



Social Support and Prisoners' Compliance in Rehabilitation Activities at Class II Penitentiary Padang

Puteri Aneira Muthie Syade^{1✉}, Rinaldi²

^{1,2} Department of Psychology, Faculty of Psychology and Health, City, Universitas Negeri Padang, , Indonesia
✉correspondend_author_email: aneiraputeri7@gmail.com

Abstract

The effectiveness of rehabilitation programs in correctional facilities depends not only on institutional regulations but also on the psychosocial support received by inmates. This study employed a quantitative correlational design to examine the relationship between social support and prisoners' compliance in rehabilitation activities at the Class II Padang Penitentiary. The population consisted of 60 inmates participating in NAPZA rehabilitation, and total sampling was used to include all individuals as respondents. Data were collected through a structured questionnaire to analyze the relationship between perceived social support and compliance. The results indicate a statistically significant and positive relationship between social support and prisoners' compliance. Inmates who receive higher levels of social support tend to demonstrate greater adherence to rehabilitation programs, reflecting the motivational and behavioral benefits of a supportive social environment. These findings emphasize the crucial role of social support in fostering engagement, commitment, and positive behavioral outcomes in correctional rehabilitation settings. The study provides empirical evidence that strengthening social support mechanisms can improve program effectiveness. Practical implications suggest that correctional institutions should integrate social support strategies to foster inmates' participation. Future research is recommended to explore additional factors influencing compliance and to apply longitudinal approaches to capture behavioral changes over time.

Keywords: social support, prisoners' compliance, rehabilitation activities, penitentiary rehabilitation, inmate adherence

Pysiche 165 Journal is licensed under a Creative Commons Attribution-Share Alike 4.0 International License.



1. Introduction

Correctional institutions are an integral part of the criminal justice system in Indonesia, tasked with rehabilitating and educating inmates. According to Article 5 paragraph (1) and Article 20 paragraph (1) of the 1945 Constitution, the government enacted Law Number 12 of 1995 and its amendments as the legal framework governing the duties and responsibilities of correctional institutions. Correctional facilities play a crucial role in the Indonesian legal system, particularly within the realm of criminal law [1]. One of their core functions involves supervising inmates during incarceration, including providing guidance and monitoring for those released under conditional terms [2].

Class II Penitentiary in Padang, West Sumatra, is responsible for implementing rehabilitation programs, particularly for inmates involved in narcotics and psychotropic substances (NAPZA) cases, emphasizing that prisons are not merely punitive institutions but also serve as transformative spaces aimed at reducing the risk of recidivism [3].

The prevalence of NAPZA abuse in West Sumatra has been increasing. A total of 1,254 cases were reported in 2023, up from 1,162 cases in 2022. Padang recorded

the highest number of cases, with 325 incidents, representing a 25.8% increase from the previous year [4]. At Class II Penitentiary Padang, 60 inmates were identified as NAPZA users, highlighting a strong link between the prison population and substance abuse issues.

NAPZA abuse carries significant health hazards, including liver damage from alcohol use; injuries to the nose, throat, and nervous system caused by substances such as cocaine, heroin, or opium; detrimental effects on fetal development if used during pregnancy; addiction; impaired cognitive functioning; and blood disorders that may lead to clotting [5]. Beyond physiological consequences, NAPZA use can severely disrupt an individual's daily life, interfering with household duties, educational pursuits, employment, and social relationships [6].

The impact of NAPZA extends to both mental and physical health. Mentally, users are susceptible to depression, anxiety, extreme mood fluctuations, psychotic episodes, and cognitive impairments. Physically, NAPZA can harm essential organs such as the liver, heart, lungs, and nervous system, compromise immune system function, induce malnutrition, and increase the risk of infectious diseases through unsafe injection practices. In the long

term, these effects may become permanent and even life-threatening. These findings highlight the crucial role of family involvement and structured rehabilitation programs in the recovery process, while also emphasizing the necessity of early prevention and intervention to reduce health risks for individuals and the broader community [7].

Rehabilitation is one of the measures implemented by the government to address NAPZA abuse. This approach is considered an alternative intervention, as NAPZA users are not only offenders but also victims of addiction who require treatment and support [8]. Rehabilitation is necessary for NAPZA users who require mental, physical, and psychological recovery so that they can develop into better individuals and avoid repeating the same mistakes they made before undergoing rehabilitation [9]. To address these challenges, rehabilitation programs are implemented to support recovery and reduce dependency on NAPZA. Rehabilitation facilities provide structured programs led by trained personnel, aiming to facilitate recovery from addiction and promote social reintegration [10]. By participating actively in these programs, individuals are guided toward sustainable recovery and are less likely to relapse or repeat past mistakes.

The United Nations Office on Drugs and Crime (UNODC) outlines four primary objectives of rehabilitation: continuation of post-detoxification recovery to maintain physiological and psychological health; reinforcement of abstinence from addictive behaviors; promotion of healthier lifestyles to prevent substance abuse; and support for personal health, social functioning, and risk reduction for the community. Despite these goals, rehabilitation efforts face multiple challenges, including internal barriers such as selective enforcement by authorities and external barriers, including low motivation among inmates and insufficient family support [11]. Other obstacles include limited public awareness of rehabilitation, non-cooperation during assessments, insufficient human resources, and inadequate facilities, particularly in remote areas [12]. Consequently, active participation and high compliance in rehabilitation programs are critical for preventing relapse among NAPZA users.

Compliance, understood as the degree to which individuals follow recommended actions and treatments, is heavily influenced by social support provided by rehabilitation staff, including informational, emotional, and instrumental assistance [13]. Empirical evidence indicates a positive relationship between social support and compliance with rehabilitation programs [14], [15], [16]. Social support refers to various forms of assistance individuals receive from people in their surrounding environment that contribute to the improvement of their physical and psychological well-being [17].

Social support can come from a spouse, children, other family members, friends, professionals, communities, or other social groups [18], and such support is crucial for the mental health of prisoners [19]. With such social support, individuals tend to feel more cared for and accompanied, which can directly improve adherence [20].

Social processes within the family, such as externalization, objectification, and internalization, contribute to the development of individual behavioral patterns. Limited parental supervision and control increase the risk of NAPZA abuse. Moreover, an individual's experiences, observations, and perceptions of their social environment shape their worldview and behavior, making self-concept and social interactions crucial factors in reducing the risk of NAPZA abuse [21]. Another contributing factor is family dysfunction, where children often experience a lack of attention, affection, recognition, and trust, with broken homes being a particularly common condition associated with increased vulnerability to substance abuse [22]. Although some studies have reported inconsistent or non-significant relationships between social support and patient compliance [23], it is important to acknowledge that not all types of social support are equally beneficial. Support perceived as judgmental, coercive, or overly controlling can hinder patient compliance, as individuals may feel pressured or lose a sense of autonomy in making decisions related to their health.

Field observations at Class II Penitentiary Padang revealed heterogeneous compliance among inmates using NAPZA. Some inmates consistently attended therapy sessions and adhered to rehabilitation procedures. Others frequently missed sessions or only partially engaged with the established protocols. An initial interview with rehabilitation officers on December 11, 2025, identified several key factors influencing compliance, including low intrinsic motivation, limited understanding of the benefits of rehabilitation, and insufficient social support from family members and peers. Officers also noted that although many inmates received guidance and information from the rehabilitation team, some still did not fully participate in activities such as individual counseling, group therapy, and life skills training, which often reduced the overall effectiveness of the program. The transition from a life of freedom to one with restricted access to everything forces prisoners to adapt to a new environment. Feelings of hopelessness about the future also arise due to the stigma of being an ex-convict. Therefore, social support from family plays a crucial role in encouraging prisoners to reform, respect rules, and adhere to the norms of both family and society. With this support, prisoners can recognize their past mistakes, avoid repeating offenses, and plan for a better future [24].

To enrich the data, in-depth interviews were conducted with three inmates. Inmate A reported occasionally skipping sessions because the rehabilitation activities were perceived as monotonous. Inmate B stated that limited encouragement and involvement from family members reduced their motivation to participate consistently. Inmate C explained that peer influence within the facility sometimes hindered regular attendance in rehabilitation programs. These findings underscore the critical role of social support from rehabilitation staff, family, and peers in promoting inmate adherence and engagement with rehabilitation programs. Furthermore, the results highlight the importance of addressing both individual and environmental factors to enhance program effectiveness and reduce the risk of relapse among inmates using NAPZA.

This study aims to investigate the relationship between social support and inmate compliance in rehabilitation activities at Class II Penitentiary Padang, providing insights to enhance program effectiveness and contributing to broader strategies for NAPZA rehabilitation in correctional settings.

2. Research Methods

This study employed a quantitative correlational design to examine the relationship between social support and prisoners' compliance in rehabilitation activities at Class II Penitentiary Padang. The population consisted of 60 inmates participating in NAPZA rehabilitation, and total sampling was used to include all individuals as respondents. The independent variable, social support, was measured through four dimensions: emotional, instrumental, informational, and social network support. The dependent variable, compliance, was assessed through four aspects: compliance, identification, internalization, and belief [25]. Instrument validity was tested at the item level, with social support items exhibiting validity coefficients ranging from 0.321 to 0.756, and compliance items ranging from 0.473 to 0.807. All items were considered valid, making the instruments suitable for further analysis. Reliability was confirmed using Cronbach's alpha, yielding values of 0.936 for social support and 0.937 for compliance.

Data collection involved face-to-face administration of questionnaires after obtaining permission from the penitentiary authorities. Collected data were tabulated, validated, and analyzed using the Pearson product-moment correlation coefficient to determine the strength and direction of the relationship between social support and compliance. Statistical analysis was conducted using IBM SPSS 26. This methodological approach ensured a systematic and reproducible examination of how social support influences inmate adherence to rehabilitation programs, providing actionable insights for improving program effectiveness.

3. Results and Discussions

3.1. Results

3.1.1 Description of Research Data

The data in this study were analyzed to provide a summary of key descriptive statistics, including the minimum and maximum values, mean, and standard deviation. Statistical processing was carried out using SPSS 26.0 for Windows, yielding the following results:

Table 1. Descriptive Statistics Results

	N	Min	Max	Mean	SD
Social Support	60	131	148	141.63	4.158
Compliance	60	137	152	145.92	3.576

The descriptive statistical analysis of 60 participants is presented in Table 1. For the social support variable, the mean score was 141.63, ranging from 131 to 148, with a standard deviation (SD) of 4.158. For the compliance variable, the mean was 145.92, with scores ranging from 137 to 152 and an SD of 3.576. These results indicate that both variables exhibit adequate variability and values distributed within a normal range, suggesting that the data are reliable and free from bias, providing a solid foundation for further statistical analysis.

3.1.2 Classical Assumption Tests

Classical assumption testing in this study included normality and linearity assessments to ensure the appropriateness of the regression analysis. Normality was examined using the Shapiro–Wilk test in SPSS, where data were considered normally distributed if the significance value exceeded 0.05. The outcomes of the normality and linearity tests are summarized in Table 2.

Table 2. Shapiro-Wilk Normality Test Results

Variable	Sig. Value	Description
Social Support	0.093	Normally Distributed Data
Compliance	0.322	Normally Distributed Data

Based on the normality test results, the Shapiro–Wilk significance values for social support and compliance were 0.093 and 0.322, respectively. Since both values exceeded the 0.05 threshold, it can be concluded that the data for both variables were normally distributed.

The linearity assumption test was conducted to determine whether social support and psychological well-being exhibited a linear relationship. The results of the major hypothesis testing are presented in Table 3.

Table 3. Linearity Test Results

Variable Relationship	Sig. Linearity	Description
Social Support*Compliance	0.000	Linear

As presented in Table 3, the linearity analysis indicates a significance value of 0.000 for the association between social support and compliance, confirming a linear relationship.

3.1.3 Hypothesis Testing

This study proposes the hypothesis that there is a positive and significant relationship between social support and prisoners' compliance with rehabilitation activities. The results of the main hypothesis testing are presented in Table 5.

Table 4. Linearity Test Results

Variable	Pearson Correlation	Sig.Value	Description
Social Support	0.612**	0.000	Significant Relationship
Compliance	0.612**	0.000	Significant Relationship

Table 4 presents the results of the hypothesis testing conducted in this study. The correlation analysis indicates a significance value of 0.000, which is below the 0.01 significance level. This result confirms a statistically significant relationship between social support and prisoners' compliance in rehabilitation activities at the Class II Penitentiary Padang. Accordingly, the research hypothesis proposing a relationship between social support and prisoners' compliance is supported.

Moreover, the Pearson correlation coefficient of 0.612 demonstrates a strong positive association between the two variables. This finding indicates that higher levels of social support are associated with higher levels of compliance with rehabilitation activities. In practical terms, prisoners who receive greater social support tend to show stronger adherence to rehabilitation programs within the correctional environment.

3.2. Discussions

This study was conducted to examine the relationship between social support and prisoners' compliance in rehabilitation activities at a Class II penitentiary. The findings indicate that social support plays an important role in encouraging prisoners' compliance, suggesting that individuals who receive stronger social support tend to show greater commitment to participating in rehabilitation programs. These results emphasize the importance of social support as a key factor in promoting positive behavioral engagement within the correctional rehabilitation context.

These findings indicate that higher levels of social support are positively associated with greater compliance among prisoners participating in rehabilitation activities. Specifically, inmates who perceive strong emotional, informational, and instrumental support from rehabilitation staff, family members, and peers are more likely to consistently attend therapy sessions, engage actively in group

discussions, and adhere to structured life skills training programs. Such support not only provides practical guidance and encouragement but also enhances inmates' sense of belonging and self-efficacy, which are crucial for maintaining motivation throughout the rehabilitation process.

Conversely, lower levels of social support tend to correspond with reduced compliance. Inmates who experience minimal guidance, limited encouragement, or a lack of emotional backing may struggle to adhere to rehabilitation protocols, often missing sessions or engaging only partially in activities. The absence of adequate social support can exacerbate feelings of isolation, stress, or demotivation, ultimately undermining the effectiveness of rehabilitation programs. These results underscore the critical role of comprehensive social support systems in fostering consistent compliance among prisoners, highlighting the need for interventions that strengthen both professional and personal support networks to optimize rehabilitation outcomes.

The findings of this study reinforce previous research indicating a relationship between social support and compliance. Social support refers to the level of assistance individuals receive from emotionally close sources, such as family members, friends, and partners, reflecting the positive influence of one's immediate social environment [26]. Individuals with strong social support tend to manage stress more effectively and cope better with situations that may generate psychological pressure [27]. From the authors' perspective, these findings suggest that social support not only facilitates compliance but also serves as a critical buffer against environmental and psychological factors that may otherwise undermine an individual's adherence to recommended health behaviors.

Research by [28] found that individuals who receive adequate social support tend to demonstrate higher levels of adherence to prescribed treatment. Social support, particularly from family members, fosters feelings of care, attention, and emotional backing, which in turn enhances motivation and commitment to maintaining regular treatment routines. Family involvement and willingness to accompany patients during the treatment process also contribute to a sense of comfort and help reduce the burden associated with illness, thereby promoting greater acceptance of and adherence to treatment. Similarly, [29] reported a positive and significant correlation between social support and compliance. In addition, findings from [30] indicate that individuals with stronger social support, especially from family, tend to develop more positive attitudes toward their treatment process. Such support plays a crucial role in encouraging consistent and sustained compliance to treatment regimens.

4. Conclusions

Based on the results of the data analysis, it can be concluded that social support has a meaningful relationship with prisoners' compliance in rehabilitation activities at the Class II Padang Penitentiary. The findings indicate a significant and positive relationship between the two variables, suggesting that social support plays an important role in enhancing prisoners' compliance. In other words, higher levels of social support are associated with higher levels of compliance, whereas lower social support tends to be accompanied by lower compliance. This study has several limitations, including the focus on a single correctional institution, the examination of limited variables without considering other potential influences such as institutional programs or individual psychological factors, and the use of cross-sectional data that do not capture changes in behavior over time. Future research is therefore recommended to expand the study sample across different correctional facilities, incorporate additional relevant variables, and apply longitudinal approaches to better understand changes in prisoners' compliance throughout the rehabilitation process. Further investigation into potential mediating or moderating factors may also provide a deeper understanding of the mechanisms through which social support influences compliance in rehabilitation settings.

References

- [1] Suandika, I. N., & Wirasaty, I. G. N. (2021). Fungsi Lembaga Pemasyarakatan dalam Melaksanakan Pembinaan terhadap Warga Binaan Pemasyarakatan (WBP): Studi Penulisan di Lembaga Pemasyarakatan Perempuan Kelas II Denpasar. *Jurnal Ilmiah Raad Kertha*, 4(1). <https://doi.org/10.47532/jirk.v4i1.261>
- [2] Nugroho, T. A. (2020). Evaluasi Struktur Organisasi pada Lembaga Pemasyarakatan Terbuka terhadap Pelaksanaan Tugas dan Fungsi. *Jurnal Ilmiah Kebijakan Hukum*, 14(1). <https://doi.org/10.30641/kebijakan.2020.v14.43-60>
- [3] Mufti, E. A., & Riyanto, O. S. (2023). Peran Lembaga Pemasyarakatan dalam Upaya Rehabilitasi Narapidana untuk Mengurangi Tingkat Residivis. *AL-MANHAJ: Jurnal Hukum Dan Pranata Sosial Islam*, 5(2), 2425–2438. <https://doi.org/10.37680/almanhaj.v5i2.4026>
- [4] Sisilia, R. H. U. (2024). Hubungan Dukungan Keluarga dengan Resiliensi pada Mantan Pecandu Narkoba di Kota Padang. *Causalita: Journal of Psychology*, 2(2). <https://doi.org/10.62260/causalita.v2i2.331>
- [5] Yunisa, D. R. D. (2023). Bahaya Penyalahgunaan Narkoba terhadap Kesehatan Masyarakat. *Jurnal Pengabdian Kepada Masyarakat Abdi Putra*, 3(1), 1–6. <https://doi.org/10.52005/abdiputra.v3i1.111>
- [6] Indiani, R., Nurazizah, S. A., Abdulah, M. B., & Listi, R. (2022). Faktor Yang Mempengaruhi Penyalahgunaan NAPZA di Masyarakat. *Photon: Jurnal Sains Dan Kesehatan*, 12(2). <https://doi.org/10.37859/jp.v12i2.3306>
- [7] Noviana, P. (2024). Dampak Penyalahgunaan Narkotika Terhadap Kesehatan Mental dan Fisik. *UAI J Arts Humanit Soc Sci*, 1(5). <https://doi.org/10.5281/zenodo.145427825>
- [8] Hidayatun, S., & Widowaty, Y. (2021). Konsep Rehabilitasi Bagi Pengguna Narkotika Yang Berkeadilan. *JPHK: Jurnal Penegakan Hukum Dan Keadilan*, 1(2). <https://doi.org/10.18196/jphk.1209>
- [9] Panggabean, W. I., & Jarodi, O. (2023). Analisis Program Rehabilitasi Sosial Bagi Narapidana Narkotika Di Lembaga Pemasyarakatan Kelas I Medan. *Jurnal Intelektualita: Keislaman, Sosial, Dan Sains*, 12(02). <https://doi.org/10.19109/intelektualita.v12i02.19610>
- [10] Andriani, A., Sarmadan, S., & Kusuma, N. (2024). Rehabilitasi Sosial Korban Penyalahgunaan NAPZA dalam Mewujudkan Keberfungsian Sosial: Studi Kasus di Lembaga Pemasyarakatan Kelas II A Kendari. *WELVAART: Jurnal Ilmu Kesejahteraan Sosial*, 5(2), 239–249. <https://doi.org/10.52423/welvaart.v5i2.20>
- [11] Aisyah, S., Harun, H., & Ramziati, R. (2025). Pelaksanaan Rehabilitasi Medis dan Sosial bagi Korban Penyalahgunaan Narkotika menurut Undang-Undang Nomor 35 Tahun 2009: Studi Penelitian di Badan Narkotika Nasional Kota Lhokseumawe. *Jurnal Ilmiah Mahasiswa Fakultas Hukum Universitas Malikussaleh*, 7(4). <https://doi.org/10.29103/jimfh.v7i4.18185>
- [12] Hadiansyah, R., & Rochaeli, N. (2022). Penerapan Rehabilitasi terhadap Anak Penyalahguna Narkotika. *Jurnal Pembangunan Hukum Indonesia*, 4(1), 1–13. <https://doi.org/10.14710/jphi.v4i1.1-13>
- [13] Izaak, F. A. (2024). Analisis Faktor Kontributor Kepatuhan Pasien NAPZA dalam Menjalani Proses Rehabilitasi di Badan Narkotika Nasional Provinsi Papua. *Preventif: Jurnal Kesehatan Masyarakat*, 15(3), 47–67. <https://doi.org/10.22487/preventif.v15i3.1659>
- [14] Asyari, W. H., Widayanti, A. W., & Prabandari, Y. S. (2024). Hubungan Dukungan Keluarga terhadap Kepatuhan Minum Obat Pasien dengan Gangguan Jiwa: Studi Literature Review. *Majalah Farmaseutik*, 20(3), 404–411. <https://doi.org/10.22146/farmaseutik.v20i3.96306>
- [15] Rahim, N. K., & Soeli, Y. M. (2023). Hubungan Dukungan Sosial Dengan Kepatuhan Minum Obat ARV di Rumah Singgah Dukungan Sebaya Kota Gorontalo. *Jambura Nursing Journal*, 5(2), 210–215. <https://doi.org/10.37311/jnj.v5i2.20738>
- [16] Shahin, W., Kennedy, G. A., & Stupans, I. (2021). The Association Between Social Support And Medication Adherence In Patients With Hypertension: A Systematic Review. *Pharm Pract (Granada)*, 19(2), 2300. <https://doi.org/10.18549/PharmPract.2021.2.2300>
- [17] Monica, R., Abidin, Z., Lubis, F. Y., & Novita, S. (2025). Social Support For Psychology Master's Students Who Live Away From Home: A Case Study. *Psyche 165 Journal*, 15(2), 114–121. <https://doi.org/10.35134/jpsy165.v18i2.528>
- [18] Auliya, N. P. D., & Setiyowati, N. (2024). Systematic Literature Review Based On Big Data: Dukungan Sosial dan Psychological Well-Being pada Remaja. *Psyche 165 Journal*, 17(2), 134–139. <https://doi.org/10.35134/jpsy165.v17i2.367>
- [19] Solbakken, L., & Wynn, R. (2022). The Perceived Importance Of Social Support For Prisoners' Mental Health. *International Journal of Integrated Care*, 22, 135. <https://doi.org/10.5334/ijic.ICIC22059>

- [20] Anastasya, F., Nurmayunita, H., & Mufarokhah, H. (2026). Hubungan Dukungan Keluarga Dengan Kepatuhan Kontrol Gula Darah Pada Penderita Diabetes Melitus Tipe II di Puskesmas Pandawangi. *RIGGS Journal of Artificial Intelligence and Digital Business*, 4(4), 9485–9492. <https://doi.org/10.31004/riggs.v4i4.5000>
- [21] Kumalasari, N. M. D., Humaizi, & Irmayani, T. (2023). Faktor-Faktor Penyalahgunaan Narkotika dan Zat Adiktif Pada Remaja di Balai Rehabilitasi Parmadi Putra “Insyaf”, Sumatera Utara. *Perspektif*, 12(3), 934–941. <https://doi.org/10.31289/perspektif.v12i3.9488>
- [22] Ritanti, R., Nurdiantami, Y., Andriana, B., & Agustina, D. (2022). Hubungan kualitas keluarga terhadap perilaku berisiko NAPZA di UPTD Puskesmas Limo Depok. *PREPOTIF Jurnal Kesehatan Masyarakat*, 6(2), 1768–1775. <https://doi.org/10.31004/prepotif.v6i2.4550>
- [23] Syam, A. R. A. P., Widayati, A. W., & Wiedyaningsih, C. (2025). Hubungan Dukungan Sosial dengan Kepatuhan Pengobatan Antiretroviral (ARV) pada Pasien HIV-AIDS di Kabupaten Sleman. *Majalah Farmaseutik*, 21(4), 398–404. <https://doi.org/10.22146/farmaseutik.v21i4.94695>
- [24] Wandri, R., Nastasia, K., & Mariana, R. (2021). Optimisme Masa Depan pada Narapidana Kasus Pembunuhan ditinjau Berdasarkan Dukungan Sosial dari Keluarga di LAPAS Klas IIA Kota Padang. *Psyche 165 Journal*, 14(1), 113–120. <https://doi.org/10.35134/jpsy165.v14i1.102>
- [25] Çapan, G. E., & Uzunçarşılı, Ü. (2022). A Study On Developing The Organizational Obedience Scale Based On Exploratory And Confirmatory Factors Analysis. *International Journal on Social and Education Sciences*, 4(1). <https://doi.org/10.46328/ijones.303>
- [26] Hidayati, D. L., & Purwandari, E. (2023). Hubungan antara Dukungan Sosial dengan Kesehatan Mental di Indonesia: Kajian Meta-Analisis. *GUIDENA: Jurnal Ilmu Pendidikan, Psikologi, Bimbingan Dan Konseling*, 13(1), 270–283. <https://doi.org/10.24127/gdn.v13i1.6536>
- [27] Winner, D., & Subroto, M. (2023). Dampak Dukungan Sosial terhadap Stres Narapidana Wanita di Lembaga Pemasyarakatan Kelas IIB Lubuk Pakam. *Jurnal Intelektualita: Keislaman, Sosial, Dan Sains*, 12(2). <https://doi.org/10.19109/intelektualita.v12i02.19567>
- [28] Eik, S., Wahyuni, M. M. D., Syamruth, Y. K., & Nur, K. R. M. (2025). Dukungan Sosial yang Mempengaruhi Kepatuhan Pasien Gagal Ginjal Kronis untuk Menjalani Terapi Hemodialisis di RSUD Johannes Kupang. *MAHESA: Malahayati Health Student Journal*, 5(6), 2337–2354. <https://doi.org/10.33024/mahesa.v5i6.15706>
- [29] Putri, F. A., & Budiman, A. (2025). Hubungan Dukungan Sosial dengan Kepatuhan Pengobatan Antiretroviral (ARV) pada Penderita HIV/AIDS. *Majalah Farmaseutik*, 6(2). <https://doi.org/10.29313/v6i2.23999>
- [30] Alatawi, A. A., Alaamri, M., & Almutary, H. (2024). Social Support and Adherence to Treatment Regimens among Patients Undergoing Hemodialysis. *Healthcare*, 12(9), 1958. <https://doi.org/10.3390/healthcare1219195>

Biographies of Authors



Puteri Aneira Muthie Syade is an undergraduate student in the Department of Psychology, Faculty of Psychology and Health, Universitas Negeri Padang. She was born on July 17, 2003, in Padang, Indonesia. Currently, she is pursuing her studies in psychology with a focus on understanding human behavior and mental processes. Universitas Negeri Padang is located in Padang, West Sumatra, Indonesia.