0.00	-0.25	0.06	-0.23	-4.22	0.00		
Social support-friends	0.09	0.04	0.14	2.40	0.02	-0.04	0.04	-0.06	-0.94	0.35		
Social support-family	0.09	0.04	0.12	2.00	0.04	-0.01	0.05	-0.02	-0.26	0.80		
Social support-significant others	0.08	0.04	0.13	2.07	0.04	0.04	0.05	0.06	0.92	0.36		

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Research has indicated that many factors, including age, gender, and personality traits, can impact emotional well-being [43,63-69]. However, the role of resilience and social support in predicting emotional well-being among adults, particularly young Saudi adults, is understudied. The current research aimed to examine the unique contributions of resilience and perceived social support from friends, family, and significant others to emotional well-being after controlling for the impacts of age, gender, and personality traits among young Saudi adults. The results of this study typically provided evidence that supports the notion that higher levels of resilience and perceived social support significantly contributed to better emotional well-being. The results of this study typically showed that resilience and perceived emotional support from family, friends, and significant others explained a significant amount of variance in the prediction of emotional well-being as represented by higher positive experiences and lower negative experiences. This suggests that young adults who possess higher levels of resilience and perceived support from their social networks are more likely to experience more positive emotions and fewer negative ones. Overall, the findings highlight the importance of resilience and social support in promoting emotional well-being.

This study's results are similar to those of other studies that have looked at the link between resilience, perceived social support, and well-being. For example, a study conducted by Yıldırım and Tanrıverdi [10] found that higher levels of resilience and perceived social support were able to predict a significant amount of variance in well-being. Another study showed that psychological resilience was positively and significantly predicted by social support, and in turn, psychological resilience had a positive and significant impact on well-being [70]. In the study of Shuo et al. [71], the relationship between emotional intelligence and well-being in young adults was mediated by a chain of social support and psychological resilience. Similar findings have been reported in studies among individuals with and without chronic pain. For example, a study conducted in the late stages of the lockdown found that after accounting for the effects of age, gender, and chronic pain, the significant predictors of anxiety, depression, and stress as indicated by poor emotional well-being were found to be resilience, social support, and happiness with small to medium effect sizes [72].

Implications of the findings

Emotional well-being is an important part of being healthy, and it can have a positive effect on a person's mental health and quality of life. This study added to the body of research on resilience, perceived social support, and emotional well-being among Saudi young adults by building on earlier research. To the best of our knowledge, this is among the first studies that have simultaneously explored the unique roles of resilience and social support in predicting emotional well-being over and above the demographic factors and personality traits of young Saudi adults. The results of this study revealed that improved emotional well-being in this group of people was a function of psychological resilience and perceived social support from friends, family, and significant others over and above demographic factors such as age, gender, and personality traits. In particular, individuals who had the ability to bounce back from the stressful situation (resilience) and receive help and care from other people, such as friends, family members, and significant others, facilitating overcoming and managing adverse situations (social support), significantly contributed to increased emotional well-being.

The study's results have real-world implications for people who work with young adults, like mental health professionals, teachers, and people who make policy. The study's results can be used by professionals to come up with ways to improve emotional well-being, like making people more resilient and making them feel like they have more social support resources. For example, people who work in mental health can use resilience-based interventions [72] to help young adults who aren't feeling good emotionally. In the same way, teachers can make programs that help young adults get social support and give them chances to connect with their friends, family, and significant others. Policymakers can make rules and practices that help young adults' emotional health, like encouraging and making it easier for them to make friends. Based on these results, people should get training in resilience and social support that focuses on improving their psychological and social resources as part of strength-based interventions. These interventions have the potential to improve the well-being of individuals, particularly young adults. The study emphasizes the need to consider both individual and social factors when examining emotional well-being. Neglecting either of these aspects can result in an incomplete or inaccurate understanding of this complex phenomenon. Therefore, it is crucial to develop targeted interventions that focus on both individual and social factors to promote emotional well-being effectively. By incorporating resilience and social support training into interventions, professionals can improve emotional well-being outcomes for young adults and better understand this phenomenon.

Limitations and future research

The present research has several limitations. First, our study was based on a cross-sectional research design which relied on self-reported measures obtained from participants. As such, it is difficult to establish any causal relationships between the variables based on our findings. To improve causal inference between the variables of this study, future research should consider using a longitudinal research design rather than the cross-sectional design used in this study. Second, the current sample consisted of young Saudi adults whose ages varied from 18 to 60 years (32.37±8.64). However, individuals aged below 18 and above 60 years old were underrepresented. To address this limitation, future researchers could expand their samples by including participants from different socioeconomic backgrounds in Saudi Arabia. Finally, in this study, we only investigated the roles of resilience and social support in the prediction of emotional well-being. There are many other psychological and social factors affecting individuals' emotional well-being. Therefore, subsequent research should focus on exploring other additional factors that could aid in better understanding emotional well-being from psychological and social perspectives. Such research may provide new insights into how the emotional and motivational management of different life experiences can contribute to emotional well-being.

CONCLUSION

In conclusion, the results of this study showed that resilience and perceived social support are significant predictors of emotional well-being among young Saudi adults. The study underscores the importance of considering both individual and social factors when examining emotional well-being, as neglecting either of these factors can result in an incomplete understanding of emotional well-being. These findings can be used to develop targeted interventions aimed at promoting emotional well-being by focusing on increasing resilience and perceived social support in young adults. Also,

the findings of the present study contribute to theories of emotion, well-being, social support, and resilience.

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