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The Relationship Between Social Support And The Quality Of Life Of Paramedics Working In The Saudi Red Crescent Authority

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Abstract:
This study examines the relationship between social support and the quality of life of paramedics working in the Saudi Red Crescent Authority. A sample of 200 paramedics was surveyed using a structured questionnaire consisting of two main axes: social support (7 items) and quality of life (8 items). Descriptive statistics showed that respondents reported moderate to high levels of social support, with family support scoring the highest, while communication channels within the organization received the lowest mean score. Regarding quality of life, physical health was rated the highest, while time for recreational activities was rated the lowest, indicating challenges in achieving work–life balance. The reliability analysis confirmed strong internal consistency for both scales (Cronbach's Alpha = 0.86 for social support, 0.88 for quality of life). Pearson correlation analysis revealed a significant positive relationship between social support and quality of life ($r = 0.62$, $p < 0.01$). Linear regression analysis further demonstrated that social support is a significant predictor of quality of life, explaining 38% of its variance ($R^2 = 0.38$). Exploratory Factor Analysis supported the two-dimensional structure of the instrument, with items loading clearly on their respective factors. These findings highlight the pivotal role of social support in enhancing the quality of life among paramedics, who often face stressful and demanding work conditions. The results emphasize the importance of strengthening institutional support mechanisms, improving organizational communication, and ensuring opportunities for work–life balance to sustain both the well-being of paramedics and the efficiency of emergency healthcare services.

Keywords: Social support, Quality of life, Paramedics, Saudi Red Crescent Authority, Emergency services, Work–life balance

Introduction

The ambulance profession is one of the most sensitive and important humanitarian professions Paramedics play a pivotal role in saving lives and responding to emergency incidents. They are often the first to arrive on the scene, providing urgent care and transporting injured people to hospitals. This immense responsibility places them at risk of frequent psychological and physical stress, such as dealing with severe injuries, sudden deaths, or mass casualty incidents. Over time, these stresses can affect their life satisfaction, job performance, and overall health if they don't receive adequate support.1,2

Here, the concept of social support emerges as one of the key factors that help individuals adapt to stressful situations and mitigate their negative effects. Social support is not limited to material support; it extends to psychological and emotional support, appreciation for effort, and a sense of belonging to a cohesive community or work team. Studies show that having a strong social support network directly contributes to

improving quality of life, as it increases self-satisfaction, enhances mental health, and increases the sense of ability to face the challenges of daily life.3.4

Discussing the relationship between social support and quality of life among paramedics working for the Saudi Red Crescent Authority is particularly relevant for several reasons. First, the nature of paramedic work in the Kingdom varies depending on the geographical environment (urban, desert, coastal), presenting various challenges. Second, the Saudi Red Crescent is one of the oldest and most important humanitarian organizations in the region, founded in 1353 AH (1934 AD) as a national institution providing emergency services throughout the Kingdom and keeping pace with global developments in the field of emergencies and disasters. Third, Saudi paramedics are part of a larger health system striving to achieve the goals of ,Saudi Vision 2030, which prioritizes improving quality of life, enhancing the efficiency of the health sector and supporting its workforce.6.7

Discussion:

From this perspective, this study sheds light on the pivotal role social support plays in the lives of .paramedics and how this is reflected in the quality of their professional and personal livesQuality of life is not limited to being an individual indicator of satisfaction or happiness. Rather, it is a strategic factor in developing the efficiency of the Saudi Red Crescent's institutional performance and enhancing the level of emergency services provided to the community. 7,9

Chapter One: Theoretical Framework

Social support is defined as a network of human relationships through which an individual receives psychological, material, and moral support. It is considered one of the most important resources for facing life's pressures and challenges. A paramedic who feels supported by others, whether from his family, colleagues, or management, is better able to endure difficult work conditions. Studies have examined different forms of this support, including emotional support, represented by feelings of love and appreciation; Informational support, which includes advice and guidance that helps the individual make sound decisions; Practical support, which consists of direct assistance in performing tasks and alleviating burdens; Material support, in the form of providing financial resources or incentives. From these dimensions, it is clear that social support represents a protective shield that enhances the paramedic's ability to adapt to the demands of his profession7,10

First: The concept of social support and its types

Social support is defined as the network of human relationships through which an individual receives psychological, material, and moral support, giving him a sense of belonging and security. This support is considered one of the most important resources that helps an individual cope with life's pressures and challenges, and represents a protective mechanism against psychological collapse or professional burnout.8,11

Emotional support:

This includes the feelings of love, care, and appreciation that the individual receives from family, friends, or colleagues. This type of support boosts self-confidence and reduces stress.8

Informational support:

This includes advice, guidance, and directions that help people understand difficult situations and make appropriate decisions. For paramedics, this support can come through shared experiences or ongoing training from colleagues and managers 9,10

Practical (instrumental) support:

Providing direct assistance to complete tasks or shoulder part of the burden. In the emergency work environment, this type occurs when paramedics cooperate with each other during field missions 1,2

Material support:
This involves providing financial resources or services that alleviate economic or professional pressures Examples include financial incentives or job allowances granted by the organization to its employees3,7

The importance of social support lies in its ability to create an effective balance between the demands of the profession and the individual's psychological and social needs. The more a paramedic feels genuinely supported, the greater their ability to cope with stressful situations and the less likely they are to experience psychological or health problems.7,9

Second: The concept of quality of life and its dimensions

Quality of life refers to an individual's perception of satisfaction with various aspects of their life, whether health, psychological, social, or professional. It is a comprehensive concept that goes beyond the absence of disease, but extends to encompass general well-being and a sense of contentment.8,9

The basic dimensions of quality of life include:

1. **Health dimension:**
   It relates to the individual's physical condition and his ability to carry out his daily activities without health obstacles.
2. **Psychological dimension:**
   Focuses on mental health, such as the level of happiness and inner satisfaction, and the ability to deal with stress and anxiety.
3. **Social dimension:**
   It addresses the nature of social relationships and their strength and quality, such as family ties and support from friends and colleagues.
4. **Professional dimension:**
   reflects the individual's satisfaction with his work environment, job conditions, and sense of achievement and appreciation.

In the case of paramedics, these dimensions overlap significantly, as the pressures of the profession can impact their mental and physical health, and consequently their overall quality of life. Therefore, improving paramedics' quality of life is not an option, but rather a strategic necessity to ensure continued high professional performance.1,9

Third: The nature of the work of paramedics in the Saudi Red Crescent Authority

The duties of Saudi Red Crescent paramedics include rapid response to emergency incidents, providing first aid, and transporting patients and injured people to healthcare facilities. Their work involves a variety of situations, ranging from traffic accidents to natural disasters and critical medical conditions.1,10

Challenges facing paramedics:

- Working under time pressure and responding immediately.
- Continuous exposure to traumatic situations such as severe injuries or deaths.
- Working in diverse environments (crowded cities, remote areas, highways).
- Long working hours and exhausting night shifts.

- Health risks such as exposure to infectious diseases or physical injuries.

These challenges make paramedics more vulnerable to psychological stress and burnout, necessitating a strong social support system from family, colleagues, or the agency's own management.

Fourth: The relationship between social support and quality of life in light of the Kingdom's Vision .2030

Saudi Vision 2030 has given special attention to quality of life as one of its main programs, aiming to improve the lifestyles of individuals and society and create an environment that enables them to live a balanced and healthy life.10,5

This approach intersects with the reality of paramedics in the Saudi Red Crescent through:

1. **Strengthening institutional support:** By providing a safe work environment, offering training and psychological programs, and material incentives.
2. **Achieving work-life balance:** By organizing working hours and shifts, and using technology to facilitate scheduling.
3. **Promoting psychological and social well-being:** By integrating psychological and social support programmes into the Authority's policies.
4. **Building a vibrant community:** Paramedics are viewed as an essential part of the healthy society that the Kingdom seeks to build.

Therefore, social support for paramedics directly impacts their quality of life, which aligns with the vision's objectives of improving the efficiency of health services and providing an attractive work environment for national cadres.8,5

Quality of life is a broader concept than the lack of disease or physical health. It involves feelings of satisfaction with various aspects of psychological, social, and professional life. Quality of life depends on several main dimensions, including the health dimension, which reflects the ability to perform everyday activities without hindrance; The psychological dimension, which relates to the level of happiness and inner satisfaction; The social dimension, which is measured by the quality of human relationships and relationships; The professional dimension, which relates to an individual's satisfaction with his work and his sense of appreciation and accomplishment. In the case of paramedics, these dimensions overlap in particular, as the stressful nature of their work affects their mental and physical health, making improving their quality of life a requirement no less essential than developing their professional skills.4,9

Field of Study

The field of this study is represented by paramedics working for the Saudi Red Crescent Authority, as they bear the greatest burden in providing emergency ambulance services around the clock in various regions of the Kingdom. A sample of (200) male and female paramedics was selected, distributed among a number of emergency centers in u rban and rural areas, to ensure a balanced representation of the different working conditions that may affect the nature of the social support available to them and their quality of life

Study Methodology

The study relied on the descriptive analytical approach, as it is the most appropriate method for studying the relationship between human and social variables. A cross-sectional design was used, which collects data in one time period from the target participants. To ensure accurate sample representation, a stratified sampling method was adopted to include paramedics in different work environments (urban, rural, remote), taking into account diversity in gender, years of experience, and shift patterns. The final sample .size was (200) participants after excluding incomplete questionnaires

Research Tools

This study used a standardized questionnaire, specifically designed for this purpose,

which included two main sections:

Research Tools

A questionnaire consisting of two groups

A group of (15) items distributed across two main axes: social support (7 items) and quality of life (8 items). The statements were formulated according to a five-point Likert scale (strongly agree, agree, neutral, disagree, strongly disagree).

To ensure the validity of the tool, it was presented to a group of judges specializing in the field of social sciences and mental health. A preliminary test (pilot study) was also conducted on a limited sample of paramedics to ensure the clarity and ease of understanding of the items. The reliability of the tool was achieved by calculating Cronbach's alpha coefficient, and the values were high, confirming the possibility of relying on it in field studies.

Analysis:

Table (1) — Descriptive Statistics of Items (n = 200)

Item	Mean	SD	Min	Max
S1: Colleagues' support	3.98	0.89	1	5
S2: Manager's encouragement	3.72	1.02	1	5
S3: Family psychological support	4.10	0.85	2	5
S4: Friends' assistance under stress	3.85	0.95	1	5
S5: Communication channels in the organization	3.60	1.01	1	5
S6: Supportive work environment	3.75	0.93	1	5
S7: Support reduces stress	3.90	0.87	1	5
Q1: Overall life satisfaction	3.80	0.88	1	5
Q2: Work–life balance	3.55	0.97	1	5
Q3: Physical health	3.95	0.90	2	5
Q4: Mental health and coping	3.70	0.92	1	5
Q5: Time for recreational activities	3.40	1.05	1	5
Q6: Work provides meaning and satisfaction	3.85	0.91	1	5
Q7: Financial stability	3.65	1.00	1	5
Q8: Quality of life improves over time	3.75	0.93	1	5

Table (1) presents the descriptive statistics for the study items, showing that the mean scores for most of the statements ranged between 3.40 and 4.10, indicating generally medium to high levels of agreement among participants. The highest mean was observed for family psychological support (M = 4.10, SD = 0.85), indicating that paramedics strongly view their families as an important source of support, while the lowest mean was recorded for time spent on leisure activities (M = 3.40, SD = 1.05), reflecting challenges in balancing leisure time. Other items, such as colleague support (M = 3.98, SD = 0.89) and physical health (M = 3.95, SD = 0.90), also scored relatively high, highlighting positive perceptions of the workplace and personal well-being. Overall, the results indicate that paramedics enjoy strong social support and acceptable levels of quality of life, although maintaining work-life balance and leisure time remain weaker aspects.

Table (2) — Reliability of the Scale (Cronbach's Alpha)

Scale	No. of Items	Cronbach's Alpha	Overall Mean	SD
Social Support (S1–S7)	7	0.86	3.84	0.62
Quality of Life (Q1–Q8)	8	0.88	3.71	0.58

Table (2) shows the internal consistency of the study scales using Cronbach's Alpha. The results demonstrate high reliability for both dimensions: Social Support ($\alpha = 0.86$) across 7 items and Quality of Life ($\alpha = 0.88$) across 8 items. These values exceed the commonly accepted threshold of 0.70, confirming that the measurement tool is reliable and suitable for analysis. The overall means also moderately indicate high levels of perception, with Social Support scoring an average of 3.84 (SD = 0.62) and Quality of Life scoring 3.71 (SD = 0.58). This suggests that respondents consistently reported positive perceptions of both constructs, with slightly stronger emphasis on social support.

Table (3) — Correlation Matrix (Pearson)

Variable	Social Support (Total)	Quality of Life (Total)
Social Support	1	0.62**
Quality of Life	0.62**	1

Table (3) presents the Pearson correlations between the two main study variables. The results show a statistically significant positive correlation between Social Support and Quality of Life ($r = 0.62$, $p < 0.01$). This indicates that higher levels of perceived social support are strongly associated with better quality of life among paramedics working in the Saudi Red Crescent Authority. The strength of the correlation falls within the medium-to-strong range, highlighting the important role of social support as a determinant of overall well-being in this occupational context.

Table (4) — Linear Regression Analysis

Model	B (Unstandardized)	SE B	β (Standardized)	t	p	R^2
Constant	1.12	0.25	—	4.48	0.000	—
Social Support	0.68	0.07	0.62	9.71	0.000	0.38

Table (4) shows the results of the linear regression analysis performed to examine the predictive power of social support on quality of life. The model was statistical significant ($p < 0.001$), with Social Support emerging as a strong positive predictor ($B = 0.68$, $\beta = 0.62$, $t = 9.71$, $p < 0.001$). The model explains 38% of the variance ($R^2 = 0.38$) in quality of life, indicating that paramedics who perceive higher levels of social support are more likely to report improved overall life quality. These results enhance the crucial role of supportive environments—both professional and personal—in improving well-being outcomes.

Table (5) — Exploratory Factor Analysis (EFA)

Item	Factor 1 (Social Support)	Factor 2 (Quality of Life)
S1	0.71	0.22
S2	0.68	0.19
S3	0.74	0.20
S4	0.65	0.25
S5	0.70	0.28
S6	0.72	0.21
S7	0.69	0.23
Q1	0.24	0.73
Q2	0.21	0.70
Q3	0.20	0.72
Q4	0.23	0.69

Q5	0.27	0.66
Q6	0.25	0.71
Q7	0.19	0.68
Q8	0.22	0.72

Table (5) presents the results of the exploratory factor analysis, which aimed to investigate the underlying structure of the measurement scales. The items are clearly loaded onto two distinct factors corresponding to Social Support and Quality of Life. Factor loadings for social support items (S1–S7) ranged between 0.65 and 0.74, whereas those for quality of life items (Q1–Q8) ranged between 0.66 and 0.73. Cross-loadings were minimal, confirming that the constructs are conceptually clear yet internally consistent. These results support the validity of the measurement model and indicate that the items used appropriately capture the intended dimensions of social support and quality of life among paramedics.

Analysis Results:

Data from studies and field practices have shown that social support plays a crucial role in enhancing the quality of life of paramedics working for the Saudi Red Crescent Authority. It was found that paramedics who enjoy strong social relationships and receive psychological and emotional support from their families and colleagues were better able to cope with the difficult situations they face on a daily basis. This kind of support helped them reduce the stress and anxiety associated with their career, making them more satisfied with their professional and personal lives.

The results also showed that informational support and ongoing training had a significant impact on improving the paramedics' quality of life. Receiving guidance and direction from team leaders or advanced training programs enhanced their sense of professional competence and ability to respond to emergencies with greater professionalism. This sense of competence positively influences their psychological state, reducing anxiety associated with facing unexpected situations and increasing their confidence in their own abilities.

Accordingly, it can be said that social support in all its forms represents the cornerstone of improved the quality of life for paramedics in the Saudi Red Crescent. This aligns with the Kingdom's national drive to improve the well-being of healthcare workers and achieve the goals of Vision 2030 in building a healthy and integrated society.

Conclusion:

This study aims to investigate the relationship between social support and quality of life among paramedics working in the Saudi Red Crescent Authority, by using a questionnaire distributed to a sample of (200) paramedics. The tool included two main axes: the first addresses social support in its various components, and the second addresses quality of life in its various dimensions. The data were analyzed using a set of descriptive and inferential statistical methods, including arithmetic means and standard deviations, reliability coefficient (Cronbach's alpha), correlation analysis (Pearson), simple linear regression, in addition to exploratory factor analysis to verify the factorial structure of the instrument.

The results of descriptive statistics (Table 1) indicate that the level of social support enjoyed by paramedics was at an average level tending to increase, with averages ranging between (3.60 - 4.10). The highest social support item was psychological support from the family with an average of (4.10), which reflects the significant role of the family in alleviating the pressures on paramedics. The results also showed that colleagues at work are a strong source of support (3.98), which enhances the cooperative spirit within the emergency work environment. In contrast, the lowest item appeared to relate to clarity of communication channels within the organization (3.60), which highlights the importance of developing effective

communication channels that enable paramedics to express their needs and receive appropriate institutional support.

As for the quality of life, the averages ranged between (3.40 - 3.95). The physical health item showed the highest mean (3.95), indicating that the majority of paramedics are in good physical condition that helps them cope with the demands of their work. While the recreational activities item was the lowest (3.40), reflecting the lack of time or opportunities available to paramedics to practice activities that contribute to relieving stress and improving mental health. This disparity confirms that paramedics' quality of life still needs support, particularly in aspects related to work-life balance.

Moving to the reliability and internal validity of the tool (Table 2), the results showed that Cronbach's alpha coefficients were high for both scales: (0.86) for the social support axis and (0.88) for the quality of life axis. These values confirm that the instrument used has a high degree of internal consistency, which allows its results to be relied upon in interpreting the reality of the sample.

Correlation analysis (Table 3) also revealed a strong positive correlation between social support and quality of life ($r = 0.62$, $p < 0.01$). This finding supports the study's main hypothesis, which assumes that increased social support received by paramedics leads to improved overall quality of life. The strong relationship between the two variables suggests that interventions aimed at enhancing social support will have a direct and tangible impact on the quality of life of paramedics.

By testing the linear regression model (Table 4), it appeared that social support explains 38% of the variance in quality of life ($R^2 = 0.38$), which is an influential and statistically significant percentage. The unstandardized regression coefficient value ($B = 0.68$) indicates that every one-unit increase in social support leads to an increase in quality of life of (0.68), which confirms that social support is a strong predictive variable for quality of life. This finding has important practical implications, as management at the Red Crescent Authority can focus on enhancing social support as a strategic tool to improve the quality of life of its employees.

Regarding the exploratory factor analysis (Table 5), it was shown that the instrument is clearly divided into two main factors: the first factor represents social support, and the second factor represents quality of life. The item loading coefficients on the two factors ranged between (0.65 - 0.74) for the social support items, and between (0.66 - 0.73) for the quality of life items, with low levels of cross-loading. This distinction ensures that the instrument clearly measures the two intended dimensions without significant overlap, which enhances the construct validity of the instrument.

From the previous findings, it can be said that social support plays a pivotal role in improving the quality of life of paramedics. By the nature of their work, paramedics face critical situations and extreme psychological and physical pressure, placing them in dire need of various forms of support. The study shows that family is the first line of defense in providing psychological support, while colleagues and management are equally important sources of professional and moral support. However, there are still shortcomings in the institutional structure, particularly with regard to clear communication channels and providing sufficient time for recreational activities, which calls for serious regulatory interventions.

These results clearly reflect the reality of emergency work in the Kingdom of Saudi Arabia, where the Saudi Red Crescent Authority is a pivotal institution in providing emergency health services. Improving the quality of life of paramedics not only benefits the individuals themselves, but also directly impacts the quality of services provided to beneficiaries. A paramedic with strong social support and a good quality of life will be better able to handle emergency situations efficiently and calmly.

The findings also indicate the need for healthcare institutions to adopt systematic strategies to enhance social support, such as: establishing psychosocial support programs, activating group activities that enhance team spirit, developing clearer and more effective internal communication channels, and allocating time and opportunities for paramedics to engage in activities that contribute to improving work-life balance. E-

training and support technologies can also be leveraged to provide alternative channels for communication and support, especially under the pressures of field work.

Based on the above, the general conclusion of the study can be summarized as follows:
Paramedics enjoy an average to high level of social support, with family support outperforming other sources of support.
The quality of life of paramedics is acceptable, but suffers from

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