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EXAMINING THE RELATIONSHIP BETWEEN 7TH AND 8TH GRADE MIDDLE SCHOOL
STUDENTS' PERCEIVED SOCIAL SUPPORT AND EMPATHY LEVELS

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EXAMINING THE RELATIONSHIP BETWEEN 7TH AND 8TH GRADE MIDDLE
SCHOOL STUDENTS' PERCEIVED SOCIAL SUPPORT AND EMPATHY LEVELS

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To my soulmate...

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ABSTRACT

This study aims to determine the relationship between perceived social support and the empathy skills of the 7th and 8th grade middle school students. The sample of the study consisted 323 middle school students (158 female, 165 male) in Bornova, Cigli and Bahattin Tatis Campuses of Izmir Private Turk College. The data was obtained from the participants via Child-Adolescent Social Support Scale (Malecki et al., 1999; Yardımcı & Başbakkal, 2010) and An Index of Empathy for Children and Adolescents (Bryant, 1982; Gürtunca, 2013). Independent samples t-test was applied for determining whether perceived social support and empathy levels of middle school students were significantly different according to gender and number of siblings. Pearson correlation analysis was also applied for determining the correlations between the research variables. The empathy levels of the students were significantly different according to gender. It is founded that the empathy levels of female students were higher than male students.

The frequency and importance of the students' perceived support from close friends and the importance of the students' perceived support from their teachers showed a significant difference according to gender. Female students had higher perceived support levels from close friends and teachers than male students.

The perceived social support levels of the students showed a significant difference according to the number of siblings. It has been found that students with siblings have a higher perceived support frequency from close friends than students who are only children.

According to the results of correlation analysis, it is founded that perceived social support and empathy skills had a positive relationship.

Keywords: Perceived social support, empathy, middle school students.

ÖZET

Bu çalışma, ortaokul 7. ve 8. sınıf öğrencilerinin algıladıkları sosyal destek ile empati kurma becerileri arasındaki ilişkinin belirlenmesi amacı ile gerçekleştirilmiştir. Araştırmanın örneklemini, İzmir Özel Türk Koleji Bahattin Tatış, Bornova ve Çiğli Kampüslerinde okumakta olan 323 ortaokul öğrencisi (158 kadın, 165 erkek) oluşturmuştur. Araştırma verileri Çocuk Ergen Sosyal Destek Ölçeği (Malecki et al., 1999; Yardımcı&Başbakkal, 2010) ve Çocuk ve Ergenler için Empati Ölçeği (Bryant, 1982; Gürtunca, 2013) aracılığıyla toplanmıştır. Ortaokul öğrencilerinin algıladıkları sosyal destek ve empati düzeylerinin cinsiyet ve kardeş sayısı değişkenlerine göre anlamlı farklılık gösterip göstermediğinin belirlenmesinde ilişkisiz örneklem t-testi kullanılmıştır. Ayrıca, araştırma değişkenleri arasındaki korelasyonların belirlenmesi için Pearson korelasyon analizi gerçekleştirilmiştir. Öğrencilerin empati düzeyleri cinsiyet değişkenine göre anlamlı farklılık göstermiştir. Kadın öğrencilerin empati düzeylerinin erkek öğrencilere göre daha yüksek olduğu bulunmuştur.

Öğrencilerin yakın arkadaşlarından aldığı desteğin sıklığı ve önemi ve öğretmenlerinden aldıkları desteğin önemi cinsiyete göre anlamlı farklılık göstermiştir. Kadın öğrencilerin yakın arkadaşlarından ve öğretmenlerinden aldıkları desteğin erkek öğrencilere göre daha yüksek olduğu bulunmuştur.

Öğrencilerin algıladıkları sosyal destek kardeş sayısı değişkenine göre anlamlı farklılık göstermiştir. Kardeşi olan öğrencilerin yakın arkadaşlarından aldıkları desteğin sıklığının, kardeşi olmayan öğrencilere göre daha yüksek olduğu bulunmuştur.

Korelasyon analizi sonuçlarına göre, algılanan sosyal destek ile empati kurma becerisi arasında pozitif yönde ilişki tespit edilmiştir.

Anahtar kelimeler: Algılanan sosyal destek, empati, ortaokul öğrencileri.

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1. INTRODUCTION

1.1. Problem

Humans are social beings who interact with each other from birth to death. Individuals, groups or organizations they interact with form their social networks. Social networks generally include individuals like parents, friends and teachers and help people to deal with the developmental and vital difficulties they come up against (Baqtayan, 2011; Cocorada & Mihalaşcu, 2012).

Parental support is in the first circle of the childrens' network. While developing friendship relations during childhood, parental support still remains important. According to Nickerson and Nagle, parent trust and proximity seeking with parent in childhood are higher than adolescence (Nickerson & Nagle, 2005).

In contrast to childhood, peer networks increases and become more important during adolescence (Furman & Buhrmester, 1992 ; Helsen et al., 2000). Adolescents attempt to gain their autonomy from parents and rely on peers instead of their parents to cope with stressful situations (Carlo, Fabes, Laible, & Kupanoff, 1999; Allen, & Land, 1999). Friendship intimacy and emotional well-being strengthens in this period (Buhrmester, 1990). It proves that adolescents need to be accepted and supported by their friends.

In the friendship circle of the adolescents' social networks, school is an important background. School life is hard for adolescents. Adapting to developmental changes, achieving academic goals, peer and parent related issues are both leading to stress (O'Brien et al., 1995, 1997; Wadsworth & Compas, 2000; Compas, Malcarne, & Fondacaro, 1988; Compas et al., 2001). While adolescents are busy exploring themselves, trying to cope with everyday stressors can make the situations even more difficult. Several studies show that parent,

teacher and peer support has positive influence on students' school belonging, well-being and school engagement (Cattley, 2004; Wang & Eccles, 2012; Kiefer & Alley & Ellerbroock, 2015).

One of the changing factors during the passage from childhood to adolescence is empathy skills. According to results of Overgaauw, Rieffe, Broekhof, Crone and Guroglu's study, there were changes in emotional and cognitive empathy skills depending on age and sex (Overgaauw et al, 2017). It has also been shown that the increase in empathy skills affects friendship relations positively (Schonert-Reichl, 1993). Mutually, empathic tendencies of adolescents who were accepted by their peers were found to be high (Dekovic & Gerris, 1994). Another study that relates empathy and peer support reveals that as the quality of friendship increases, the ability to empathize the adolescent also increases (Boele et al., 2017).

Although in literature, there are many studies conducted to relate the concepts of social support and empathy to other concepts in adolescence, there are no studies investigating these two concepts together in early adolescence. Since regarding to transition of social support and empathy levels in adolescence, this study was performed to understand the relationship between these concepts. It is important for further studies to develop programs in schools to make efficient support system and to improve empathy skills. Thus, this study focus on the problem: *“Is there a significant relationship between perceived social support and empathy skills in early adolescence?”*

1.2. Limitations

Considering the threats of internal and external validities, the limitations can be summarized as follows:

All instruments were self-report measures which individuals may choose desirable answers instead of reflecting their own thoughts. Data collection process which occurred in the classrooms may affect internal validity.

The sample of the research is restricted to the students who are in 7th and 8th grades in İzmir Private Turk College İzmir campuses in 2017-2018 academic year. Thus, the results could not be generalized to other middle school students because of the data obtained from İzmir Private Turk College students.

1.3. Definitions

Social Support: Information that allows individuals to think that they are loved, worthy and recognized as a member of a social network (Cobb, 1976).

Social Network: A system consists of individuals, groups or organizations and the relations between them (Wasserman & Faust, 1994).

Empathy: Participation of the psychological processes that are in harmony with the feelings of another person rather than the person's own feelings (Hoffman, 2000).

Adolescence: The period of time which begins with the start of the puberty and ends with achieving individual independence (APA, 2002).

1.4. Abbreviations

CASSS: Child-Adolescent Social Support Scale

IECA: Bryant's Index of Empathy for Children and Adolescents

2. LITERATURE REVIEW

2.1. Social Support

In one of the first definitions related to social support, Barrera et al. (1981) stated that social support involves various types of help and assistance provided by one's family, friends, and social environment. Social support contains multiple social interactions between these individuals and their social environment (Siedlecki et al., 2014: 561). On the other hand, perceived social support can be defined as the effect of social networks on individuals who seek aid. If these social networks can provide support, information, and feedback, the perceived social support refers to the degree of fulfillment of support, information, and feedback which the individuals think that they get these contributions adequately (Prodicano & Heller, 1983: 2).

Social support is the emotional, physical, informative, instrumental and financial assistance provided by people which allows the individual to love, appreciate, care, to reduce the negative consequences of a change or a crisis in his or her life, and facilitate the adaptation to critical life events and the protection of their psychological well-being. Social support refers to the basic needs of the individual, such as belonging, love, appreciation and self-fulfillment in the hierarchy of needs, are satisfied as a result of interaction with other individuals, and that the material and social support provided by the people (spouse, family, friends, experts) includes spiritual support (Meral & Cavkaytar, 2012).

Social support is also described as information that allows individuals to think that they are loved, valued, looked upon, and they are recognized as a member of a social network of mutual obligations, in addition to interpersonal relationships that protect the individual against stressful environments. For

instance, the support of a person against his / her exhaustion by family members is considered as the most fundamental social support. It is stated that psychosocial stress will negatively affect the physical and psychological state if there is no or little social support, and if the social support is provided, the symptoms of depression will be less and the risk of mortality will be lower (Ayrancı, 2015).

Social support can be examined in three groups, namely as material, emotional and mental support. Cohen and Willis (1985) discussed social support in five groups:

- Emotional Support: It is based on conveying the feelings of interest, love and confidence.
- Esteem Support: refers to the fact that the person is treated and treated as if it is due to problems and defects.
- Financial support (Instrumental support): This includes financial assistance, tools, supplies and services.
- Informational Support: It is based on giving information that can help solve the problems or teaching skills.
- Social Companionship Support: It refers to the support provided by the coexistence of leisure time.

According to Cobb (1976), social support has three dimensions such as emotional support, esteem support, and network support. Emotional support is the support by which one feels that he is interested in and that he is being cared for. Esteem support is the support that one feels respected and cared for. Network support is the support in which interpersonal relations are developed.

There is a consensus on at least four functions of social support. These functions are instrumental, emotional, informational, and appraisal functions.

Instrumental support expresses tangible and financial support and includes money, business and environmental assistance. Lending money or belongings/goods can be given as examples. Unlike other types of social support, this function has the benefit of solving the one's problem directly. Emotional support involves listening to the problems of others, sharing their feelings, showing love and respect. It is related to the psychological health of individuals. The efficacy of emotional support provides positive changes among individuals, such as increased self-confidence and motivation to deal with problems. Informational support includes behaviors such as information, advice, personal feedback, suggestions and guidance on personal and environmental issues. The individual can reconsider new ways of solution that have not attracted his/her attention in the past and can solve the problems with this function. Appraisal function consist of behaviors that provide feedback about the individual's own feelings, thoughts and behaviors. Individuals make an assessment by comparing themselves with people who they find similar with their own feelings, thoughts and behaviors (Demirdüzen, 2013).

2.1.1. Social Support Models

It is stated that there are two basic models explaining the effect of the individual on the mental health and well-being of the individual regarding social support. The main effect model suggests that social support has a direct effect on physical well-being. According to this model, social support has an important influence on physical health and self-esteem. The buffering effect model involves individual's ability to cope with stressful events with the social support he/she receives (Cohen & Wills, 1985: 311). Coping can be defined as the adaptation of

cognitive and behavioral exertion by changing them to overcome psychological distress. Coping determines how an individual overcome negative events and manage distress. Coping with troubles can be linked with solutions of one's life stress and efforts to overcome problematic deals as well as mastering these negative situations. Coping strategies also focus on one's problems, emotions, and social support seeking behavior (Lian & Geok, 2009).

According to the direct (main)-effect model, individuals can maintain positive relationships due to social support against stressful events in daily life (Yıldırım, 2004: 19). In this model, it is argued that social support is directly related to human health. In addition to this, the approach that the individuals who lack social support will be affected negatively by the struggle is preliminary. Therefore, the lack of social support causes an adverse effect on the individual (Dilek, 2010: 30).

Buffering model suggests that social support has a buffer against the stratum, in other words, a protective effect for individuals to cope with stress (Yıldırım, 2004: 19). In this model, it is stated that the most important function of social support is to protect the mental health by decreasing the harmful consequences of stressful events. As long as there are no stressful events, the lack of social support does not have an unfavorable effect on the health and well-being of the individual. However, at high levels of stressful events, social support is a buffer that reduces the harmful effects of stress by making it easier for the individual to adapt and cope with the circumstances (Dilek, 2010: 30).

Cohen and Mckay (1984) categorized appropriate type of supports to elicit coping strategies for stressful events and stressors as “tangible support, appraisal support, self-esteem support, and belonging support” and suggested that this

forms of supports or their combination will act like effective buffers. These buffers can reduce or prevent a stress response. In addition, these supports can mediate the relationship between stressful events and pathological outcomes by reducing the stress. The mechanism of buffering effect should provide an effective buffer where an individual's support system match the requirements of coping with stress (Table 1).

Table 2.1.

Mechanisms of buffering effect in terms of supports and stressors (Cohen & Mckay, 1984: 262).

Support Mechanism	Stressors	Sources of Support
Tangible	This mechanism is effective for helping someone in coping process such as illnesses which is accompanied by aging or income loss.	Any appropriate sources chosen by recipient
Appraisal	This mechanism is primarily effective for psychological stressors, and social stressors in which guilt or shame is not included.	People who have/had similar problems around the supported person
Emotional		
<i>Self-esteem</i>	Stressors that lead consequences as if the binding of failures or deficiencies are on supported person himself/herself.	People who provide positive comparison around the supported person
<i>Belonging</i>	End of a close relationship with someone such as wife/husband/children or any partner.	People who have intimate relationships that provide opportunity for close.

Every individual needs the support of others from his/her birth. In the first years of life, the ability of the baby to maintain his or her life and functioning can

be achieved through supporting relationships. According to Bowlby's attachment theory, safe attachment relationships developed during the early stages of life enable the individual to establish supportive social relationships in later life. In the first years of the life, the social environment which is based on the relationship with the mother becomes a social network in the following years, becoming more complicated with the participation of family members to peer relations, friendships and other people entering various lives with various roles (Kurt, 2017).

The individuals' family and environment, intimate relationship partners, friends, neighbors, colleagues, teachers, religious, ethnic or ideological groups; psychologists, therapists, psychological counselors who are sources of professional help, various institutions and organizations in the society where the individual lives are the determinants of that individuals' social support resources.

Social support mechanisms can help individuals in three ways:

- By removing some of the factors that negatively affect individual living conditions, or by reducing their effect,
- By contributing to increasing the endurance of the individual in the face of unfavorable living situations and thus improving the health condition,
- Helps individuals by acting partially or completely as an obstacle to the effects of environmental stress sources (Dengiz, 2014).

2.1.2. Perceived Social Support

Two fundamental kinds of social support have been addressed in the literature such as received and perceived social support. While received social support is defined as the actual frequency and amount of social support, perceived

social support is defined as individual perspectives on social support obtained from the social environment (Mackinnon, 2012: 474). Perceived social support is one's beliefs related to being supported by his/her friends, family, and other (Pamukçu & Meydan, 2010: 906). It is stated that researchers more focused on perceived social support as a topic due to the importance of perceived support level which should be higher than the received support in terms of estimating life stress balance (Ayrancı, 2015).

Many researchers examining perceived social support indicated that increased amount of perceived and total social support have been related with less distress and psychopathology (Matud et al., 2003: 1919).

Coventry et al. (2004) examined a perceived social support measure among oth younger and older adult cohorts consisting 11,389 participants who aged between 18–95. Seven social support dimensions were consiredered as parent support, relative support, children support, spouse support, friend support, twin support, and helping support. In conclusion, the perceived support of females was higher than males. According to age variable, a decline has been found in the perceived support related with parent support, friend support, and spouse support. Also, the perceived support related with relative support and helping support was found to be higher for males. Other findings suggested that perceived support related with children is increased substantially for both genders as well as tota support was slightly decreased for females while it was increased for males.

Wu and Mok (2007) investigated the effects of several types of social support on the mental health of physically disabled people in China. In the study which consists of randomly sampled 204 physically impaired individuals, perceived social support was found to be much more effective than social support

in terms of the protection of mental health among individuals with physical disabilities. According to social support, supporters' attitudes, satisfaction with support, reciprocity in support relationships, and individual support control predicted the mental health.

Öztürk et al. (2014) determined that there was a statistically significant relationship between burnout syndrome and multidimensional perceived social support systems. Support from friends was determined as the most important type of social support affecting burnout. As a result of the research, authors suggested that family structure and social support systems reduce burnout significantly, to have a satisfying family life, to communicate with colleagues and friends by solving problems by sharing problems.

Costa-Requena et al. (2015) aimed to show the effects of socio-demographics on social support in patients with cancer. In conclusion, they found that women perceived less instrumental support than men and significant differences were found between married and single patients. Patients with personal psychiatric antecedents showed significantly less perceived emotional, informational, and affective support.

2.1.3. Perceived Social Support and Adolescence

Children and adolescence have been faced with many psychological and behavioral difficulties in a diversity of environments such as school, family etc. Most common difficulties faced by adolescence involved domains such as social support (Canty-Mitchell & Zimet, 2000; Piko, 2000; Malecki & Demaray, 2002; Holt & Espelage, 2007; Rueger et al., 2010; Camara et al., 2017; Liu et al., 2017), depression (Frison & Eggermont, 2016; McKauley et al., 2016), academic

achievement (Arday et al., 2014; Chase et al., 2014; Song et al., 2015), and violence/victimization/bullying (Rigby, 2000; Bradshaw et al., 2015; Pauwels et al., 2016).

It is important to support individuals during adolescence due to physiological social and psychological changes as well as the difficulties in communicating with adults. Young adolescents who are developing and beginning to move outside the boundaries of their family are vulnerable and are affected quicker than others. Health outcomes acquired during the adolescence period affect the health not only during this period but throughout life. Social support considerations help emotions and behaviors shape the health-promoting patterns and make sense of the adolescents' health (Semerci, 2016).

The most fundamental sources of support during adolescence are parents, friends and teachers. However, it is noteworthy that the same social support may not be equally perceived by different persons or groups. The decrease in traditional core families, the increase of single parent families, the decrease in relations with relatives, and the number of siblings, and the fact that both parents work or are unemployed have different effects on daily social relations. In order to cope adequately with all these factors simultaneously, it is expected that besides individual skills, social immune systems will also support the adolescents. The support for adolescent when needed, the presence of someone who is worthy for adolescent, the appreciation of love and understanding would effect the well-being of the adolescent. These gains will enhance self-esteem and make the adolescent keep going well by supporting the sense of trust and control (Turgut, 2015).

In the circle of social support, parents are placed on the first circle due to the children support needs in their life. In the second circle, the teacher constitutes a very important source of social support for the orientation of the child to the school environment, the liking of the school and the increase in academic achievement. The older brother, sister, grandfather, grandmother, uncle, uncle, still, aunt is once again in the circle as a source of social support. When the adolescence period begins, his/her friends from the opposite gender, as a friend or boyfriend/girlfriend, can be included in his/her life. Other people who are in the last place in the social support system of a person include a neighborhood friend, a classmate, a psychological consultant etc. (Kurt, 2017).

During adolescence, the network of “significant others” has been restructured. According to the studies, during the adolescence period, the perceived support from the parents is constant or decrease, while the support from the peers increases. In childhood and adolescence, trust is emphasized as a source of support for friends. Younger individuals spend most of their time in school with their peers shaping their cognitive, social, and emotional developments (Espinoza et al., 2014).

Teachers are another important source of support for adolescence. Teacher perceived support reliably predicts both self-esteem and depression. Students who perceived an increase in teacher support felt a decline for their symptoms of depression and an increase in self-esteem in connection with this change. Accordingly, depression can be prevented by having strong relationships with schools and teachers. Similarly, a systematic surveillance study shows that school loyalty and teacher support predicts the future emotional well-being of adolescents (Joyce & Early, 2014).

Through these explanations related with perceived social support and its sources in adolescents, many literature studies were addressed below.

Tucker et al. (1999) explored the relation between siblings' empathy levels and their personal qualities, and experiences. 199 sibling peers aged between 8-11 were interviewed. According to the findings of the study, empathy levels of younger sisters had a relationship with both personal qualities of their older siblings and the nature of relationship between them. The results also showed that empathy levels of younger siblings can be increased by older siblings.

French et al. (2001) evaluated the perceived social support of adolescents provided by parents, siblings, and friends in a sample involving 240 Indonesian and 203 U.S. elementary and junior high school students. Findings of the study showed significant cultural differences between social support providers such as parents and friends. Indonesian adolescents reported that they had higher social support from their parents while they had lower support from friends in terms of companionship and satisfaction compared to U.S. adolescents. Friends were considered as the most important sources of intimacy for both Indonesian and U.S. adolescents.

Malecki and Demaray (2002) developed an instrument for social support in adolescence, namely as Child and Adolescent Social Support Scale (CASSS). These analyses provide reliability for a four-factor structure such as Parent, Teacher, Classmate, and Close Friend subscales and construct validity. Findings showed significant covariances linked with self-concept, social skills, and behavioral indicators.

A similar study was performed to develop an instrument for measurement of perceived support by Canty-Mitchell and Zimet (2000). Authors investigated psychometric properties of Perceived Support Scale in 222 adolescence, mostly consist of African-American adolescences living in urban area. Internal consistency was found high and three subscales were accepted as family, friends, and significant others. Family care was confirmed by its discriminant validity. Finally, these findings supported with the reliability, validity, and utility of the scale for African-American adolescents living in an urban area.

Helsen, Vollebergh, and Meeus (2000) examined the social support perceived by family and friends and emotional problems during adolescence. As a result of the study, which performed with 1928 adolescents aged 12-24 years, it was determined that family and friends support systems were independent of each other. Although the level of social support perceived by friends at the beginning of adolescence is higher than the perceived level of social support from the family, during the adolescence period the perceived social support from the family is the best determinant of emotional problems. Also, the social support that girls perceive from their friends is font to be more than boys.

Rigby (2000) hypotesized that adolescents' mental health is negatively affected bu bullying at school and this effect is irritated by inadequate social support. After administration of General Health Questionnaire on 845 adolescence in secondary schools in Australia, findings showed that, in both females and males, weaker mental health was significantly affected by lower levels of social support and frequent peer victimization.

Piko (2000) searched the effects of sociodemographics, psychosocial health, and perceived support on substance use in adolescence. Among 1039

middle school students in Hungary, finding indicated that substance use of adolescents were predicted by age, type of school, and gender. However, friend or mother support wasn't found as a strong predictor while low perceived father support increased all types of substance use.

Cheng and Chan (2004) indicated that perceived friend support of female students were higher than male students and older adolescents perceived less family support than younger ones. The highest perceived friend support belongs to older adolescent girls, while the youngest male adolescents has highest perceived family support levels.

Holt and Espelage (2007) investigated the relationship between social support, bullying, and psychological distress. The sample involved 784 youths who had different ethnical structure. Authors suggested that perceived social support was different between bullies and victims. The also found that victimization can be overcome by social support from peers and mothers. The participants who were not bullied displayed higher social support and less depression/anxiety. In addition, peer support was shown as the significant factor on bully/victim groups. In conclusion, authors suggested that bullying invervention programs should involve efficient peer support to encourage adolescence/youth.

Bokhorst, Sumter and Westenberg (2010) investigated the differences between perceived social support of adolescents in terms of gender and age. They concluded that no significant difference were found in perceived social support levels of adolescence from their friends and parents for age groups. Apart from the age group of 16-18 years in which perceived social support from friends were higher, other age groups perceived similar social support from their friends and

parents. According to the gender, females show higher perceived social support from their friends, teachers, and classmates compared to the males.

Ikiz and Cakar (2010) examined the relationship between perceived social support and self-esteem among a total of 257 adolescents from different high schools. The study has shown that gender is a significant factor on the relationship between perceived peer and teacher support. Perceived social support levels of adolescents were also positively significant with self-esteem levels of adolescents.

Rueger et al. (2010) examined the gender differences between perceived support in terms of parent, teacher, classmate, friend, school and psychological and academic adjustment in 636 middle school students in a longitudinal study. They found gender differences in perceived social support in early adolescence by using Child and Adolescent Social Support Scale. According to the findings, they found significant relationships between all types of social supports. Perceived support from parents were considered as the most important predictor of adjustment for both gender, while perceived support from classmates was considered as the most important predictor for males.

Rinn, Reynolds and McQueen (2011) examined the relationship between social support and self-concept perceived by gifted adolescents. The research was conducted on 217 highly talented students. In conclusion, they found a significant relationship between the self concept and the social support perceived by the classmates and friends. However, they found no significant relationship between self-concept and perceived social support from teachers.

Turan, Çelik and Turan (2014) investigated the prediction level of perceived social support on 718 adolescents' career exploration. According to the

findings of the study, career exploration was positively affected by perceived social support. Authors also stated that perceived social support from family, friends, and significant others had significant correlation with adolescents' career exploration as they were good predictors of it at the same time.

Bradshaw et al. (2015) investigated the effects of various forms of bullying on adolescence. Bullying forms such as verbal, relational, physical, electronic were expected to correlate the social-emotional factors such as supervision, physical disorder in school environment, and behavioral expectations. The findings of the study, which was performed with 24,620 adolescence in 52 high school, showed that social and emotional problems were appeared to be the most important risk for adolescence who experienced multiple forms of bullying. In addition, increase in bullying risk was found to be related with physical disorder in school and deficient positive behavioral expectations. Authors also observed gender and age differences for patterns of bullying.

Frison and Eggermont (2016) investigated the relationship between various types of Facebook usage, perceived online social support, and depression in terms of gender difference. Findings of the study indicated that negative effects of Facebook usage were observed mostly in females who had a passive use of their Facebook and mostly in males who had an active use of their Facebook. In addition, for active female users of Facebook, their perceived online social support was decreased depression significantly.

Liu et al. (2017) examined the mediating and moderating effects of perceived social support for victimisation and suicidal intention in 946 Chinese adolescence aged between 11-16 years. Findings of the study showed that victimization and suicidal thoughts of adolescences were buffered and mediated

by perceived social support. According to this finding, parent and peer support would be an effective intervention for help seeking adolescence.

2.2. Empathy

In 1970's, Carl Rogers described the term "empathy" as the process by which one can put self into individual's perspective, understanding other's feelings and thoughts, and delivering them correctly. Empathy is the cognitive perception of this flow of emotions rather than the feeling of experiencing one's feelings. Cognitive empathy, according to Staub (1990), is the intuition, intention, state, and thought of another individual as cognitively aware of it. Cognitive empathy requires thinking and observation. It is defined as the ability to perceive the thoughts and feelings of the individual, verbally and non-verbally (Gemci, 2012).

Empathy is considered the tendency to vicariously experience other individuals' emotional states and an emotional response that is focused more on another person's situation or emotion than on one's one (Albiero et al., 2009). However, empathy is a multidimensional concept and has a variety of definitions. There is a comparative consensus for two main dimensions as cognitive empathy and affective empathy. Cognitive empathy is defined as "the intellectual apprehension of another's mental state, currently associated with the theory of mind". On the other hand, affective empathy is referred as possession of an appropriate emotional response when confronted with the mental state attributed to another person (D'Ambrosio et al., 2009).

Dökmen (1999) states that empathy is a very effective tool in ensuring a healthy communication, emphasizing that the empathic tendency is very

important in preventing and resolving conflicts that have taken place in communication. An empathically developed individual seen as successful at interpersonal communication, while empathically weak individuals are likely to fail in interpersonal communication. Interpersonal communication among the individuals in communication is one of the facilitating factors (Alpay, 2009).

Empathy has been also considered to be important to develop prosocial behavior and appropriate moral development. Empathy is a research area most commonly for psychotherapists, parents, and anyone working with young people like adolescents. The deficiency has been also found in people who have autism and Asperger's syndrome, in adults with multiple sclerosis, and psychopaths (Rueckert & Naybar, 2008).

Empathic differences are appeared to be salient between genders. While females tend to feel more affective states of other people and show these affective states due to socialization, males are not allowed socially to show emotions such as fear, sadness etc. Unlike females, males are encouraged to show more competitiveness, domination, and control. Early childhood identification is also effective to shape the empathic differences between genders. For example, mothers show similar physical and cultural norms with their daughters and the tend to be tuned empathically similar. On the other hand, boys and mothers have certain differences which leads less sense of modelling in affective and direct manners by recognition of these differences (Jones, 1989).

Similar to the early childhood differences, empathy can be affected other factors such as attachment theory, altruistic and egoistic empathy hypothesis, and Hoffman's empathy and moral development.

2.2.1. Empathy Theories

The theories related to the empathy development generally emphasized the process of socialization and substantially highlighted parenting styles. Empirical studies related to empathy development has fundamentally focused on children in preschool and middle school so that the relationship between empathy and parenting styles, which is expected to have importance to develop empathy, had limited focus. Due to higher cognitive abilities, peer relationships, and moral reasoning emerge in adolescence period, behaviors of altruism and concern for the needs of other individuals develop (Soenens et al., 2007). When someone show higher affective empathic behaviors such as sharing an emotional state, it constructs conflict resolution against problems with friends. Similarly, cognitive empathy such as figuring out someone's emotional status provide higher quality friendships like mutuality and stability (Overgaauw et al., 2017).

The roots of empathy have been dated back to Bowlby's attachment theory. Attachment theory has emerged as a result of observing the emotional reactions that babies and children have shown to their primary nutritional and health needs when they are separated from their primary caregivers for a certain period of time. The main factors that lead to the connection between child and caregiver are the tendency to prefer people and moving objects, to distinguish what they see more often from others they see, to approach their acquaintances and to stay away from the things they do not know (Alpay, 2009).

This theory suggests that all infants had a tendency to establish a strong bond with his/her caregiver (often mothers) which is an adaptive and biological foundation. After following years, the infants use this primary relation to display his/her own social behaviors. Infants show personal differences according to the

kind of care they have received. If an infant experience inconsistent availability from his/her caregivers, infant perceives it as a signal of lacking security and this “insecure-resistant attachment” can be characterized by reduced exploration, higher expression of requirements and annoyance, and continuous anger and distress. On the other hand, if an infant experience unresponsiveness or rejection from his/her caregivers, infant perceives it as a signal of lacking security again and this “insecure-avoidant attachment” can be characterized by restriction of expression for needs and distress. Finally, if the infants experience frightening situations from their caregivers, they display disorganized attachment which involves unusual behaviors such as freezing or disorientation to respond their caregiver (Stern and Cassidy, 2018). Once a child is helped to find out that he or she is aware of the feelings he/she is experiencing and is acknowledged to be remembered, tolerant, and understanding, a mother will increasingly be empathic and pleased against the same things with her child (Demirdağ, 2017).

Empathy in adolescents has been shown at different levels in terms of emotion awareness and tendency for social roles. First, emotion awareness, refers “the willingness to face one’s emotions and the emotions of others”. Some adolescents can ignore the emotions of others while some of them appreciate and give valuable information related to someone’s emotions regarding the concerns. The stronger positive appreciation for one’s emotions, the more attention to give valuable information and empathic approach about others’ negative emotions. In terms of social roles, sense of social justice has an important role for empathy development. For example, when an adolescent has been adapting a school environment involving peer groups, he/she can bully a victim or defend the victim against bullying. The tendency in bullying is harrasing someone while defending

someone from bullying is intervening the bully and supporting the victim (Rieffe & Camodeca, 2016).

Another suggestion about empathy related theories is that feeling empathy for someone in need is considered as an important motivator for helping people. This motivation may be either altruistic or egoistic. Altruistic approach focuses the goal of reducing one's distress (Batson et al., 1981). Altruistic behavior refers helping other people at a cost to self and this behavior involves reducing other people's pain in exchange of his/her own comfort. The empathy-altruism hypothesis suggests that "other-oriented empathic emotions, such as sympathy, are better predictors of altruistic behavior" (Hall et al., 2015). In altruistic approach, a behavior can be considered as altruistic when one helps with desire to reduce another's distress and ultimately aims to enhance another's benefit. Altruism motivated help is focused on the "end-state goal of increasing the other's welfare" (Batson et al., 1981).

Other empathy theories are developed to understand the mechanism of empathy such as Hoffman's theory, transactional theory, and progressive empathy sequencing model.

Hoffman's theory addresses the human action within five moral encounters in a prosocial domain. In the first encounter, an "innocent bystander" who saw someone in pain or distress either physically or emotionally exists and the moral dilemma is whether this person help other one or how does this person feel if he/she helps the other one. In the second encounter, a "transgressor" who harms someone accidentally or directly exists and the moral dilemma is whether this transgressor feel guilty after harming other one. In the third encounter, a "virtual transgressor", who feels guilt for harming someone even if he/she did not,

exists. In fourth encounter, “multiple moral claimants” who is compelled to make a choice exists and the moral dilemma is whether one feels guilty for not helping others except from the one he/she helps. In fifth encounter, “caring versus justice” includes moral claimants, a conflict, and abstract issues. The dilemma for fifth encounter reflects today’s multicultural societies and this dilemma is about choosing the “care” or “justice” values to help someone and whether one feels guilty about neglecting others (Hoffman, 2000). The common ground of these five types of encounter is the empathic motive which is defined as “an affective response more appropriate to other’s situation than one’s own”.

Dökmen (1988) was developed the Empathic Tendency Scale from his own theory “Progressive Empathy Sequencing Model”. According to the model, three sequence namely as “I, You and They” exists and they all involve sub-steps as “thought” and “emotion” (Dökmen, 2006):

In “step They”, A person reacting at this step does not think about the problem that the other person has told him; he does not pay attention to his feelings and thoughts; he does not talk about his own thoughts and feelings about this problem. The person who listens to the question gives such feedback to the questioner, which expresses the views of the third persons (community) who are not in that environment.

In “step I”, the person who is empathic in this step is egocentric rather than leaning on the feelings and thoughts of the person who is telling the problem to him/her, one criticizes the problem owner and gives others reason; sometimes they leave the person alone with their own problems and start talking about themselves. For example, a person who responds to “step I” with an appropriate empathic response and will say “I feel sad and I have the same problem too”

against others, so he starts to tell his/her own problem. The person who responds empathically to “step I” can comfort the other person to some extent. That is why the reactions in “step I” can be regarded as better responses than the ones in “step they”. However, empathic responders in this step are not considered to be sufficiently empathic because they do not take on the role of other people cognitively and emotionally.

In “step You, a person who responds empathically takes the role of the person who communicates the problem to him and looks at the situations from that person's point of view. That is, against the problem communicated to him, he tries to understand what he thinks and feels, focusing on the feelings and thoughts of the person directly facing the community, or his own thoughts.

2.2.2. Empathy and Adolescence

Adolescence is the most important developmental process and it is considered to be essential for empathy development. Due to adolescence is a transition period, many physical and physiological changes such height, weight, body proportions, and hormones, combined with individual, social, and contextual differences. Changes in moral reasoning has been also important with respect to empathy development. In adolescence, internalized social norms and moral codes which promote prosocial and responsible attitudes start to develop. This development leads adolescents to have opportunities to help other people in terms of volunteering activities. Furthermore, normative changes in social relationships with peers and other people occurs with increased autonomy. Changing values of adolescents contribute displaying prosocial behaviors like empathic response (Allemand, Steiger & Fend, 2015).

Literature studies reported that warm and supportive relationships with parents are positively correlated with social behaviors and negative with aggressive behaviors in the adolescence (Markiewicz, Doyle & Brendgen, 2001). It has also been found that the relationship between positive and negative social behaviors mediated by empathine is mediated by parents and peers. Empathy contributes to the development of positive social behaviors as the other positive emotions and reduces aggressive behaviors. For this reason, people who are empathic are thought to have a motive to overcome other people's concerns (Bayraktar, Sayıl & Kumru, 2009).

Researchers also found that warm and supportive parenting helped to create a positive emotional environment at home, which also contributed to the development of empathy. Eisenberg and Fabes (1998) state that peer relationships, like in parental relations, can also create opportunities for empathine development, which in turn feeds positive social behaviors and limits aggressive behavior (Bayraktar, Sayıl & Kumru, 2009).

Chen et al. (2014) linked gender differences of empathy to two main factors: The degree of physiological maturity and gender role. In the context of maturity, as adolescents grow older, hormone are different between female and male. Female have more oxytocin levels which is positively related to emotional empathy. On the other hand, male have more testosterone levels which is negatively related to cognitive empathy. In conclusion, gender differences of empathy begin to appear as adolescence begin. In the context of gender roles, the orientation of woman's gender role is focusing on others, which is directly related to empathy. However, the orientation of male's gender role is focusing on justice and equity, which has no relation to empathy. After acquiring the gender role,

man and woman have differences in empathy and especially in emotional empathy.

Broidy et al. (2003) examined the relationship between empathy and serious offending among 657 adolescents from public high schools in USA. They concluded that empathy acts as a protective factor for both males and females. However, they found subtle differences among males and females in the relation between empathy and offending. Females were significantly more likely to engage in behaviors that concerning other people than males.

Stuijzand et al. (2016) investigated the gender differences among empathic sadness of adolescents. In their cross-sectional study with 730 adolescence and longitudinal study with 318 adolescence, female adolescents reported more empathic sadness and received more affective empathy than male adolescents. Gender differences for affective empathy showed that female adolescents' empathic sadness levels towards same-sex than other-sex were higher than male adolescents.

Michalska, Kinzler and Decety (2013) examined the age related gender differences in empathy among childhood and adolescence. Across a sample of 65 individual who aged between 4-17, participants were shown videos displaying people being harmed. Findings of the study indicated older female adolescents had higher dispositional empathy than males.

Lam, Solmeyer and McHale (2012) investigated the developmental course of empathy between the ages of 7 to 14 and as well as within-person relations between sibling warmth and conflict and empathy of adolescents. According to the findings of the study, puberty control and parental education lead to an increase in female empathy levels in adolescence transition period while a

stability in males empathy levels were observed. When responsiveness of parents and marital love were controlled, higher levels of empathy were shown by adolescents. In addition, the relationship between sibling warmth and empathy were become stronger over time. Findings finally suggested that there are significant differences formed by gender differences in terms of empathy development and the uniqueness of siblings to create mutual effects on their socioemotional characteristics.

2.2.3. Empathy and Perceived Social Support

Studies has shown that there is a connection between empathy and social support. In the latter section, it is emphasized that empathy is mostly affected from early childhood and attachment. Beyond this factors, environmental influences and characteristics of adolescences can be also important factors for empathy development. Especially parental support is considered as an inhibitor for aggression and delinquent behaviors of adolescents with the moderating effect of empathy (Van der Graaf, 2012).

Van der Zwaan (2014) focused on expression of emotions and empathy by supportive individuals and highlighted reducing the support seekers' negative emotions or inducing positive emotions. Due to involvement of emotion sharing in empathy process, empathic sharing is supposed to trigger supportive behaviors through the one in need.

Empathic concern seemed to be different for various adolescent characteristics, showing different levels of responsiveness or sensitiveness to parent support. Adolescents who have lower empathic concern for other individuals shows less care about warm and affective relationships and

socialization efforts may be less affective for them than for those who display more empathic concern. Furthermore, adolescents low in empathy are less sensitive to the communicatory signals that are given by emotional expressions of their parents and may have difficulties in interpreting these signals. This may result in a lower susceptibility to the effects of parental support and approval (Van der Graaf, 2012). Other studies have also indicated that not only the perceived social support levels of adolescents but also couples' and students' were related with empathic behaviors.

Devoldre et al. (2010) investigated the comparison of prediction of cognitive and affective empathy on social support between couples. The studies were performed in which one group involved 83 female and younger sample while other group involved 128 married couples. Study results indicated a significant contribution of the both cognitive and affective components of empathy. All types of support had a significant effect on dispositional empathy while perspective taking did not show a significant effect on instrumental support but it was significantly and positively related to affective support, and negatively related to negative support. Among married couples, dispositional empathy was found to be a good predictor of social support for wives, probably due to the longer relationship. In general, three types of support were related with at least one kind of empathy, and all three types of empathy were related with at least one support type.

MacRitchie and Liebowitz (2010) examined the effects of empathy and perceived social support on the secondary traumatic stress in trauma workers. They found that level of perceived social support and empathy have a significant effect on secondary traumatic stress. However, social support was not found to

have a moderating effect, but empathy was found as a consistent moderator between the trauma workers' previous exposure to traumatic material and secondary traumatic stress.

Pamukçu and Meydan (2010) investigated the role of empathic tendency and perceived social support to predict the loneliness levels of a total of 278 college students from different grades. In conclusion, both empathic tendency and perceived social support found as significant predictors for loneliness of students.

Barry et al. (2014) examined the social support and empathy as predictors of adolescent narcissism among a sample of 185 adolescents who aged 16 to 18. Findings of the study shows that grandiose narcissism was positively associated with social support and empathy. The relationship between narcissism and aggression was also found to be exacerbated by low levels of empathy.

Park et al. (2015) examined the relationship between stress, social support, and empathy among 2692 medical students. According to the findings of the study, empathy and social support were found to be positively correlated, while empathy and stress were negatively correlated. They also determined significant predictions of stress and social support on empathy among all the students.

Manalo et al. (2017) examined the link between self compassion, empathy and social support. They found that the relationship between emotional empathy and social support was strong, but the relationship between emotional empathy and self-compassion was found to be weak and not significant. In addition, the differences of self-compassion among the friends, significant other, or family social support groups were not significant.

2.3. Purpose of the Study

In this study, prior to main analyses, students' perceived social support and empathy levels in terms of different variables were explored.

The aim of the study was to assess the relationship between perceived social support and empathy skills of 7th and 8th grade students. The sub questions of the study are as followed:

Q1) What are the students' perceived social support levels?

Q2) Is there a significant difference among students' perceived social support levels with regard to gender?

Q3) Is there a significant difference among students' perceived social support levels with regard to number of siblings?

Q4) What are the students' empathy levels?

Q5) Is there a significant difference among students' empathy levels with regard to gender?

Q6) Is there a significant difference among students' empathy levels with regard to number of siblings?

Q7) What is the relationship between perceived social support and empathy skills of 7th and 8th grade students?

3. RESEARCH METHOD

This section contains the research pattern, the universe, the sampling, instruments, data gathering process and the techniques used in the analysis of the collected data.

3.1. Research Design

This study is a correlational study since it is aimed to assess the relationship between perceived social support and empathy levels of 7th and 8th grade students.

Correlational designs have two categories according to their purposes: predictive and explanatory. The explanatory studies' purpose is to explain an important event by revealing the relationship between two or more variables. In this research, it is aimed to assess the relationship between perceived social support and empathy levels of 7th and 8th grade students. Thus, it is defined as an explanatory correlational study.

3.2. Sample

The population of this study was the 7th and 8th grade students of Izmir Private Turk College. Convenience sampling method was used to reach the participants of the study. Convenience sampling method refers to data collection from population members that the researcher can reach conveniently (Büyüköztürk, Kılıç-Çakmak, Akgün, Karadeniz & Demirel, 2015). To prevent inefficient use of time and funds, research sample included Izmir Private Turk College middle school students in the Izmir campuses.

The sample of this research included 323 students who make up the entire 7th and 8th grades of Izmir Private Turk College Bahattin Tatış Campus, Büyükçiğli Campus and Bornova Campus in Konak, Bornova and Çiğli districts,

İzmir province at 2017-2018 school year. 158 of students participated in the survey were female and 165 of them were male. The age of students in the sampling group varied between 12 and 14 and the average age of the participants was 13. 146 of students were from Bahattin Tatis Campus Secondary School, 101 from Buyukcigli Campus Secondary School and 76 from Bornova Campus Secondary School. 160 of the students who attended in the survey were in the 7th grade and 163 in the 8th grade. The descriptive characteristics of the students are presented in Table 3.1.

Table 3.1.

Characteristics of the sample

	Groups	Frequency	Percent	Cumulative Percent
Gender	Female	158	48,9	48,9
	Male	165	51,1	100
	Total	323	100	
Age	12	37	11,5	11,5
	13	155	48,0	59,4
	14	131	40,6	100
	Total	323	100	
Number of Siblings	Only Child	125	38,7	38,7
	2 or more	198	61,3	100
	Total	323	100	

The sample of the study included 158 female students (48,9%) and 165 male students (51,1%). 37 participants (11,5%) were 12 years old, 155 participants (48,0%) were 13 years old and 131 participants (40,6%) were 14 years old. 125 students are only children of their families and the rest of the participants have one or more siblings.

3.3. Instruments

As means of data collection in the survey conducted; An Index of Empathy for Children and Adolescents was used to determine empathy levels of the students, Child-Adolescent Support Scale was used to determine the perceived social support levels of students and Demographic Information Form was used to specify the personal characteristics of the students.

3.3.1. Demographic Information Form

Demographic Information Form used in the research was prepared by the researcher to determine the status of the secondary school students participating in the research according to various variables. This form includes questions about gender, age, grade level, number of siblings, educational background of their parents and grade averages.

3.3.2. Bryant's Index of Empathy for Children and Adolescents (IECA)

The empathy scale for children and adolescents was developed by Bryant (1982) to measure the level of empathy in children and adolescents. The test consists of 22 items. Children give answers like yes or no according to their situation. Every "yes" answer is 1 point, and "no" answer is 0 point. The lowest score that can be acquired from the scale is 0, and the highest score is 22. Bryant's scale was applied to groups and individuals, and in all cases, higher scores on the scale reflected greater empathy (Bryant, 1982).

Reliability scores of the scale indicate that the ceiling effect is not present in any age group and that the average of most items is in the middle range. The obtained Cronbach alpha internal consistency coefficients are $r = 0.54$ for the first class, $r = 0.68$ for the fourth class and $r = 0.79$ for the seventh class.

It is used to scale validity in the first grades using Feshbach and Roe's 70 empathy scale. A meaningful correlation was found between the two scales at .05 level. For seventh grades, he used the adult empathy scale of Mehrabian and Epstein (1972) for similar scale validity. He also found a meaningful relationship between these two scales at .001 level.

The translation of this scale to Turkish was carried out by Seda Biryhan Saraç. Aslı Gürtunca conducted the study of validity and reliability. Since the discriminant coefficient of the 2nd item of the test is smaller than 20, the 2nd item is subtracted from the scale, and the scale is reduced to 21 items. The KR-20 value which calculated after the substance was removed was found as 0.70. This value demonstrates that the scale is reliable.

In the test-retest reliability study, the Pearson Moments Multiplication Correlation coefficient was found to be $r = 0.76$.

The correlation value between KA-SI Adolescent Form and An Index of Empathy for Children and Adolescents scale, which was applied to the sixth, seventh and eighth grades, was found to be 0.64, and a meaningful positive correlation was found between two measurement instruments.

3.3.3. Child-Adolescent Social Support Scale (CASSS)

Child and Adolescent Social Support Scale developed to measure perceived social support by Malecki et al. (1999). It is a multidimensional scale consisting of 40 items that measure the social support perceived by the students' family, teachers, classmates and close friends. For each item, both the frequency and the importance column are included. Frequency scores are of the likert type of 6 with 1 (never) and 6 (always). Importance scores are 3 types of likert, 1 (not important) and 3 (very important).

The original version of the scale consists of 2 different versions; level 1, 3rd and 6th grade for elementary school students. Level 2 is suitable for 6th and 12th-grade high school students.

The internal consistency reliability scores of the scale were found to be .94 for the Level 1 version and .95 for the Level 2 version.

The test-retest correlations performed at 8-week intervals were found to be .70 for the scale sum and between .60 and .76 for the subscales.

In a study with primary school students, the correlation coefficient was found to be .70 when compared to SSSC (Harter, 1985), another widely used social support scale.

The scale was renewed in 2000 and converted into a single version that can be used from Class 3 to Class 12 (Yardımcı&Başbakkal,2010).

Yardımcı and Başbakkal (2008) have adapted this scale to Turkish. In the Turkish version of the scale, it was subdivided into 5 sub-dimensions with permission from the author, these dimensions being arranged as my parents, my teachers, my classmates and my close friends. There are 60 questions in Turkish version. The lowest score that can be taken from the frequency section of each subscale is 12, the highest score is 72, the lowest score that can be taken from importance is 12, the highest score is 36.

The internal consistency reliability of the scale was .96 for frequency and .95 for significance. The test-retest correlation coefficients of the scale were 0.80 for the frequency part of the scale and 0.72 for the significance part.

The coefficient of CASSS method was 0.75 in frequency, 0.95 in importance and 0.87 to 0.93 in subscales.

According to the results of the factor analysis, the correlation score between the factors and the total scale was found between .69 and .82. The results show that the scale is valid and reliable.



4.RESULTS

4.1. Descriptive Statistics

Descriptive statistics for study variables (perceived social support and empathy) used in this study are presented in the Table 4.1. and Table 4.2.

Table 4.1.

Descriptive statistics for the perceived social support variable

Variables	N	Mean	SD	Min-Max
Mother Frequency	323	58,55	9,97	23,00-72,00
Father Frequency	323	58,78	10,42	25,00-72,00
Teacher Frequency	323	53,21	12,64	12,00-72,00
Classmate Frequency	323	46,86	13,47	12,00-72,00
Closefriend Frequency	323	61,91	9,57	34,00-72,00
Mother Importance	323	29,27	4,89	12,00-36,00
Father Importance	323	29,40	4,94	12,00-36,00
Teacher Importance	323	29,59	5,63	12,00-36,00
Classmate Importance	323	25,73	6,64	12,00-36,00
Closefriend Importance	323	31,07	5,11	12,00-36,00
Total Frequency	323	279,33	39,83	181,00-360,00
Total Importance	323	145,09	22,49	82,00-180,00

For mother frequency, mean score was 58,55, standard deviation 9,97 and minimum maximum scores ranged between 23 and 72. For father frequency, mean score was 58,78, standard deviation was 10,42 and minimum scores ranged between 25 and 72. For teacher frequency, mean score was 53,21, standard deviation was 12,46 and minimum maximum scores ranged between 12 and 72. For classmates frequency, mean score was 46,86, standard deviation was 13,47 and minimum maximum scores ranged between 12 and 72. For mother importance, mean score was 29,27, standard deviation was 4,89 and minimum maximum scores ranged between 12 and 36. For father importance, mean score was 29,40, standard deviation was 4,94 and minimum maximum scores ranged between 12 and 36. For teacher importance mean score was 29,59, standard deviation was 5,63 and minimum maximum scores ranged between 12 and 36. For classmates importance, mean score was 25,73, standard deviation was 6,64 and minimum maximum scores ranged between 12 and 36. For close friend importance, mean score was 31,07, standard deviation was 5,11 and minimum maximum scores ranged between 12 and 36. For total frequency, mean score was 279,33, standart deviation was 39,83 and minimum maximum scores ranged between 181 and 360. For total importance, mean score was 145,09, standart deviation was 22,49 and minimum maximum scores ranged between 82 and 180.

Table 4.2.

Descriptive statistics for the empathy variable

Variables	N	Mean	SD	Min-Max
Empathy	323	15,83	3,28	5,00 - 21,00

For empathy, mean score was 15,83, standard deviation was 3,28 and minimum maximum scores ranged between 5 and 21.

As a second step in descriptive analyses, to decide either parametric tests or non-parametric tests are used, normality of variables was assessed by skewness and kurtosis values. According to Büyüköztürk (2015), the values of skewness and kurtosis between -1 and +1 are regarded acceptable in order to prove normal univariate distribution.

Table 4.3.

Skewness and Kurtosis values of study variables

Variables	N	Mean	Skewness	Kurtosis
Empathy	323	15,83	-,757	,170
Mother Frequency	323	58,55	-,672	,028
Father Frequency	323	58,78	-,738	-,045
Teacher Frequency	323	53,21	-,706	,053
Classmate Frequency	323	46,86	-,232	-,618
Closefriend Frequency	323	61,91	-,986	,168
Mother Importance	323	29,27	-,618	-,038
Father Importance	323	29,40	-,429	-,396
Teacher Importance	323	29,59	-,879	,510
Classmate Importance	323	25,73	-,040	-,819
Close Friend Importance	323	31,07	-,963	,409

As it is presented in Table 4.3., skewness and kurtosis values were -0,757 and 0,170 for empathy scale, -0,672 and 0,028 for mother frequency, -0,738 and -0,045 for father frequency, -0,706 and 0,053 for teacher frequency, -0,232 and -0,618 for classmate frequency, -0,986 and 0,168 for close friend frequency, -0,618 and -0,038 for mother importance, -0,429 and -0,396 for father importance, -0,879 and 0,510 for teacher importance, -0,040 and -0,819 for classmate importance and -0,963 and 0,409 for close friend importance. All skewness and kurtosis values of study variables are in acceptable range. In the light of such information, parametric tests were used in the present study.

4.2. Correlations among the study variables

In order to specify the correlations among students' perceived social support and empathy scores, Pearson correlation analysis was applied. The results of analysis are presented in Table 4.4.

Table 4.4.

Pearson correlation coefficients among study variables

	Emp.	MF	FF	TF	CF	CFF	MI	FI	TI	CI	CFI
Emp.	1										
MF	,033	1									
FF	,011	,686**	1								
TF	,169**	,352**	,184**	1							
CF	,231**	,385**	,316**	,398**	1						
CFF	,305**	,447**	,375**	,245**	,461**	1					
MI	,068	,545**	,369**	,199**	,311**	,372**	1				
FI	,116*	,478**	,523**	,194**	,281**	,423**	,819**	1			
TI	,230**	,358**	,249**	,444**	,358**	,323**	,585**	,564**	1		
CI	,218**	,331**	,268**	,234**	,541**	,330**	,609**	,584**	,616**	1	
CFI	,281**	,344**	,231**	,210**	,291**	,637**	,592**	,604**	,535**	,545**	1

* $p < 0.05$ ** $p < 0.01$ *****Emp**=Empathy, **MF**=Mother Frequency, **FF**=Father Frequency, **TF**=Teacher Frequency, **CF**= Classmates Frequency, **CFF**= Close Friend Frequency, **MI**= Mother Importance, **FI**=Father Importance, **TI**= Teacher Importance, **CI**= Classmate Importance, **CFI**= Close Friend Importance

The results revealed that correlations among study variables (perceived social support and empathy) ranged from 0,011 to 0,819. As it seen on the table 4.4., empathy was positively correlated with mother support frequency ($r=0,033$, $p < 0.01$), father support frequency ($r=0,011$, $p < 0.01$), teacher support frequency ($r=0,169$, $p < 0.01$), classmate support frequency ($r= 0,231$, $p < 0.01$), close friend support frequency ($r=0,305$, $p < 0.01$), mother support importance ($r=0,068$, $p < 0.01$), father support importance ($r= 0,116$, $p < 0.01$), teacher support importance ($r=0,230$, $p < 0.01$), classmate support importance ($r=0,238$, $p < 0.01$) and close friend support importance ($r=0,281$, $p < 0.01$). But, these correlations

were not statistically significant. Students' frequency scores of perceived support from teacher ($r=0,169$, $p<0.01$), classmates ($r=0,231$, $p<0.01$) and close friends ($r=0,305$, $p<0.01$) are significantly correlated with students' empathy scores. Also importance scores of perceived support from father ($r=0,116$, $p<0.05$), teacher ($r=0,230$, $p<0.01$), classmate ($r=0,218$, $p<0.01$) and close friend ($r=0,281$, $p<0.01$) are significantly correlated with students' empathy scores. In other words, as participants' perceived social support from father, teacher, classmate and close friend increased, their empathy scores increased.

4.3. Demographic variables

Differences among the participants' scores obtained from empathy and social support scales were examined in terms of two demographic variables: gender and number of siblings. Since normal distributions of study variables were ensured, independent samples t-tests for gender and number of siblings were computed.

Perceived Social Support

Perceived Social Support with regard to gender

In order to answer "Is there a significant difference among students' perceived social support levels with regard to gender?" independent sample t-test was conducted. The results of the analyses are presented in Table 4.5.

Table 4.5.

Independent samples t-test results related to perceived social support with regard to gender

Perceived Social					t-test	
Support	Gender	N	Mean	SD	t	p
Mother Frequency	Female	158	58,98	9,72	0,758	0,449
	Male	165	58,14	10,21		
Father Frequency	Female	158	58,22	10,87	-0,942	0,347
	Male	165	59,32	9,98		
Teacher Frequency	Female	158	53,84	11,96	0,878	0,381
	Male	165	52,60	13,26		
Classmate Frequency	Female	158	47,97	13,19	1,449	0,148
	Male	165	45,80	13,68		
CloseFriend Frequency	Female	158	65,25	6,78	6,589	0,00*
	Male	165	58,70	10,71		
Mother Importance	Female	158	29,56	4,42	1,023	0,307
	Male	165	29,00	5,30		
Father Importance	Female	158	29,54	4,49	0,482	0,630
	Male	165	29,27	5,34		
Teacher Importance	Female	158	30,50	4,76	2,864	0,004*
	Male	165	28,73	6,25		
Classmate Importance	Female	158	26,16	6,24	1,125	0,261
	Male	165	25,33	6,99		
CloseFriend Importance	Female	158	32,63	3,69	5,660	0,00*
	Male	165	29,58	5,80		

* $p < 0.05$

As illustrated in Table 4.5., with regard to gender while there was no significant difference among students' perceived social support frequency scores of mother, father, teacher and classmates. Also there was no significant difference among students' perceived social support importance scores of mother, father and classmates [$t(323) = 1,023, p > 0,05$; $t(323) = 0,482, p > 0,05$; $t(323) = 1,125, p > 0,05$]. With regard to gender there was a significant difference for students' perceived

social support importance scores of close friend and teachers' and also frequency score of close friends [$t(323)= 6,589, p<0,05$; $t(323)= 2,864, p<0,05$; $t(323)= 5,560 p<0,05$]. Female students' (M=65,25; SD=6,78) perceived social support frequency score of close friends are higher than male students (M=58,70, SD=10,71). And also female students' perceived social support importance scores of close friend (M=32,63; SD=3,69) and teachers (M=30,50; SD=4,76) are higher than male students (M=29,58; SD=5,80 and M=28,73; SD=6,25).

Perceived Social Support with regard to number of siblings

In order to answer “Is there a significant difference among students’ perceived social support level with regard to number of siblings?” independent sample t-test was applied. The results of the analyses are presented in Table 4.6.

Table 4.6.

Independent samples t-test results related to perceived social support with regard to number of siblings

Perceived Social Support	Number of Siblings	N	Mean	SD	t-test	
					t	p
Mother Frequency	Only child	125	58,96	9,65	0,588	0,557
	2 or more	198	58,29	10,18		
Father Frequency	Only child	125	59,21	9,98	0,588	0,557
	2 or more	198	58,51	10,71		
Teacher Frequency	Only child	125	52,31	13,98	-1,015	0,311
	2 or more	198	53,77	11,72		
Classmate Frequency	Only child	125	46,55	13,23	-0,333	0,739
	2 or more	198	47,06	13,64		
Closefriend Frequency	Only child	125	60,30	10,40	-2,330	0,021*
	2 or more	198	62,92	8,88		
Mother Importance	Only child	125	29,65	4,37	1,101	0,272
	2 or more	198	29,04	5,19		
Father Importance	Only child	125	29,68	4,55	0,783	0,434
	2 or more	198	29,23	5,17		
Teacher Importance	Only child	125	29,24	5,87	-0,885	0,377
	2 or more	198	29,81	5,48		
Classmate Importance	Only child	125	26,15	6,40	0,886	0,376
	2 or more	198	25,47	6,78		
Closefriend Importance	Only child	125	30,60	5,20	-1,304	0,193
	2 or more	198	31,36	5,04		

* $p < 0.05$

As illustrated in Table 4.6., with regard to number of siblings, the only significant difference was found for students' perceived social support frequency score of close friends' [$t(323) = -2,330, p < 0,05$]. Students who have one sibling or more ($M=62,92$; $SD=8,88$) have higher perceived social support frequency scores than students who has no siblings ($M=60,30$; $SD=10,40$).

Empathy

Empathy with regard to gender

In order to answer “Is there a significant difference among students’ empathy levels with regard to gender?” independent sample t-test was applied. The results of the analyses are demonstrated in Table 4.7.

Table 4.7.

Independent samples t-test results related to empathy with regard to gender

	Gender	N	Mean	SD	t- test	
					t	p
Empathy	Female	158	17,31	2,55	8,891	0,00*
	Male	165	14,41	3,28		

* $p < 0.05$

As illustrated in Table 4.7., there was a significant difference between empathy scores of students in terms of gender [$t(323) = 8,891, p < 0,05$]. Empathy score of female students ($M = 17,31; SD = 2,55$) were higher than male students ($M = 14,41; SD = 3,28$).

Empathy with regard to number of siblings

In order to answer “Is there a significant difference among students’ empathy levels with regard to number of siblings?” independent sample t-test was conducted. The results of the analyses are shown in Table 4.8.

Table 4.8.

Independent samples t-test results related to empathy with regard to number of siblings

	Number of Siblings	N	Mean	SD	t-test	
					t	p
Empathy	Only Child	125	15,68	3,37	-0,629	0,530
	2 or more	198	15,92	3,23		

* $p < 0.05$

According to independent samples t-test results, there was no significant difference among students' empathy scores based on their number of siblings [$t(323) = -0,629, p > 0,05$].



5. DISCUSSION

Study results showed that perceived social support and empathy held a positive relationship, consistent with the literature (Devoldre et al., 2010; MacRitchie and Liebowitz, 2010; Van der Graaf, 2012; Park et al., 2015; Manalo et al., 2017).

Empathy levels of adolescents were also positively correlated with mother, father, teacher, classmate, close friend supports. French et al. (2001) found the same findings in terms of family members while close friend support scores were lower. Piko (2000) showed that friend or mother support wasn't found as a strong predictor while low perceived father support had effect on adolescences on drug use. Turan, Çelik and Turan (2014) found higher perceived support from family, friends, and partners in adolescents. Bokhorst, Sumter and Westenberg (2010) found equal social support scores from parents and friends except adolescents aged between 16 and 18. These adolescents perceived higher friend support than family support. Same study indicated lower perceived social support from teachers.

Findings of mother and father support on empathy is consistent with higher parent trust and proximity seeking in adolescence (Nickerson & Nagle, 2005); on the other hand findings of friend support is consistent with the findings of Furman and Buhrmester (1992) and Helsen et al. (2000) who emphasized increased peer networks during adolescence. In addition, Buhrmester (1990) suggested the empowerment of friendship intimacy and emotional well-being in adolescence and consequently friend support become more effective for adolescents. There are other studies suggesting that parent, teacher and peer support has positively correlated with students' empathy, friendship relations and

well being (Schonert-Reichl, 1993; Cattley, 2004; Wang & Eccles, 2012; Joyce & Early, 2014; Kiefer, Alley & Ellerbroock, 2015; Boele et al., 2017). Kurt (2017) found the importance of teacher support for the orientation of the child to the school environment, the liking of the school and the increase in academic achievement while Joyce and Early (2014) indicated that students who perceived higher teacher support showed a decrease in depressive symptoms and an increase in self-esteem.

In this study, the empathy levels of the students were significantly different according to gender. The empathy levels of female students were found to be higher than male students. Similarly, most of the literature findings indicated that gender difference is one of the most important factor in empathic behaviors (Jones, 1989; Broidy et al., 2003; Lam, Solmeyer & McHale, 2012; Michalska, Kinzler & Decety, 2013; Chen et al., 2014; Stuijzand et al., 2016). The same findings for perceived social support in terms of genders had consensus relatively where females perceived equal or higher support than males (Rigby, 2000; Cheng and Chan, 2004; Bokhorst, Sumter and Westenberg, 2010; Ikiz & Cakar, 2010; Rueger et al. 2010).

In this study, the perceived social support levels of the students showed a significant difference according to the number of siblings. It has been found that students with siblings have a higher perceived support frequency from close friends than students who are only children. Tucker et al. (1999) showed that older siblings enhance the empathy of younger siblings. Lam, Solmeyer and McHale (2012) found the important role of siblings in forming each other's socioemotional features during adolescence.

Study findings support that adolescents still need parental support to build empathy skills within their social networks. Although they fight for autonomy and search for different sources of support during the transition to become an adult, they still want to be sure that they are loved and cared for. Not only at home but also at school where is an important environment for adolescent to build peer networks, they need adult figures like teachers to support them. As long as having a supportive relationship with a teacher, an adolescent can be more empathic within his/her school networking.

As evidenced by the findings, adolescents also care for classmates beside their close friends. Being a member of a group who have similar features and mutual goals and accepted by them seems important for adolescents. Being supported by classmates helps them be an empathic friend.

Findings show that not mother but father support is important for adolescents. Considering types of support, we may say that fathers are more likely financial and organizational support sources. This suggest that adolescents need emotional support from their fathers. This may be another research topic.

Considering the different levels of empathy and perceived social support depending on gender, it can be said that girls' social and emotional development progress faster. Therefore they are supported by their close friends more than boys, and their empathy skills are higher. Considering the different levels of the empathy and perceived social support depending on number of siblings, it can be said that adolescents who have siblings have less egocentric tendencies. They may also ask for help when in need. Therefore having a sibling make an adolescent more supported and empathic.

In the light of the study results, further studies may develop effective support programs for middle schools including parents and teachers. Parents should be informed about social and emotional development in early adolescence and be educated how to support their children by school guidance department. Teachers should know that they are not only information carrier but also support providers for adolescents. So with the permission of school administration, every teacher may be in charge of a group of students about their social and emotional needs. They can take care of these students and if it is necessary, direct them to guidance department with observation forms. Thus, whether a student is capable of asking for help or not, would be noticed and cared.

Supporting a student socially and emotionally would improve his/her social skills. Developing social skills would make students to build empathy in their relationships. Thus, they would have healthy relationships with the individuals in their social networks.

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APPENDIX A

DEMOGRAFİK BİLGİ FORMU

Sevgili Öğrenciler;

Bu araştırma, Yeditepe Üniversitesi Eğitim Bilimleri Enstitüsü Rehberlik ve Psikolojik Danışmanlık Anabilim Dalı Yüksek Lisans Programı'nda yürütülen bir yüksek lisans tez çalışmasıdır. Aşağıda kişisel bilgileriniz ile bazı sorular yer almaktadır. Sizden ricam soruları dikkatlice okuyun ve size uyan seçeneğe çarpı (X) işareti koyun. Katkınız ve içten yanıtlarınız için teşekkür ederim.

Deniz Demet AVCIBAŞI

1. Cinsiyet: K () E ()
2. Yaş: 12 () 13 () 14 ()
3. Kaçınıcı sınıftasınız? 7.Sınıf () 8.Sınıf ()
4. Kardeş sayısı (kendiniz dahil):
5. Anne ve babanızın öğrenim durumu:

	Anne	Baba
a) İlk....	()	()
b) Orta....	()	()
c) Lise	()	()
d) Üniv.....	()	()
e) Y. L. ve üzeri	()	()
6. Geçen dönem tüm derslerdeki genel başarı ortalamanız:

1 ()	2 ()	3 ()	4 ()	5 ()
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APPENDIX B

ÇOCUK ERGEN SOSYAL DESTEK ÖLÇEĞİ

Bu çalışmada sizden, aileniz, öğretmenleriniz, yakın arkadaşınız veya okuldaki kişilerden aldığınız destekler konusunda ilgili maddeleri yanıtlamanız istenecektir.

Her cümleyi dikkatlice okuyup, dürüstçe yanıtlayın. Yanıtlarda doğru veya yanlış cevap yoktur. Önemli olan sizin için gerçekte geçerli olanı belirtmenizdir. Tüm cümleleri atlamadan yanıtlayınız.

Her cümleye iki cevap vermeniz istenecektir. İlk olarak ne kadar destek aldığınız belirlenecek, sonra bu desteğin sizin için ne kadar önemli olduğu değerlendirilecektir.

Aşağıda bir örnek verilmiştir. Uygulamaya başlamadan önce dikkatlice okuyunuz.

ÖRNEK:

	Ne kadar sıklıkla?						Sizin için ne kadar önemli?		
	1. Hiç bir zaman	2. Nadiren	3. Bazen	4. Çoğunlukla	5. Hemen her zaman	6. Daima	1. Önemli değil	2. Önemli	3. Çok önemli
1.Öğretmenlerim sorunlarımın çözümünde bana yardım eder.			X				X		

Bu örnekte öğrenci sorunlarının çözümünde öğretmenlerinin ona yardım etmesini “bazen” ve “önemli” diyerek, yapılan yardımı tanımlar.

Lütfen bir sorunuz olursa veya anlamadıysanız yardım isteyiniz. Hiç bir ayrıntıyı atlamayınız. Teşekkürler.

BABAM	Ne kadar sıklıkla?						Sizin için ne kadar önemli?		
	1. H..... Z.....	2. N.....	3. B.....	4. Ç.....	5. H..... h..... Z.....	6. D.....	1. Ö..... D.....	2. Önemli	3. Çok önemli
13. Benimle gurur duyduğunu gösterir.									
14. Beni anlar.									
15. Konuşmaya ihtiyacım olduğunda beni dinler.									
16. Ne yapacağımı bilmediğimde önerilerde bulunur.									
17. Bana öğüt verir.									
18. Bana bilgi vererek, problemlerimi çözmeme yardımcı olur.									
19. Bir şeyi iyi yaptığımda, bana aferin der.									
20. Hata yaptığımda bana bunu uygun bir dil ile anlatır.									
21. Bir şeyi iyi yaptığımda beni ödüllendirir.									
22. Aktivitelerimi yapmamda bana yardımcı olur.									
23. Karar vermeme yardımcı olmak için bana zaman tanırırlar.									
24. İhtiyacım olan pek çok şeyi bana alır.									

SINIF ARKADAŞLARIM	Ne kadar sıklıkla?						Sizin için ne kadar önemli?		
	1. H.....Z.....	2. N.....	3. B.....	4. Ç.....	5. H.....h.....z.....	6. D.....	1. Ö.....D.....	2. Önemli	3. Çok önemli
37. Bana iyi davranırlar.									
38. Birçok fikir ve düşüncelerimi beğenirler.									
39. Bana ilgi gösterirler.									
40. Ne yapacağımı bilmediğim zaman bana fikir verirler.									
41. Onların bilgilerinden yeni şeyler öğrenirim.									
42. Bana öğüt verirler.									
43. İyi bir iş yaptığımda aferin derler.									
44. Hata yaptığım zaman bana bunu uygun bir dil ile söylerler.									
45. Çok çalıştığımda bunu fark ederler.									
46. Aktivitelere katılmamı isterler.									
47. Benimle bir şeyler yapmak için bana zaman ayırırlar.									
48. Sınıftaki işlerde bana yardım ederler.									

YAKIN ARKADAŞIM	Ne kadar sıklıkla?						Sizin için ne kadar önemli?		
	1. H.....Z.....	2. N.....	3. B.....	4. Ç.....	5. H.....h.....Z.....	6. D.....	1. Ö.....D.....	2. Önemli	3. Çok önemli
49. Benim duygularımı anlar.									
50. Diğerleri bana kötü davrandığında benim yanımda olur.									
51. Yalnız olduğumda bana yardım eder.									
52. Ne yapacağımı bilmediğimde bana fikirler verir.									
53. Bana öğütler verir.									
54. Anlamadığım şeyleri açıklar.									
55. Yaptığım şeyden hoşlandığını söyler.									
56. Hata yaptığım zaman bunu uygun bir dil ile söyler.									
57. Yaptığım şeyler hakkında bana doğruyu söyler.									
58. İhtiyacım olduğunda bana yardım eder.									
59. Kendisi ile ilgili şeyleri benimle paylaşır.									
60. Problemlerimi çözmemde, bana yardım etmek için zaman ayırır.									

APPENDIX C

ÇOCUK ve ERGENLER İÇİN EMPATİ ÖLÇEĞİ

Sevgili öğrenciler;

Aşağıdaki ifadeleri dikkatli okuyunuz. Sizin için doğru olduğunu düşünüyorsanız “EVET” kutucuğuna, yanlış olduğunu düşünüyorsanız “HAYIR” kutucuğuna çarpı “X” işareti koyunuz.

MADDE ÖRNEKLERİ	EVET	HAYIR
1-Oynayacak arkadaş bulamayan bir kız çocuğu görmek beni üzer.		
2-		
3-		
4-		
5-		
6-		
7-		
8- Mutluluktan ağlayan kızlar aptaldır.		
9-		
10-		
11-		
12-		
13-		
14-		
15- Kedi ve köpeklere insanlar gibi duyguları varmış gibi davranmak aptalcadır.		
16-		
17-		
18-		
19-		
20-		
21- Okul kurallarına uymadığı için öğretmen tarafından cezalandırılan bir sınıf arkadaşımı görmek beni üzmez.		