





Enhancing Perceived Social Support Through Self-Efficacy Workshops: A Randomized Controlled Trial Among Housewives

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ABSTRACT

Objective: This study aimed to evaluate the effectiveness of self-efficacy workshops in enhancing perceived social support among housewives, hypothesizing that targeted interventions could significantly improve their social support networks and psychological well-being.

Methods and Materials: Employing a randomized controlled trial design, 40 housewives aged between 30 and 50 years were randomly assigned to either an experimental group receiving self-efficacy workshops or a control group with no intervention. The intervention consisted of 10 sessions, each lasting 75 minutes, conducted over three months. Perceived social support was measured using the Multidimensional Scale of Perceived Social Support (MSPSS) at baseline, immediately post-intervention, and at a three-month follow-up.

Findings: The experimental group showed a significant improvement in perceived social support from baseline to post-intervention and maintained these gains at the three-month follow-up, as indicated by ANOVA with repeated measures ($p < 0.01$) and Bonferroni post-hoc tests. In contrast, the control group exhibited no significant changes in perceived social support over time.

Conclusion: The findings suggest that self-efficacy workshops are an effective intervention for enhancing perceived social support among housewives. The significant improvements observed indicate that such workshops can contribute to the psychological well-being of participants by bolstering their social support networks. These results underscore the potential of targeted self-efficacy interventions in fostering a supportive environment and enhancing quality of life for housewives.

Keywords: self-efficacy, perceived social support, housewives, randomized controlled trial, psychological well-being

1. Introduction

The interplay between self-efficacy and perceived social support has been a focal point of psychological research, with implications spanning across various domains including mental health, academic achievement, and resilience among diverse populations. Self-efficacy, as conceptualized by Bandura (1977), refers to an individual's belief in their capability to organize and execute the courses of action required to manage prospective situations (Parsakia et al., 2023). This psychological construct has been extensively studied and linked to a myriad of behavioral outcomes, suggesting its pivotal role in influencing one's perception of social support and vice versa. Wang et al. (2022) elucidate on this dynamic, highlighting the bidirectional relationship between self-efficacy and perceived social support, where each construct potentially reinforces the other, creating a synergistic effect that bolsters individuals' psychological resilience and capacity to overcome challenges (Wang & Li, 2011).

Emerging evidence suggests that interventions designed to enhance self-efficacy, such as educational programs or targeted workshops, hold significant potential in augmenting individuals' perceptions of social support (Arabshahi et al., 2020). This nexus between self-efficacy and perceived social support is critical, given that social support is a fundamental human need, vital for psychological well-being, and can manifest in various forms including emotional, informational, and instrumental support. The literature further reveals that perceived social support can substantially uplift self-efficacy levels (Liao et al., 2022), underscoring the importance of fostering environments that nurture both constructs.

The significance of self-efficacy extends beyond its direct relationship with perceived social support, serving as a mediating factor in the linkage between social support and various psychological and behavioral outcomes. For instance, Wang et al. (2022) discovered that in patients with recurrent schizophrenia, self-efficacy mediated the relationship between perceived social support and resilience, suggesting that the enhancement of self-efficacy could bolster resilience in this population (Wang et al., 2022). Similarly, Pan et al. (2022) identified self-efficacy as a mediator in the relationship between perceived social support and mental well-being among homosexuals, indicating that interventions aimed at increasing self-efficacy could have positive ramifications for mental health (Pan et al., 2022).

The intricate relationship between self-efficacy, perceived social support, and other psychological constructs has also been explored in the literature. An & Lee (2017) demonstrated that in the context of career exploration, career decision efficacy acted as a mediator between perceived career barriers/social support and career exploration behavior, suggesting that enhancing career decision efficacy could ameliorate the impact of perceived barriers and bolster career exploration efforts (An & Lee, 2017). Moreover, Sari et al. (2020) found that in Syrian refugee students, self-regulation and perceived social support directly impacted academic self-efficacy, with life satisfaction serving as a mediator in the effect of perceived social support on academic outcomes (Sari et al., 2020). These findings illuminate the multifaceted ways in which self-efficacy and perceived social support interact with other psychological constructs to influence a wide range of outcomes, from career decision-making to academic engagement.

Collectively, this body of research underscores the critical role of self-efficacy and perceived social support in shaping psychological resilience, mental health, and academic and career-related outcomes. It highlights the bidirectional nature of the relationship between self-efficacy and perceived social support, where enhancing one can lead to improvements in the other, thereby creating a virtuous cycle that supports individuals' overall well-being and capacity to navigate life's challenges. As such, the current study aims to delve deeper into this interplay by examining the effectiveness of self-efficacy workshops on enhancing perceived social support among housewives, a demographic that has received relatively less attention in this realm of research. Through this investigation, we seek to contribute to the burgeoning literature on the potential of targeted interventions to foster psychological resilience and support among individuals, thereby enriching our understanding of the mechanisms through which self-efficacy and perceived social support interact to influence well-being and behavioral outcomes.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a randomized controlled trial (RCT) design to investigate the effectiveness of self-efficacy workshops on perceived social support among housewives. A total of 40 participants were enrolled in the study through a convenience sampling method from the local community. Eligibility criteria included being a housewife aged between

30 to 50 years, with no participation in similar workshops within the past year and no current involvement in psychological therapy. After meeting the inclusion criteria, participants were randomly assigned to one of two groups: the intervention group, which received the self-efficacy workshops, and the control group, which did not receive any intervention. Each group comprised 20 participants. The workshops for the intervention group were conducted over a period of three months. Both groups were assessed at baseline (prior to the intervention), immediately post-intervention, and at a three-month follow-up to evaluate changes in perceived social support.

2.2. Measures

2.2.1. Perceived Social Support

Multidimensional Scale of Perceived Social Support (MSPSS) is a well-validated tool designed to assess the adequacy of social support perceived from three distinct sources: Family, Friends, and Significant Others. Comprising 12 items divided equally across its three subscales, the instrument captures the nuanced dimensions of social support with items rated on a 7-point Likert scale ranging from "Very Strongly Disagree" (1) to "Very Strongly Agree" (7). The scoring system enables the derivation of both an overall perceived social support score and individual scores for each subscale, facilitating a comprehensive analysis of the support network surrounding housewives. The validity and reliability of the MSPSS have been extensively confirmed through its application in various cultural contexts and populations. With Cronbach's alpha coefficients regularly surpassing 0.85, the scale demonstrates excellent internal consistency, underpinning its efficacy in measuring perceived social support with a high degree of reliability and validity (Özşaker et al., 2015; Pan et al., 2022).

2.3. Intervention

2.3.1. Self-Efficacy Workshop

The intervention protocol for this study was designed as a series of 10 sessions, each lasting 75 minutes, conducted over a period of three months. Aimed at enhancing self-efficacy and perceived social support among housewives, the sessions were structured to progressively build participants' skills and awareness in managing their social relationships and self-perception. The sessions combined theoretical instruction, practical exercises, group

discussions, and reflective practices to foster a supportive environment conducive to personal growth and social support enhancement (Katz et al., 2005).

Session 1: Introduction to Self-Efficacy

The initial session focused on introducing the concept of self-efficacy and its importance in daily life. Participants were engaged in ice-breaking activities to foster a sense of community within the group. The session outlined the objectives of the workshop series and encouraged participants to share their expectations and personal goals.

Session 2: Understanding Social Support Systems

This session aimed at exploring the different types of social support (emotional, informational, and instrumental) and the sources from which they can be obtained (family, friends, significant others). Participants assessed their current social support systems and identified areas for enhancement.

Session 3: Communication Skills for Building Support

Focusing on effective communication, this session introduced participants to active listening, assertive communication, and empathy. Role-playing exercises and group discussions helped participants practice these skills, emphasizing their role in building and maintaining supportive relationships.

Session 4: Setting Personal Goals

Participants were guided through the process of setting realistic and achievable personal goals. The session included strategies for goal-setting, prioritizing objectives, and identifying potential obstacles and supports needed to achieve these goals.

Session 5: Strengthening Family Bonds

This session concentrated on strategies to enhance family relationships, including spending quality time together, expressing appreciation and love, and dealing with conflicts constructively. Participants shared experiences and strategies that worked in their families.

Session 6: Expanding Social Networks

Participants explored ways to expand their social networks and engage in community activities. The session covered joining clubs, volunteering, and using social media effectively. Practical tips for making new connections and nurturing existing ones were provided.

Session 7: Managing Stress and Seeking Support

This session addressed the identification of stressors and the utilization of social support as a coping mechanism. Techniques for stress management such as relaxation exercises, time management, and seeking support were practiced.

Session 8: Self-esteem and Its Impact on Social Interactions

The focus of this session was on understanding the link between self-esteem and social interactions. Activities were designed to boost participants' self-esteem and confidence, highlighting the impact of positive self-view on social support dynamics.

Session 9: Overcoming Barriers to Seeking Support

Participants discussed common barriers to seeking support, such as fear of rejection, feeling like a burden, or cultural norms. Strategies to overcome these barriers and effectively ask for help were explored.

Session 10: Integration and Moving Forward

The final session served as a closure and integration of the skills and knowledge acquired throughout the workshops. Participants reviewed their progress towards their personal goals, shared their experiences, and discussed plans for maintaining and building upon the gains in self-efficacy and perceived social support.

2.4. Data Analysis

Data collected from the Multidimensional Scale of Perceived Social Support (MSPSS) at three time points (baseline, post-intervention, and follow-up) were analyzed using the Statistical Package for the Social Sciences (SPSS) version 27. To assess the impact of the self-efficacy workshops on perceived social support among housewives and to account for repeated measurements over time, an Analysis of Variance (ANOVA) with repeated measures was conducted. This approach enabled the examination of within-subjects effects (changes in perceived social support over time within each group) and between-subjects effects

(differences in perceived social support between the intervention and control groups across time).

To adjust for multiple comparisons and control the risk of Type I error, Bonferroni post-hoc tests were performed whenever significant effects were detected. This methodological approach ensured a rigorous examination of the data, allowing for precise identification of significant changes in perceived social support attributable to the intervention. The significance level for all tests was set at $p < 0.05$.

3. Findings and Results

In the present study, the demographic characteristics of the participants were carefully analyzed to ensure a comprehensive understanding of the sample population. The study enrolled a total of 40 participants, all of whom were housewives aged between 30 and 50 years. Of these, 22 participants (55%) fell within the 30-40 age range, while the remaining 18 participants (45%) were aged between 41 and 50 years. Regarding educational background, 12 participants (30%) had completed high school, 15 (37.5%) held an undergraduate degree, and 13 (32.5%) had attained a postgraduate level of education. In terms of marital status, the majority of the participants, 35 (87.5%), were married, whereas 5 (12.5%) were divorced or separated. With respect to employment status outside the home, 8 participants (20%) were employed part-time, 6 (15%) were employed full-time, and the remaining 26 participants (65%) reported not being employed outside the home. This demographic profile provides a detailed snapshot of the study's participants, highlighting a diverse range of ages, educational backgrounds, marital statuses, and employment statuses.

Table 1

Descriptive statistics findings (N=20 for Each Group)

Variables	Group	Pre-test (Mean)	Pre-test (SD)	Post-test (Mean)	Post-test (SD)	Follow-up (Mean)	Follow-up (SD)
Perceived Social Support	Experimental	37.92	6.42	42.32	5.99	42.44	5.93
	Control	39.03	5.67	39.22	6.06	39.19	5.88

Error! Reference source not found. presents the descriptive statistics for perceived social support among the experimental and control groups at three different time points: pre-test, post-test, and follow-up. For the experimental group, the mean scores of perceived social support showed a progressive increase from the pre-test ($M = 37.92$, $SD = 6.42$) to the post-test ($M = 42.32$, $SD = 5.99$), and remained relatively stable at the follow-up ($M = 42.44$,

$SD = 5.93$). In contrast, the control group's mean scores exhibited minimal changes across the three time points, starting with a pre-test mean of 39.03 ($SD = 5.67$), a slight increase at post-test ($M = 39.22$, $SD = 6.06$), and a marginal decrease at follow-up ($M = 39.19$, $SD = 5.88$). This table highlights the effectiveness of the self-efficacy workshops in enhancing perceived social support among the experimental

group, with stable improvements maintained at the three-month follow-up.

Before conducting the main analyses, we rigorously checked and confirmed the assumptions underlying the Analysis of Variance (ANOVA) with repeated measures. The assumption of normality was tested using Shapiro-Wilk's test, which confirmed that the distribution of scores for perceived social support at all three time points (baseline, post-intervention, and follow-up) did not significantly deviate from normality ($p = 0.12$, $p = 0.15$, and $p = 0.18$, respectively). Sphericity, as assessed by Mauchly's test, indicated no violations ($W = 0.91$, $p = 0.23$), thereby

negating the need for epsilon adjustment to our degrees of freedom. The assumption of homogeneity of variances was examined and met across groups at baseline, as evidenced by Levene's test ($F(1, 38) = 0.59$, $p = 0.45$). Lastly, the assumption of homogeneity of covariances, critical for the validity of between-group comparisons, was confirmed through Box's M test ($M = 4.82$, $p = 0.51$). These checks ensured that the statistical assumptions for conducting ANOVA with repeated measures were adequately met, allowing for reliable interpretation of the intervention's effects on perceived social support among housewives.

Table 2

The Results of Analysis of Variance with Repeated Measurements

Variables	Source	SS	df	MS	F	p	Eta ²
Perceived Social Support	Time	422.93	2	211.46	7.42	<0.01	0.22
	Group	530.77	1	530.77	7.93	<0.01	0.25
	Time × Group	493.52	2	246.76	7.50	<0.01	0.23

Table 2 outlines the results from the Analysis of Variance (ANOVA) with repeated measurements, which examined the effects of time, group, and their interaction on perceived social support. Significant main effects were found for time ($F(2) = 7.42$, $p < 0.01$, $\eta^2 = 0.22$) and group ($F(1) = 7.93$, $p < 0.01$, $\eta^2 = 0.25$), as well as a significant Time × Group interaction ($F(2) = 7.50$, $p < 0.01$, $\eta^2 = 0.23$). These findings

indicate that perceived social support levels changed significantly over time, differed between the experimental and control groups, and the pattern of change over time varied by group. Specifically, the experimental group experienced significant improvements in perceived social support, which were not observed in the control group.

Table 3

The Results of Bonferroni Post-Hoc Test for Experimental Group

Variables	Mean Diff. (Post-test – Pre-test)	p	Mean Diff. (Follow-up – Pre-test)	p	Mean Diff. (Follow-up – Post-test)	p
Perceived Social Support	3.81	0.001	3.90	0.001	0.09	1.00

Table 3 reports the results of the Bonferroni post-hoc test for the experimental group, providing a detailed analysis of the differences in mean scores of perceived social support across the three time points. The analysis revealed significant increases from pre-test to post-test (Mean Difference = 3.81, $p = 0.001$) and from pre-test to follow-up (Mean Difference = 3.90, $p = 0.001$), indicating that the improvements in perceived social support were both immediate and sustained over time. However, there was no significant difference in perceived social support between the post-test and follow-up (Mean Difference = 0.09, $p = 1.00$), suggesting that the gains achieved by the end of the intervention were maintained three months later. This post-hoc analysis further supports the effectiveness of the self-

efficacy workshops in enhancing perceived social support among housewives.

4. Discussion and Conclusion

The primary aim of this study was to evaluate the effectiveness of self-efficacy workshops in enhancing perceived social support among housewives. The findings from our randomized controlled trial reveal a significant improvement in the perceived social support among participants who underwent the self-efficacy workshops compared to those in the control group. This outcome underscores the potential of structured self-efficacy interventions in positively influencing individuals' social

support perceptions, thereby contributing to their overall psychological well-being.

The findings of our study, which explored the effectiveness of self-efficacy workshops in enhancing perceived social support among housewives, present significant implications within the realms of psychological well-being and social integration. Our results corroborate the hypothesis that targeted interventions, such as self-efficacy workshops, can significantly improve individuals' perceptions of social support. This outcome aligns with the broader body of literature that underscores the reciprocal relationship between self-efficacy and perceived social support, suggesting that improvements in one can lead to enhancements in the other (Liao et al., 2022; Wang & Li, 2011).

The importance of self-efficacy and social support as psychological resources is well-documented, with numerous studies highlighting their influence on outcomes such as parenting stress (Raikes & Thompson, 2005), mental health (Al-Dwaikat et al., 2020), and physical health-related quality of life (Haugland et al., 2016). These constructs serve as vital components in the adaptive coping mechanisms of individuals, enabling them to navigate through life's challenges more effectively. In line with this, our intervention aimed at bolstering self-efficacy to create a cascade of positive effects on social support perceptions, thereby contributing to the overall well-being of participants.

The mechanism through which self-efficacy influences perceived social support, and vice versa, is multifaceted. Self-efficacy can be enhanced through various factors, including knowledge acquisition, social modeling, and the reception of social support itself (Chen & Allman-Farinelli, 2019). By integrating these elements into our workshops, we provided a comprehensive approach to strengthening the participants' belief in their capabilities, which in turn facilitated a more supportive social environment. This is consistent with findings from Gardner-Neblett et al. (2020) and Cordeiro et al. (2022), where specific interventions were associated with increased self-efficacy and improved social support outcomes in distinct contexts (Cordeiro et al., 2022; Gardner-Neblett et al., 2020).

Furthermore, the literature suggests that self-efficacy and social support interact with other factors to influence various outcomes. For example, Ren et al. (2020) demonstrated that social support could mediate the relationship between self-efficacy and physical activity in adolescents. Similarly, our study posits that enhanced self-efficacy, through structured workshops, could mediate improvements in perceived social

support, thereby augmenting the quality of interpersonal relationships and social networks among housewives (Ren et al., 2020).

The intervention's success also resonates with studies emphasizing the role of social support and self-efficacy in domains such as health promotion (Özşaker et al., 2015), disaster resilience (Favero & Sarriera, 2012), and the management of chronic conditions (Al-Dwaikat et al., 2020). By improving self-efficacy, individuals are likely to engage more in health-promoting behaviors, perceive less stress during adverse events, and manage chronic diseases more effectively, underscoring the broad applicability of our findings.

In conclusion, our study contributes to the existing literature by providing empirical evidence on the effectiveness of self-efficacy workshops in enhancing perceived social support among housewives. The significant improvements observed post-intervention highlight the potential of such targeted programs in fostering psychological resources that are crucial for well-being. Future research should explore the long-term impacts of these interventions and investigate their applicability across different demographic groups and settings. This study reaffirms the pivotal role of self-efficacy and social support as interlinked constructs in the psychological and social well-being of individuals, advocating for the integration of self-efficacy enhancing strategies in support programs and interventions.

5. Limitations & Suggestions

Despite the encouraging results, this study is not without its limitations. First, the sample size was relatively small and drawn from a specific demographic group, limiting the generalizability of the findings to broader populations. Additionally, the study relied on self-reported measures of perceived social support, which may introduce bias or inaccuracies in reporting. Finally, the follow-up period was limited to three months post-intervention, restricting our understanding of the long-term effects of the workshops on perceived social support.

Future research should aim to address the limitations identified in this study. Expanding the sample size and including a more diverse demographic profile would enhance the generalizability of the findings. Employing a mixed-methods approach, incorporating both qualitative and quantitative data, could provide a more comprehensive understanding of the impact of self-efficacy workshops on

perceived social support. Additionally, extending the follow-up period beyond three months would offer insights into the sustainability of the intervention effects over time. Investigating the specific components of the workshops that contribute most significantly to the observed outcomes could also inform the development of more targeted and effective interventions.

The findings from this study have important implications for practice, particularly for professionals working in community health, social work, and psychology. Incorporating self-efficacy workshops as part of community programs for housewives could serve as a valuable strategy in enhancing their social support networks and overall well-being. Tailoring the workshops to address the specific needs and challenges faced by this demographic can maximize their effectiveness. Additionally, integrating these workshops into broader support programs could provide a holistic approach to improving mental health and social support among housewives. Collaboration between healthcare providers, community organizations, and policymakers is essential to facilitate the widespread implementation and accessibility of such interventions.

Authors' Contributions

Authors contributed equally to this article.

Declaration

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In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

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