

A COMPARATIVE STUDY ON THE IMPACT OF SOCIAL SUPPORT AND ACADEMIC SELF-EFFICACY ON UNDERGRADUATE PSYCHOLOGY STUDENTS' STRESS LEVEL AND COPING MECHANISMS

Adekunle Yemi Akeredolu^{1*}, Sulaiman Olanrewaju Adebayo², Busayo Mary Adekola³, Olugbenga David Dada⁴ & Femi Raphael Oluwajuyitan⁵

^{1,2,3,5}Department of Psychology and Behavioural Studies, Ekiti State University, Ado-Ekiti, Nigeria

⁴Department of Psychology, Federal University, Oye-Ekiti, Nigeria

*adekunleakeredolupsy@gmail.com

ABSTRACT: Psychology students increasingly report high stress levels and difficulties adopting effective coping strategies, raising concerns about factors that either buffer or intensify this stress. This necessitated examining the relationships among social support, academic self-efficacy, stress levels, and coping mechanisms among undergraduate psychology students at Ekiti State University (EKSU) and Federal University Oye-Ekiti (FUOYE). A total of 190 students (81 males, 109 females) participated, with 104 from EKSU and 86 from FUOYE. Correlation analysis indicated that students with higher academic self-efficacy experience lower stress levels ($r = -0.21$, $p < .01$), avoidant coping strategies showed a positive correlation with stress levels ($r = 0.22$, $p < .01$), and emotion-focused coping was positively associated with stress ($r = 0.16$, $p < .05$). Social support from family, friends, and significant others was positively correlated with both emotion-focused and problem-focused coping mechanisms. Regression analyses revealed that social support significantly predicted emotion-focused ($\beta = 0.22$, $p < .01$) and problem-focused ($\beta = 0.28$, $p < .01$) coping strategies. Conversely, academic self-efficacy negatively predicted avoidant coping ($\beta = -0.31$, $p < .01$). Stress levels also significantly predicted both avoidant ($\beta = 0.16$, $p < .05$) and emotion-focused coping ($\beta = 0.16$, $p < .05$). Mediation analysis revealed that academic self-efficacy and stress partially mediated the relationship between social support and coping mechanisms by reducing the direct effect of social support after being severally introduced to the model as mediators. A Multivariate Analysis of Variance (MANOVA) showed that neither academic level ($F(1, 186) = 0.02$, $p > .05$) nor institution ($F(1, 186) = 265$, $p > .05$) produced a significant main effect on these variables. Findings suggest that interventions that enhance academic self-efficacy and social support networks could effectively help students manage stress and adopt more adaptive coping mechanisms.

Keywords: Social Support, Academic Self-Efficacy, Stress, Coping Mechanism

INTRODUCTION

The academic journey of undergraduate students is often characterized by multiple stressors, such as academic workload, social pressures, financial concerns, and personal issues, which can negatively affect their mental health and academic performance (Ross, Niebling, & Heckert, 1999; Misra et al., 2020). Undergraduate students experience academic and social obstacles during their time in higher education. These stressors often interact rather than operate in isolation, for example, social support can enhance self-efficacy, while strong coping skills may buffer the impact of stress yet many studies examine them separately, leaving gaps in understanding their combined effect on student resilience (Rethorst & Trivedi, 2013), and research consistently shows that students who lack adequate coping resources are more vulnerable to heightened stress and poorer academic outcomes.

Effectively managing stress is crucial for maintaining mental health, ensuring academic success, and promoting overall well-being among students (Dyson & Renk, 2006). Understanding the factors that contribute to effective stress management among undergraduate students is essential to support their overall well-being and academic success. Existing literature highlights that stress is shaped by several interrelated factors, particularly self-efficacy, social support, and the coping strategies students adopt (Bandura, 1997; Cohen & Wills, 1985; Lazarus & Folkman, 1984; Rethorst). More recent evidence reinforces these relationships, showing that higher academic self-efficacy predicts better coping and reduced stress among undergraduates (Wang & Eccles, 2021), while strong social support systems promote resilience and emotional stability (Khan et al., 2023).

Psychology students represent a distinctive population for studying stress levels, social support, and coping mechanisms. Their academic exposure to psychological theories of stress, coping, and mental health may influence how they understand and apply coping strategies, compared with students in other disciplines. However, evidence suggests that theoretical knowledge does not always translate into effective stress management, especially at higher academic levels, where workloads intensify, such as at the 400 level, where research projects and practicum requirements contribute to increased pressure. Examining their stress levels and coping mechanisms at different academic stages offers valuable insights into how psychological knowledge interacts with real-life academic demands.

Stress

Stress can be defined as a physical, mental, or emotional strain or tension resulting from adverse or demanding circumstances (Lazarus, 1966; Selye, 1956). It is the body's response to any perceived threat, challenge, or demand that disrupts the normal state of balance (homeostasis) and can manifest in psychological, physiological, or behavioral changes (Cohen et al., 1986; Lazarus & Folkman, 1984; Pearlin, 1989).

Stress can arise from a variety of sources, including academic workload, financial difficulties, interpersonal conflicts, health concerns, and major life transitions. Among university students, academic-related stress is particularly prevalent, with evidence indicating that many undergraduates

experience heightened stress due to exams, assignments, and research requirements (Eisenberg et al., 2021; Alqahtani et al., 2022).

There are three main types of stress (Selye 1956, 1974), they are;

- Acute stress: Short-term stress that arises in response to an immediate threat or challenge, often resolved quickly.
- Episodic acute stress: Recurring episodes of acute stress, typically experienced by individuals who frequently face high-pressure situations.
- Chronic stress: Long-term, persistent stress resulting from ongoing adverse conditions, which can have detrimental effects on physical and mental health.

Stress Level

Stress level refers to the degree or intensity of stress an individual experiences, either in a specific situation or as a general tendency. People's stress levels can vary depending on their unique circumstances, coping skills, and resilience. High stress levels, particularly chronic stress, can lead to various adverse outcomes, such as physical health problems (e.g., heart disease, digestive issues), mental health issues (e.g., depression, anxiety), and impaired cognitive functioning (e.g., concentration and memory problems), as indicated by research (McEwen, 2008; Kemeny, 2003; Juruena et al., 2020). It is essential to recognize and manage stress effectively to maintain a balanced lifestyle and promote overall well-being. Among undergraduate students, stress levels are of particular concern because they directly influence academic performance, psychological well-being, and overall quality of life (Ross et al., 2020; Eisenberg et al., 2021). Recent research indicates that persistent high stress among students can undermine learning outcomes, increase the risk of burnout, and reduce resilience (Wang et al., 2021; Khan et al., 2023). Effectively assessing and understanding students' stress levels is therefore essential for developing strategies that enhance coping, promote mental health, and support academic success.

Coping Mechanisms

Coping mechanisms refer to the strategies, techniques, or actions that individuals employ to manage, tolerate, or reduce the adverse effects of stress (Lazarus & Folkman, 1984; Carver et al., 1989; Compas et al., 2017). They also categorize coping mechanisms into types, such as problem-focused, emotion-focused, social, and avoidance coping, among others.

They are;

- Problem-focused coping
- Emotion-focused coping
- Social coping
- Avoidance coping

These mechanisms can be conscious or unconscious. Effective coping strategies can enhance resilience, reduce stress, and improve overall quality of life. However, it is important to note that

not all coping mechanisms are equally effective, and some can be maladaptive if they impair functioning, relationships, or personal growth.

Social Support

In this study, social support refers to the perceived availability and adequacy of these forms of support in the context of undergraduate students' academic and personal lives. Social support refers to the network of relationships and interactions with friends, family, and community that provide individuals with emotional, informational, or instrumental resources to cope with stress, adversity, or challenging life events (Cohen et al., 2000; Sarason et al., 1991; Thoits, 2011). It encompasses the various types of aid and encouragement that people receive from their social network to enhance their well-being and facilitate personal growth.

Social support can be classified into several types (Sarason et al., 1991; Thoits, 2011):

- Emotional support
- Instrumental support
- Informational support
- Appraisal support

Individuals with strong social support networks are more likely to cope effectively with adversity and enjoy better health outcomes. Social support has been associated with positive mental health outcomes among undergraduate students, such as reduced anxiety and depression symptoms (Wang et al., 2021).

Academic Self-Efficacy

Academic self-efficacy encompasses students' perceived competence in various academic domains, such as problem-solving, critical thinking, time management, and goal setting. Academic self-efficacy refers to students' beliefs in their ability to successfully perform academic tasks and manage academic challenges across domains such as problem-solving, critical thinking, time management, and goal setting (Bandura, 1997; Chemers et al., 2001). It is a key factor influencing how students perceive and respond to stress, as those with higher self-efficacy are more likely to approach challenges confidently and persist in the face of difficulties.

Studies have shown that students with high academic self-efficacy tend to experience lower stress levels and employ more effective coping strategies, such as problem-solving and seeking social support (Ahmadi et al., 2020). Conversely, low academic self-efficacy has been linked to increased stress and maladaptive coping strategies, including avoidance and procrastination (Klassen & Usher, 2010). Some Nigerian studies suggest that academic or general self-efficacy may help students better cope with academic stress or related pressures (e.g. substance use, general stress response) although empirical evidence is still limited, especially for senior-level psychology undergraduates.

Academic self-efficacy, a concept introduced by Albert Bandura (1997), comprises several dimensions, which include;

- Task-specific self-efficacy
- Academic planning and organization
- Problem-solving and decision-making
- Academic communication and collaboration
- Academic self-regulation:

These dimensions are interrelated and influence students' academic performance, motivation, and persistence (Zimmerman, 2000; Schunk & Pajares, 2009).

Research Hypotheses

1. There will be a significant relationship among social support, academic self-efficacy, stress level, and coping mechanisms.
2. Social support, Academic self-efficacy, and Stress level will significantly individually and jointly predict coping mechanisms among psychology students.
3. Academic self-efficacy will significantly mediate the relationship between social support and coping mechanisms.
4. Stress level will significantly mediate the relationship between social support and coping mechanisms
5. There will be significant main and interacting effects of academic level and institution on stress level and coping mechanisms.

Statement of the Problem

In recent years, the mental health and well-being of undergraduate students have become increasingly relevant topics within higher education. Undergraduates often experience significant stress due to academic demands, financial pressures, social dynamics, and personal challenges (Dyson & Renk, 2006). Although previous studies have examined stress and coping in university populations, there is limited empirical evidence on how social support and academic self-efficacy jointly influence stress levels and coping mechanisms, specifically among psychology students, who are often exposed to high academic expectations and emotionally demanding course content. Therefore, there is a gap in understanding how these factors interact to shape students' ability to manage academic and emotional challenges.

This study examines the relationships among social support, academic self-efficacy, stress levels, and coping mechanisms among psychology students, with particular attention to how these factors predict coping and how stress and academic self-efficacy mediate these relationships.

The study's general purpose is multifaceted and encompasses several objectives:

1. To assess the levels of stress experienced by undergraduate psychology students

2. To identify the types and patterns of coping mechanisms available to undergraduate psychology students
3. To investigate the relations among coping mechanisms, stress levels, academic self-efficacy, and social support
4. To determine the predictive power of academic self-efficacy on the stress levels and coping mechanisms of psychology undergraduates
5. To explore the predictive power of social support on the stress levels and coping mechanisms of undergraduate psychology students
6. To examine the individual influences of social support on stress and coping mechanisms
7. To examine the joint influences of academic self-efficacy and social support on stress and coping mechanisms
8. To evaluate the mediating role of social support in the relationship between academic self-efficacy, stress, and coping mechanisms
9. To contribute to the existing body of knowledge and inform future research

The study comprehensively examines the intricate interconnections between the psychological factors that influence students' stress management and guides the development of effective support interventions.

METHODS

Research Design

The research adopted a survey research design, which is appropriate for examining the relationships among social support, academic self-efficacy, stress levels, and coping mechanisms among undergraduate psychology students. Data obtained from the field were input into Microsoft Excel and analyzed using the Statistical Package for the Social Sciences (SPSS). Hypotheses were tested using appropriate statistical methods: the Correlation statistical method was used to test hypothesis one, multiple regression analysis was used for hypothesis two, hierarchical regression was used for hypotheses three and four, and multivariate ANOVA (MANOVA) was used for hypothesis five. For the hierarchical regression analyses, variables were entered in blocks to examine the mediating effects of academic self-efficacy and stress levels on the relationship between social support and coping mechanisms.

Research Settings

This research was conducted among undergraduates in two Nigerian universities: Ekiti State University, Ado Ekiti (EKSU), and Federal University of Oye Ekiti (FUOYE), specifically targeting 200L and 400L psychology students. These institutions were selected because they offer psychology programs, allowing the study to examine the influence of social support and academic self-efficacy on stress levels and coping mechanisms among psychology students. Data collection occurred within campus settings, including lecture halls and libraries, during regular academic sessions to minimize disruption. The focus on the Psychology department allowed for the investigation of whether students with academic training in psychological concepts experience stress differently across academic levels. It was hypothesized that 400L students may experience

higher stress due to the demands of complex assignments and graduation preparation, while 200L students may not yet encounter similar academic pressures.

Research Participants

The population consisted of undergraduate psychology students in Ekiti State. A total of 300 students were recruited using stratified random sampling to ensure representation across institutions, academic levels, gender, and age. Strata were formed first by institution (EKSU and FUOYE) and then by level (200L and 400L), with 75 participants targeted per stratum. Questionnaires were distributed as follows: 150 per university (75 per level). At FUOYE, 97 questionnaires were retrieved due to limited class sizes, and at EKSU, 101 were returned, yielding 198 responses. After removing eight incomplete responses, 190 questionnaires were analyzed. Participants were reminded of confidentiality to reduce social desirability effects.

Variables of the Study

Independent Variables:

- Social support: The perceived availability of emotional, instrumental, informational, and companionship support from peers, family, and significant others.
- Academic self-efficacy: The belief in one's ability to successfully perform and manage academic tasks.

Dependent Variables:

- Stress level: The degree of stress experienced by undergraduate students, measured in relation to academic workload, time pressure, and other educational stressors.
- Coping mechanisms: The strategies employed by students to manage and adapt to stressors. These may include problem-focused, emotion-focused, or avoidance-oriented coping techniques.

Moderating Variable

- Level of Study: This refers to the academic level of the participants, specifically 200-level and 400-level students. The level of study is examined as a moderating variable that could influence the relationship between social support, academic self-efficacy, stress levels, and coping mechanisms.

Research Instruments

Data were collected using four validated scales, each previously tested for reliability and validity. They include:

1. ***Multidimensional Scale of Perceived Social Support (MSPSS):*** The Multidimensional Scale of Perceived Social Support (MSPSS) was developed by Zimet, Dahlem, Zimet, and

Farley in 1988. The scale consists of 12 items. The internal consistency of the scale was established using Cronbach's alpha of 0.88, indicating high reliability. In terms of validity, the Multidimensional Scale of Perceived Social Support (MSPSS) has demonstrated strong psychometric properties across various studies. Factor analysis has consistently confirmed its three-factor structure (Family, Friends, and Significant Others), providing evidence of its construct validity. Additionally, the MSPSS exhibits concurrent validity, as it correlates negatively with stress, anxiety, and depression, while showing positive correlations with overall well-being. The scale has been extensively validated across diverse populations and cultural settings, reinforcing its cross-cultural validity and applicability in different contexts. The scale has previously been used with Nigerian student populations and has shown acceptable reliability (Ogunsola et al., 2020). This scale was scored on a 7-point Likert scale ranging from "Very Strongly Disagree" to "Very Strongly Agree".

2. **Academic Self-Efficacy Scale:** The Academic Self-Efficacy Scale was developed by Abdul Gafoor K. and P. Muhammed Ashraf in 2006. The scale consists of 40 items, divided into 20 positive and 20 negative items. Internal consistency was assessed using Cronbach's alpha, which yielded a value of 0.85. The content validity of this scale was assured through the experts' judgement of face validity. Nigerian psychology lecturers reviewed the items to ensure cultural and educational relevance. The scale is scored on a 5-point Likert scale, ranging from exactly true to exactly false, in which 20 negative items (2,4,6,8,10,12,13,15,17,18,20,22,23,25,27,29,31,33,37, and 39) are reversed scored.
3. **Perceived Stress Scale:** The Perceived Stress Scale (PSS), designed by Cohen, Kamarck, and Mermelstein (1983). The scale consists of 10 items, six negative items, and four positive items. Internal consistency was assessed using Cronbach's alpha, with values ranging from 0.74 to 0.91 across versions and populations. The construct validity of the PSS has been supported through factor analysis, demonstrating that it accurately measures perceived stress. Additionally, the scale has demonstrated concurrent validity, as it strongly correlates with psychological distress, depression, and anxiety. Also, its predictive validity has been confirmed, as PSS scores have been found to predict mental health outcomes and coping abilities. The PSS is scored on a 5-point Likert scale, ranging from "Never" to "Almost always," in which reverse-scored items are present. For the PSS version used, the reverse-scored items are 4, 5, 7, and 8.
4. **Brief COPE Inventory:** The Brief COPE Inventory was developed by Charles S. Carver in 1997. The scale consists of 28 items, divided into 14 subscales, each with two items. Internal consistency was assessed using Cronbach's alpha, with subscale values ranging from 0.50 to 0.90 across samples. The construct validity of the Brief COPE has been established through research confirming that it effectively differentiates between various coping strategies. In terms of validity, the construct validity of the Brief COPE Inventory has been established through research confirming that it effectively differentiates between various coping strategies (Carver, 1997). The scale also demonstrates concurrent validity, as different subscales correlate with stress, depression, and psychological resilience (Meyer, 2001). Furthermore, its predictive validity has been supported by studies showing that different coping styles predict stress outcomes and adaptation to life challenges (Cooper, Katona, Orrell, & Livingston, 2008). The scale is scored on a 4-point Likert scale, ranging from 1 (I haven't been doing this at all) to 4 (I've been doing this a lot). The Brief COPE does not specifically include reverse-scored items.

Procedure

A total of 300 copies of questionnaires were administered personally by the researcher and a 400-level psychology student at FUOYE, who had been trained in ethical procedures, research objectives, and questionnaire administration. The research assistant was selected for her academic experience and familiarity with research methodologies, data collection, and ethical considerations in psychological studies. The background provided her with the necessary skills to effectively administer questionnaires, guide participants, and ensure adherence to ethical standards. Additionally, the research assistant's status as a senior student in the department helped facilitate rapport with participants, increasing response rates and ensuring more accurate data collection. Before administering the questionnaires, the research assistant was thoroughly briefed on the study, including its objectives, ethical guidelines, and the distribution of questionnaires across the different levels. Participants were briefed on study objectives, assured of confidentiality, and provided informed consent before completing questionnaires. After obtaining their informed consent, the questionnaires were distributed accordingly in lecture halls and libraries to minimize disruptions. Participants were guided through the process to ensure clarity in their responses.

Out of the 300 distributed questionnaires, 198 were returned, with 190 valid responses used for analysis. The remaining unfilled or incomplete questionnaires were regarded as void and subsequently discarded.

RESULTS

Table 1. Distribution of socio-demographic data

N = 190	n	%
Gender		
Male	81	42.6
Female	109	57.4
Institution		
EKSU	104	54.7
FUOYE	86	45.3
Level		
200 level	84	44.2
400 level	106	55.8

The sample for this study consists of 81 male students (42.6%) and 109 female students (57.4%). 104 students were selected from EKSU, and 86 from FUOYE. Only students from the 200 and 400 levels were selected, 84 and 106, respectively.

Table 2: Means (M), Standard Deviations (SD), and Bivariate Associations Between age and social support, academic-self-efficacy, coping mechanisms, and stress level

Variable	M(SD)	Stress Level
Age (1)	21.52(2.45)	-.05
Significant other (2)	4.55(1.7)	.04
Family (3)	4.52(1.58)	.01
Friends (4)	4.19(1.49)	-.04
Academic self-efficacy (5)	130.78(19.74)	-.21**
Stress-level (6)	23.43(5.22)	-
Avoidant (7)	16.77(4.19)	.22**
Emotion-focused (8)	27.91(6.56)	.16*
Problem-focused (9)	20.31(4.86)	.03

p<.01**, *p*<.05*

Table 2 shows a negative relationship between academic self-efficacy and stress level, $r = -.21$, $p < .01$, indicating that the higher the academic self-efficacy of undergraduate students, the lower their stress level. Conversely, avoidant coping mechanisms were positively related to stress level, $r = .22$, $p < .01$, indicating that increased use of avoidant coping mechanisms is associated with higher stress levels among undergraduates. Also, emotion-focused coping mechanisms were positively related to stress level, $r = .16$, $p < .05$, indicating that the more students rely on emotion-focused coping mechanisms, the greater their stress level.

Table 3: Bivariate correlation matrix of relationships between social support dimensions, academic self-efficacy, stress level, and dimensions of coping mechanisms

Variable	1	2	3	4	5	6	7	8	9
Age (1)	-								
Significant other (2)	.01	-							
Family (3)	-.01	.73**	-						
Friends (4)	-.04	.63**	.66**	-					
Academic self-efficacy (5)	.004	.43**	.33**	.32**	-				
Stress-level (6)	-.05	.04	.01	-.04	-.21**	-			
Avoidant (7)	-.12	-.05	.03	-.08	-.31**	.22**	-		
Emotion-focused (8)	-.05	.19**	.22**	.19**	.06	.16*	.47**	-	
Problem-focused (9)	.01	.34**	.29**	.27**	.25**	.03	.27**	.55**	-

p<.01**, *p*<.05*

Results of correlation analysis showed that there is a negative relationship between academic self-efficacy and stress level ($r = -.21$, $p < .01$). It was further revealed that academic self-efficacy was negatively related to avoidant coping mechanism ($r = -.31$, $p < .01$), while stress level has positive relationship with avoidant coping mechanism ($r = .22$, $p < .01$). The table shows that the social support received from significant others ($r = .19$, $p < .01$, family ($r = .22$, $p < .01$) and friends ($r = .19$, $p < .01$) were positively related to emotion-focused coping mechanisms. Stress level also has a

positive relationship with emotion-focused coping mechanisms ($r=.16$, $p < .05$). Furthermore, the social support received from significant others ($r = .34$, $p < .01$), family ($r=.29$, $p < .01$), and friends ($r = .27$, $p < .01$) positively relates with problem-focused coping mechanisms. Finally, it was revealed that academic self-efficacy has a positive relationship with problem-focused coping mechanisms ($r = .25$, $p < .01$). Therefore, hypothesis one was supported.

Hypothesis 2

Social support, academic self-efficacy, and stress level will have significant individual and joint influences on coping mechanisms among psychology students.

Table 4: Regression analysis showing the influence of social support, academic self-efficacy (ASE) and stress level on coping mechanisms

Variable	Avoidant	Emotion-focused	Problem focused
		β	
Social support	.08	.22**	.28**
ASE	-.31**	-.001	.14
Stress level	.16*	.16*	.06
R^2	.13	.08	.13
F	9.10**	5.10**	9.41**

* $p < .05$, ** $p < .01$

The multiple regression summary table in Table 3 above showed that social support independently predicted emotion-focused coping mechanisms ($\beta = .22$, $p < .01$) and problem-focused coping mechanisms ($\beta = .28$, $p < .01$), but not avoidant coping. This implies that an increase in social support predicts an increase in emotion-focused and problem-focused coping mechanisms. The table also revealed that academic self-efficacy independently predicted avoidant coping mechanisms ($\beta = -.31$, $p < .01$) but did not predict emotion-focused or problem-focused coping mechanisms. This means that an increase in academic self-efficacy predicts a decrease

in avoidant coping mechanisms. In the same vein, stress level also predicted avoidant ($\beta = .16$, $p < .05$) and emotion-focused ($\beta = .16$, $p < .05$) coping mechanisms. This suggests that an increase in stress level predicts an increase in avoidant and emotion-focused coping mechanisms. Results showed that social support, academic self-efficacy, and stress level jointly predicted avoidant [$R^2 = .13$, $F(3, 185) = 9.10$, $p < .01$], emotion-focused [$R^2 = .08$ $F(3, 185) = 5.10$, $p < .01$], and problem-focused [$R^2 = .13$, $F(3, 185) = 9.41$, $p < .01$]. Thus, hypothesis two was supported.

Hypothesis Three

Academic self-efficacy will significantly mediate the relationship between social support and coping mechanisms.

Table 5: Hierarchical regression summary table showing the mediating role of academic self-efficacy in the relationship between social support and coping mechanism.

Predictors	B	β	t	R ²	ΔR ²	F	p
Model 1							
Social support	0.70	.24	3.33**	.055	-	10.91	<.01
Model 2							
Social support	.80	.27	3.49**	.062	.007	6.12	<.01
Academic self-efficacy	-.06	-.09	-1.15				

DV= Coping mechanism

The study employed a two-stage hierarchical approach, introducing predictors in the following order: at stage one, social support contributed significantly to the regression model [$R^2 = .055$ $F(1, 187) = 10.91$, $p < .01$]. In the second stage, adding academic self-efficacy to the model as a mediator accounted for an additional .007% ($\Delta R^2 = .007$) of variation in coping mechanism and this change in R^2 was significant [$F(2, 186) = 6.12$, $p < .01$]. The result showed that academic self-efficacy partially mediated the association between social support and coping mechanisms, reducing the F value (from 10.91 in model 1 to 6.12 in model 2) and thereby reducing the impact of social support on coping mechanisms, although the effect remained significant. Therefore, hypothesis three was supported.

Hypothesis Four

Stress level will significantly mediate the relationship between social support and coping mechanisms

Table 6: Hierarchical regression summary table showing the mediating role of stress level in the relationship between social support and coping mechanism.

Predictors	B	β	t	R ²	ΔR ²	F	p
Model 1							
Social support	0.71	.24	3.39**	.058	-	11.52	<.01
Model 2							
Social support	.71	.24	3.43**	.087	.029	8.87	<.01
Stress level	.41	.17	2.43				

DV= Coping mechanism

To test the mediating role of stress level in the relationship between social support and coping mechanisms, a two-stage hierarchical regression was used. At stage one, social support was found to significantly predict coping mechanism ($\beta = 0.24$, $t = 3.39$, $p < .01$). In the second stage, after adding stress level to the model as a mediator, there was an increase in the R-squared, suggesting that Model 2 is a stronger predictor of coping. This resulted in an additional 2.9% ($\Delta R^2 = .029$) of variation in coping mechanisms, and this change in R^2 was significant, [$F(2, 186) = 8.87$, $p < .01$].

The result showed that stress level did mediate the relationship between social support and coping mechanism, by leading to a decrease in the F value (from 11.52 in model 1 to 8.87 in model two) thereby reducing the impact of social support on coping mechanisms, although the effect remained significant. Therefore, hypothesis four was supported.

Hypothesis 5

Table 7: Multivariate ANOVA Summary Table showing main and interaction effects of academic level and institution on stress level and coping mechanism

Tests of Between-Subjects Effects						
Source	Dependent Variable	Type III Sum of Squares	df	Mean Square	F	Sig.
Corrected Model	Stress level	84.076 ^a	3	28.025	1.028	.381
	COPING MECHANISM	157.855 ^b	3	52.618	.333	.801
Intercept	Stress level	100050.611	1	100050.611	3671.5	<.001
	COPING MECHANISM	778695.841	1	778695.841	4928.4	<.001
Level	Stress level	.449	1	.449	.016	.898
	COPING_MECH_ANISM	.030	1	.030	.000	.989
Institution	Stress level	72.260	1	72.260	2.652	.105
	COPING_MECH_ANISM	72.342	1	72.342	.458	.499
Level * Institution	Stress level	4.075	1	4.075	.150	.699
	COPING_MECHANISM	68.212	1	68.212	.432	.512
Error	Stress level	5068.535	186	27.250		
	COPING_MECH_ANISM	29388.124	186	158.001		
Total	Stress level	109470.000	190			
	COPING_MECH_ANISM	832036.000	190			
Corrected Total	Stress level	5152.611	189			
	COPING MECHANISM	29545.979	189			

Table 6 shows that academic level did not have a significant main effect on stress level $F(1, 186) = .02, p > .05$ and coping mechanism $F(1, 186) = .001, p > .05$. Similarly, the institution affiliation of respondents did not have a main effect on stress level $F(1, 186) = 2.65, p > .05$ and coping mechanism $F(1, 186) = .46, p > .05$. Finally, it was revealed that academic level and institution did

not have a significant interaction effect on stress level and coping mechanism $F (2, 186) = .43$, $p>.05$. Hence, hypothesis Five was not supported.

DISCUSSION

This study examined the impacts of social support and academic self-efficacy on stress levels and coping mechanisms among undergraduate psychology students in Ekiti State, Nigeria. Overall, higher academic self-efficacy was linked to lower stress and reduced reliance on avoidant coping, while social support positively predicted adaptive coping strategies. Stress levels partially mediated the relationship between social support and coping, highlighting the complex interplay among these variables.

The first hypothesis, which predicted a significant relationship among social support, academic self-efficacy, stress level, and coping mechanisms, was confirmed.

Academic Self-Efficacy and Stress

The findings showed that academic self-efficacy negatively correlated with stress levels. Students who believed in their academic abilities perceived challenges as manageable, which reduced feelings of stress and enhanced resilience. This aligns with Bandura's (1997) self-efficacy theory, which emphasizes that belief in one's competence helps individuals interpret challenges as surmountable rather than threatening. Similarly, Chemers, Hu, and Garcia (2001) found that students with higher academic self-efficacy experienced lower stress and were more capable of coping effectively.

Academic Self-Efficacy and Coping Mechanisms

Higher academic self-efficacy was also negatively associated with avoidant coping strategies. This supports Schwarzer and Hallum (2008), who noted that students with confidence in their abilities tend to use proactive problem-solving strategies rather than avoidance. Conversely, students with lower self-efficacy may feel helpless and rely more on avoidance (Lazarus & Folkman, 1984). These findings suggest that interventions aimed at improving students' academic self-efficacy could help them adopt more adaptive coping strategies while reducing stress.

Social Support and Coping Mechanisms

Social support from family, friends, and significant others was positively associated with emotion-focused and problem-focused coping strategies. This is consistent with Cohen and Wills' (1985) stress-buffering hypothesis, which proposes that supportive networks protect individuals from the negative effects of stress. However, excessive reliance on social support may reduce independent coping abilities, potentially leading to emotional dependence (Taylor et al., 2004). Therefore, social support interventions should encourage both connection and self-reliance.

Hypothesis two states that social support, Academic self-efficacy, and Stress level will significantly individually and jointly predict coping mechanisms among undergraduates, which was also supported.

Joint and Independent Effects on Coping

The study revealed that social support independently predicted emotion-focused and problem-focused coping mechanisms but did not predict avoidant coping mechanisms. This aligns with Thoits's (2011) research, which emphasized that social support fosters psychological resilience and encourages adaptive coping strategies.

Also, academic self-efficacy independently predicted avoidant coping but did not predict emotion-focused or problem-focused coping. This is consistent with Pajares's (2002) study, which found that students with higher academic self-efficacy are less likely to engage in avoidance behaviors. However, Zeidner and Matthews (2005) argued that in high-stress environments, even students with strong academic self-efficacy may resort to avoidant coping when overwhelmed.

Stress levels, on the other hand, predicted both avoidant and emotion-focused coping mechanisms. This supports the transactional model of stress by Lazarus and Folkman (1984), which posits that individuals experiencing high stress often adopt either avoidance or emotional regulation strategies. In contrast, Compas et al. (2001) argued that the effectiveness of these strategies depends on the individual's long-term coping capacity, as persistent avoidance can be maladaptive.

Hypothesis three, Academic self-efficacy will significantly mediate the relationship between social support and coping mechanisms, was confirmed.

The fourth hypothesis, which examined whether stress levels mediate the relationship between social support and coping mechanisms, was also supported.

Mediating Effects of Academic Self-Efficacy and Stress

Academic self-efficacy partially mediated the relationship between social support and coping mechanisms. This indicates that supportive networks increase students' confidence in handling academic challenges, which in turn promotes adaptive coping (Luszczynska, Gutiérrez-Doña, & Schwarzer, 2005). However, contrary to these findings, Frydenberg and Lewis (2004) argued that in some cases, students with strong social support may develop a reliance on external validation, weakening the role of self-efficacy as a mediator. Despite this, the majority of studies support the notion that self-efficacy strengthens the positive impact of social support on coping mechanisms.

Similarly, stress levels partially mediated the relationship between social support and coping, showing that higher stress can influence how students utilize support networks (Cohen, Kessler, & Gordon, 1995; Park & Adler, 2003). These mediating effects highlight the need for interventions that target both personal confidence and stress management while fostering supportive environments.

The final hypothesis, which predicted significant main and interaction effects of academic level and institution on stress level and coping mechanisms, was not supported.

Effects of Academic Level and Institution

Contrary to expectations, neither academic level nor institution significantly affected stress levels or coping mechanisms. This contrasts with some previous studies that suggested higher academic levels correspond to increased stress due to academic demands (Misra & Castillo, 2004) and that institutional culture may influence student well-being (Pascarella & Terenzini, 2005). A possible explanation is that students develop coping strategies over time, leading to stable stress levels across levels, and that institutional differences in academic culture may be minimal. However, the results are consistent with Dyson and Renk's (2006) finding that stress levels do not necessarily increase with academic progression, as students develop better coping mechanisms over time. Similarly, institutional affiliation did not significantly affect stress levels and coping mechanisms.

Conclusion

Overall, the study demonstrates that academic self-efficacy and social support are key factors influencing stress and coping among undergraduate psychology students. The results provide evidence for interventions that promote resilience, well-being, and academic success. Future research could examine these relationships longitudinally or in other disciplines to improve generalizability beyond psychology students in Ekiti State.

Recommendations

The findings of this study highlight the significant impact of stress on Psychology students at Ekiti State University (EKSU) and Federal University Oye Ekiti (FUOYE), particularly among those in their 200-level and 400-level. Given the role of social support, academic self-efficacy, and coping mechanisms in managing stress, it is crucial that universities implement strategies to promote a more supportive academic environment. Based on these findings, this study recommends targeted interventions aimed at reducing stress levels while enhancing students' ability to cope effectively with academic pressures.

1. Enhancing Social Support Systems: Universities should establish peer mentoring programs, where 400-level Psychology students provide academic and psychological support to their 200-level counterparts. Such mentorship initiatives would create a sense of community and encourage knowledge-sharing between students at different levels.
2. Strengthening Academic Self-Efficacy: To enhance academic confidence, lecturers should provide structured academic guidance, offering clear expectations and feedback to help students manage their workload effectively.
3. Incorporating Stress Management Initiatives: Universities should evaluate and adjust academic workloads where necessary, ensuring coursework is evenly distributed to minimize excessive pressure, particularly for 400-level students conducting research projects. Encouraging recreational activities, such as psychology-themed wellness

programs—including mindfulness exercises, relaxation techniques, group discussions, and social events—can also help students manage stress effectively.

4. Promoting Adaptive Coping Mechanisms: Universities should implement awareness programs that educate students on the risks associated with avoidant coping mechanisms.
5. Expanding Psychological Counselling Services: Universities should recruit additional licensed psychologists and counsellors to ensure students have access to professional mental health services when needed.

REFERENCES

Abdul Gafoor, K., & Ashraf, P. M. (2006). *Academic self-efficacy scale*. University of Calicut, Kerala, India.

Ahmadi, M., Zulkifli, N. W. M., & Arshad, N. H. S. (2020). Academic self-efficacy, stress, and coping strategies among undergraduate students. *International Journal of Academic Research in Business and Social Sciences*, 10(3), 429-440.

Ahmadi, S., Hassani, M., & Ahmadi, F. (2020). The relationship between academic self-efficacy and coping strategies among university students. *Journal of Education and Health Promotion*, 9(1), 1-6.

Bandura, A. (1997). *Self-efficacy: The exercise of control*. W. H. Freeman and Company.

Carver, C. S., Scheier, M. F., & Weintraub, J. K. (1989). Assessing coping strategies: A theoretically based approach. *Journal of Personality and Social Psychology*, 56(2), 267-283.

Carver, C. S. (1997). You want to measure coping but your protocol's too long: Consider the Brief COPE. *International Journal of Behavioral Medicine*, 4(1), 92-100.

Chemers, M. M., Hu, L., & Garcia, B. F. (2001). Academic self-efficacy and first-year college student performance and adjustment. *Journal of Educational Psychology*, 93(1), 55-64.

Cohen, S., Kamarck, T., & Mermelstein, R. (1983). A global measure of perceived stress. *Journal of Health and Social Behavior*, 24(4), 385-396.

Cohen, S., & Wills, T. A. (1985). Stress, social support, and the buffering hypothesis. *Psychological Bulletin*, 98(2), 310-357.

Cohen, S., Kessler, R. C., & Gordon, L. U. (1986). *Measuring stress: A guide for health and social scientists*. Oxford University Press.

Cohen, S., Kessler, R. C., & Gordon, L. U. (1995). *Strategies for measuring stress in studies of psychiatric and physical disorders*. Oxford University Press.

Cohen, S., Underwood, L. G., & Gottlieb, B. H. (2000). *Social support measurement and intervention: A guide for health and social scientists*. Oxford University Press.

Compas, B. E., Connor-Smith, J. K., Saltzman, H., Thomsen, A. H., & Wadsworth, M. E. (2001). Coping with stress during childhood and adolescence: Problems, progress, and potential in theory and research. *Psychological Bulletin*, 127(1), 87-127.

Compas, B. E., Jaser, S. S., Bettis, A. H., Watson, K. H., Gruhn, M. A., Dunbar, J. P., Dyson, R., & Renk, K. (2006). Freshmen adaptation to university life: Depressive symptoms, stress, and coping. *Journal of Clinical Psychology*, 62(10), 1231-1244.

Eisenberg, D., Lipson, S. K., Heinze, J., Zhou, S., & Walters, K. (2021). *The healthy minds study: 2020–2021 data report*. University of Michigan.

Frydenberg, E., & Lewis, R. (2004). Adolescents least able to cope: How do they respond to their stresses? *British Journal of Guidance & Counselling*, 32(1), 25-37.

Gafoor, A. K., & Ashraf, P. M. (2006). *Academic self-efficacy scale*. University of Calicut.

Juruena, M. F., Bocharova, M., Agustini, B., & Young, A. H. (2020). A translational approach to understanding the psychopathology of stress-related disorders. *Neuroscience & Biobehavioral Reviews*, 115, 292-325.

Kemeny, M. E. (2003). The psychobiology of stress. *Current Directions in Psychological Science*, 12(4), 124-129.

Klassen, R. M., & Usher, E. L. (2010). Self-efficacy in educational settings: Recent research and emerging directions. In T. C. Urdan & S. A. Karabenick (Eds.), *Advances in Motivation and Achievement, Vol. 16: The Decade Ahead: Theoretical Perspectives on Motivation and Achievement* (pp. 1-33). Emerald Group Publishing.

Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. Springer Publishing Company.

Lazarus, R. S. (1966). *Psychological stress and the coping process*. McGraw-Hill.

Luszczynska, A., Gutiérrez-Doña, B., & Schwarzer, R. (2005). General self-efficacy in various domains of human functioning: Evidence from five countries. *International Journal of Psychology*, 40(2), 80-89.

McEwen, B. S. (2008). Central effects of stress hormones in health and disease: Understanding the protective and damaging effects of stress and stress mediators. *European Journal of Pharmacology*, 583(2-3), 174-185.

Misra, R., McKean, M., West, S., & Russo, T. (2000). Academic stress of college students: Comparison of student and faculty perceptions. *College Student Journal*, 34(2), 236-245.

Misra, R., & Castillo, L. G. (2004). Academic stress among college students: Comparison of American and international students. *International Journal of Stress Management*, 11(2), 132-148.

Pajares, F. (2002). Overview of social cognitive theory and of self-efficacy. In *Self-efficacy beliefs in academic contexts*. University of Kentucky Press.

Park, C. L., & Adler, N. E. (2003). Coping style as a predictor of health and well-being across the first year of medical school. *Health Psychology*, 22(6), 627-631.

Pascarella, E. T., & Terenzini, P. T. (2005). *How college affects students: A third decade of research* (Vol. 2). Jossey-Bass.

Pearlin, L. I. (1989). The sociological study of stress. *Journal of Health and Social Behavior*, 30(3), 241-256.

Rethorst, C. D., & Trivedi, M. H. (2013). Evidence-based recommendations for the prescription of exercise for major depressive disorder. *Journal of Psychiatric Practice*, 19(3), 204-212.

Ross, S. E., Niebling, B. C., & Heckert, T. M. (1999). Sources of stress among college students. *College Student Journal*, 33(2), 312-317.

Sarason, I. G., Sarason, B. R., Shearin, E. N., & Pierce, G. R. (1991). A brief measure of social support: Practical and theoretical implications. *Journal of Social and Personal Relationships*, 4(4), 497-510.

Schunk, D. H., & Pajares, F. (2009). Self-efficacy theory. In K. R. Wentzel & A. Wigfield (Eds.), *Handbook of motivation at school* (pp. 35-53). Routledge/Taylor & Francis Group.

Schwarzer, R., & Hallum, S. (2008). Perceived teacher self-efficacy as a predictor of job stress and burnout: Mediation analyses. *Applied Psychology*, 57(s1), 152-171.

Selye, H. (1956). *The stress of life*. McGraw-Hill.

Selye, H. (1974). *Stress without distress*. J. B. Lippincott Company.

Taylor, S. E., Sherman, D. K., Kim, H. S., Jarcho, J., Takagi, K., & Dunagan, M. S. (2004). Culture and social support: Who seeks it and why? *Journal of Personality and Social Psychology*, 87(3), 354-362.

Thoits, P. A. (2011). Mechanisms linking social ties and support to physical and mental health. *Journal of Health and Social Behavior*, 52(2), 145-161.

Wang, J., Mann, F., Lloyd-Evans, B., Ma, R., & Johnson, S. (2021). Associations between loneliness and perceived social support and outcomes of mental health problems: A systematic review. *BMC Psychiatry*, 21(1), 1-20.

Williams, E., & Thigpen, J. C. (2017). Coping, emotion regulation, and psychopathology in childhood and adolescence: A meta-analysis and narrative review. *Psychological Bulletin*, 143(9), 939-991.

Zeidner, M., & Matthews, G. (2005). Evaluation anxiety: Current theory and research. In A. Elliot & C. Dweck (Eds.), *Handbook of competence and motivation* (pp. 141-163). Guilford Press.

Zimet, G. D., Dahlem, N. W., Zimet, S. G., & Farley, G. K. (1988). The Multidimensional Scale of Perceived Social Support. *Journal of Personality Assessment*, 52(1), 30-41.

Zimmerman, B. J. (2000). Self-efficacy: An essential motive to learn. *Contemporary Educational Psychology*, 25(1), 82-91.