

The Mediating Role of Self-Esteem Between Social Support and Willingness to Seek Counselling Among Undergraduates

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Abstract

The study aims to determine the direct effect of social support and self-esteem on willingness to seek counselling among undergraduates. The study also aims to examine the mediating role of self-esteem in the relationship between social support and willingness to seek counselling among undergraduates. Cross-sectional data were collected from a demographic profile questionnaire and three self-report instruments to measure social support, self-concept, and willingness to seek counselling. Data were analysed using descriptive statistics, multiple linear regression, and mediation analysis. A final sample of 295 participants was recruited using stratified random sampling. Social support ($\beta = .070$, p = .268) does not statistically predict individuals' willingness to seek counselling. However, self-esteem (β = .433, p < .001) statistically and significantly predicts individuals' willingness to seek counselling. Findings also show the role of self-esteem as a mediator in the relationship between social support and willingness to seek counselling and the importance of social support and self-esteem in influencing college students to seek professional help. College counsellors, campus managers, and educators who work with college students may use the information provided by this study for planning outreach and intervention programs on campus that encourage students to use a professional helping service.

Keywords: Self-esteem, social support, undergraduates, Malaysia, collectivist

1. Introduction

1.1 Introduce the Problem

The increasing rate of psychological problems faced by college students is worrisome. Based on a study conducted by Oswalt et al. (2020) from 2009 to 2015, there was a significant rise in the number of university students worldwide who suffer from obsessive-compulsive disorder (OCD), anxiety, depression, as well as insomnia. While various studies have proved the number of students seeking professional psychological services is increasing, many affected students still do not reach out for professional help to address their life crisis issues and mental health problems (Harrre et al., 2019).

In some Asian cultures, particularly Malaysia, seeking psychological help from a professional is still considered a stigma (Hanafiah & Bortel, 2015). According to Berry et al. (2020), a broad range of teenagers and young adults in Malaysia suffer from mental health issues and still lack access to professional psychological help. These young people (i.e., university students) face challenges and difficulties throughout their life course, especially during the transition stage from high school to university. Young adulthood is a critical life transition as college students learn to perform their social roles and ascend in their physical and mental development (Committee on Improving the Health, Safety, and Well Being et al., 2015). The transition period offers them an opportunity to discover their emerging adulthood. However, a lack of supportive resources might lead young adults to struggle in education, vocation, relationships, and even physical health (Halfon et. al, 2018), eventually leading them to psychological issues.

With these findings in mind, it is clear the burden should not just be on students. Universities



have a major part to play. It is time to take a hard look at the policies and administrative systems that shape campus counselling services. Members of the university community need policies that truly make it easy for students to get help policies that cut out the red tape, guarantee real confidentiality, and offer flexible schedules that fit a student's hectic life. Just imagine a university where every new student goes through a mandatory mental health orientation. This simple step could normalize help-seeking behavior right from the start (Schomerus et al., 2024). On top of that, the administration of these services is equally important. The effective administration of these services hinges on the certainty that there are enough qualified counsellors on staff who are also receiving the ongoing training they need. When universities get these details right, they create a safe space where students feel secure and confident enough to seek counselling, directly addressing the very barriers we have seen tied to self-esteem (Gask et al., 2023; Tafreshi et al., 2022).

Most research findings identify trends where family members and peers were the primary sources of help rather than mental health professionals, even when the young adults were already receiving professional psychological help (Martinez et al., 2020). Many young adults only seek help from psychological experts when their mental health issues become severe. In contrast, the rest of the studies reported that individuals are keen to count on themselves when there is no available social support (Martinez et al., 2020).

As noted in the review, social support can also play a contrary role, as it often elicits unhelpful advice. One barrier preventing individuals from seeking help is the pre-existing presence of support from social networks, especially family members and peers. Their presence may discourage individuals from seeking professional help as they already provide a protective factor that shields one's experience of sorrow or stress (Heerde & Hemphill, 2018). As a result, individuals will associate with a lower likelihood to utilise professional services, such as psychotherapy and counselling. Conversely, Heerde and Hemphill (2018) note that few studies have found that the presence of family members and peers will increase the probability of seeking professional psychological help in the same study.

Having positive self-esteem is considered one form of socio-emotional support. Self-esteem is a standardised self-evaluation that potentially affects individuals' thoughts, emotions, and behaviours (Coronado-Hij ón, 2017). Therefore, when positively evaluating oneself, one will automatically be in a favourable manner and have high self-esteem. In contrast, individuals with negative appraisals will result in low self-esteem and unfavourably see themselves. Based on the sound, proven evidence from past literature, individuals with poorer self-esteem generally have scant self-confidence, as they lack faith that their issues will be solved (Cui et al., 2021). Consequently, they are less motivated to communicate with mental health professionals because they expect to fail (Cui et al., 2021).

2. Literature Review

2.1 Social Support and Mental Health

According to Fernández-Zabala et al. (2020), a satisfactory social context with strong interpersonal relationships can help in strengthening social skills and emotional adjustment.



In this context, it can predict how individuals perceive themselves in either favourable or unfavourable ways, leading to more superior or poorer adjustment to their surroundings and more or fewer remedies for maintaining their psychological well-being. The above study found that social support depends on peer acceptance or rejection since it significantly influences self-esteem.

A strong social network can ensure one's psychological functioning adequately. According to Erikson (2017), the adolescence stage is influenced by social feedback from parents, teachers, and peers, as adolescents' urge to figure out their identity denotes the challenge of integrating various information about themselves. Few researchers also stressed the significance of social support by people in their surroundings as an essential element of self-esteem (Li et al., 2020) since peer support and self-perceptions are interrelated positively as it is undoubtful empirical evidence (Schulze et al., 2020). Perceived social support refers to the subjective recognition of received support and concerns shown by significant others as cited in Schulze et al. (2020). Furthermore, social support has been acknowledged to influence one's social adaptation, risk prevention and self-esteem (Magro et al., 2019). As previously mentioned, peer relations are crucial during the adolescence and young adulthood periods as their developing self-esteem makes them vulnerable and susceptible to social opinions (Fern ández-Zabala, et. al, 2020).

Based on a review of the theoretical perspective of willingness to seek help by Schnyder et. al. (2017), willingness to seek help happens in three conditions as follows: (1) awareness of the need for assistance from outsiders; (2) preparedness for self-disclosure, and (3) readiness to waive some degree of power to a helper. Past studies on students with psychological problems show the main barrier to seeking professional psychological help (i.e., psychotherapy, counselling) is the fear of being stigmatised by others (Oswalt et al., 2020). In such cases, individuals seek alternatives to solve their problems, including asking for opinions from non-professionals, especially peers and family members (Rasmussen, 2020). Stigma and shame were associated with a low willingness to seek professional help. In the study by Schulze et al. (2020), the findings support the argument regarding the relevance of shame for seeking help and the fear of being stigmatised as being interrelated could lead to developing mental health problems. Schulze et al. (2020) further highlight that negative attitudes like low self-esteem, shyness, and introversion were also associated with high anticipated self-stigma, as indicated by more substantial expectations of shame to reach out for help.

Despite the cultural stigma, individuals who seek help can play a role in encouraging others to do the same. As noted by Cheng et al. (2018), individuals who seek formal help can be role models in their social networks. Similarly, those who took the initiative to help distressed individuals to seek professional help also encouraged this behaviour. Therefore, these social supports serve as an emotional buffer and have a favourable influence on their decision-making in seeking formal help (Jung, von Sternberg & Davis, 2017).

The empirical findings of research literature on social support point out two primary social supports contributing to being well-adjusted: socio-emotional and instrumental support (Martinez et al., 2020). Socio-emotional support can lessen negative emotions and feelings



(Martinez et al., 2020). Socio-emotional supports devote a sense of belongingness, confidence, safety, and freedom. Subsequently, it addresses individuals' needs to affiliate, share, togetherness and fellowship. While instrumental support can also ease tough and challenging situations by satisfying specific psychological needs (Martinez et al., 2020). Similarly, instrumental support develops connectedness and acceptance by the community. Therefore, these supportive interactions allow for greater adaptation in terms of socialisation (Shumaker & Brownell, 1984).

In humanistic counselling approach, Rogers emphasized that a so-called growth-promoting environment required 3 conditions which are genuineness, unconditional positive regard, and empathy (Woodward, 2020) as illustrated in Figure 1. In this context, Rogers asserted that these conditions could nurture one's growth by accepting their flaws and mistakes, showing empathy about how they feel or what had they experienced, and being opened to self-disclose. When one is surrounded by acceptance and supports, one will have psychological security since they have the belief that they will not be rejected even they are failing (Kvalsund, 2003). In fact, a close relationship within a family and intimate friendship, an individual can be spontaneous of being himself without the fear of losing his uniqueness (Ford, 1991).

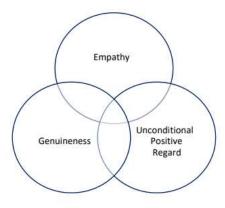


Figure 1. The Model of Growth-Promoting Environment

According to Rogers (1980), a person will develop a more caring attitudes toward themselves once they are accepted and prized by others. In the efforts of achieving a healthy life, parents and teachers could provide them a promoting growth environment as mentioned earlier (Farber et al., 2018). An individual is said to be fully actualized in life is the one who raised in an environment with no biases (Hod & Ben-Zvi, 2018).

2.2 Self-Esteem

Self-esteem mediates social support and mature coping strategies (i.e., help-seeking behaviour) (Cui et al., 2021). Self-esteem refers to how individuals evaluate themselves and their degree of self-acceptance, which results in the development of self-worth (Colmar et. al., 2019). Hypothetically, one's environment can influence perceived support, and these positive evaluations towards an individual can heighten their self-esteem and build confidence



regarding their abilities and endeavours. This will reduce their concern about their ability as the probability of seeking help will increase (Simonsmeier et. al., 2020). The function of self-esteem is to contribute a sense of self-efficacy and self-confidence when dealing with difficulties, empowering them to implement mature coping strategies, especially help-seeking behaviours (Augestad, 2017). In simpler words, individuals with high self-esteem will not feel in the way that seeking help threatens their self-esteem. They trust their ability and judgement to make necessary decisions for each moment (Kuba, 2013). A person who is said to be in a state of self-actualisation is when he reaches his potential and his self-concept, and that his self-esteem and ideal self-overlap (Hyeseni & Hoxha, 2018). Krems et al. (2017) report that seeking help from mental health professionals might cause embarrassment. Furthermore, students who seek counselling and those who do not differ significantly regarding their autonomy and extent of self-efficacy (Sutton, 2020). Interestingly, Kenrick & Krems (2018) found, in contrast, that clients willing to seek help tend to be more introspective, highly self-aware, more intuitive, and less judgmental. Central to this discussion, as Bohart (2013) notes, people possess a fundamental need for both self-esteem and positive regard received from others, as others' perceptions and the value they place on an individual play a primary role in one's overall well-being. Closely linked to this idea, self-concept is defined as one's consistent set of perceptions and beliefs about themselves. In the humanistic approach, the term "self" generally refers to the identity of an individual as a human being, embodying one's inner personality, which is known as the psyche in Freud's theory (Gordon et al., 2020).

2.3 Willingness to Seek Counselling

The theoretical perspective on willingness to seek help identifies three prerequisite conditions: (1) awareness of needing assistance from outsiders, (2) preparedness for self-disclosure, and (3) readiness to waive some degree of power to a helper (Rasmussen, n.d.). However, the primary barrier for students seeking professional psychological help (e.g., psychotherapy, counselling) is the fear of being stigmatized (n.d.), which often causes individuals to seek alternatives like asking opinions from non-professionals, particularly peers and family members (Rasmussen, 2020). This negative association, where stigma and shame lead to low willingness to seek professional help, is validated by findings that shame and the fear of being stigmatized are interrelated factors that can contribute to the development of mental health problems (Schulze et al., 2020). Schulze et al. (2020) further indicate that negative personal attitudes like low self-esteem, shyness, and extreme introversion are associated with high anticipated self-stigma, reflecting stronger expectations of shame when reaching out. In the humanistic counselling approach, Carl Rogers (2017) highlighted that when a person's experience is unacceptable or distorted in their self-image, they enter a state of incongruence (Kuba, 2013). Rogers (2017) believed that every human has the inherent potential to achieve their goals (Purkey, 1970), leading them to focus on the here and now, disclose feelings, and strive for continuous growth (Orkibi & Ronen, 2017) through an inherent self-actualizing tendency (Rogers, 2017). During counselling, clients are in the process of self-actualizing, discovering capabilities, and reducing the distance between their ideal self and real self (Fatima & Khan, 2020) by communicating vulnerable issues, which aligns with the concept



that those who engage with their emotions and abilities are considered fully functioning human beings who trust their intuitions (Rasmussen, n.d.).

The variables measured in this study are social support, self-esteem, and willingness to seek counselling. Figure 2 shows that social support is the independent variable or the input, while willingness to seek counselling is the dependent variable or the output of the study. Simultaneously, self-esteem mediates between social support and willingness to seek counselling. In short, the main focus of this present study is to establish the indirect relationship between social support on the willingness to seek counselling and to see the mediating role of self-esteem. The above conceptual model illustrates the indirect effect of social support on willingness to seek counselling through an intermediary mediator variable, self-esteem, allocated between social support and willingness to seek counselling, as demonstrated in Figure 1. This model is framed based on recent research by Cui et al. (2019), which states the direct effect of social support on willingness to seek counselling was insignificant through the mediator, self-esteem. Similarly, in a previous study by Etikan and Bala (2017), they reported self-esteem is fully mediated in the relationship between social support and willingness to seek counselling.

Current study believe that the self-esteem seems to become a mediating role of social support and willingness to seek counselling, as shown in Figure 2:

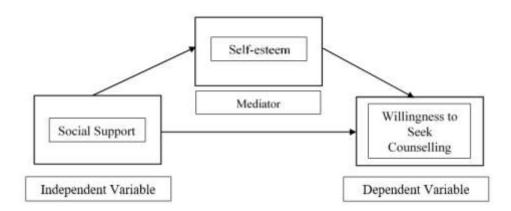


Figure 2. The mediating role of self-esteem between social support and willingness to seek counselling.

Based on the review of theoretical perspective of willingness to seek help by Rasmussen willingness to seek help happens in three conditions as following: (1) awareness of the need assistance from outsiders; (2) preparedness for self-disclosure, and (3) readiness to waive some degree of power to a helper. In the past studies on students with psychological problem, the main barrier of them to seek for professional psychological help (i.e., psychotherapy, counselling) is the fear of being stigmatized by others. In such case, individuals tend to seek for alternatives in order to solve their problems which included asking opinion from non-professionals especially peers and family members Rasmussen (2020). In other words, stigma and shame were associated with low willingness to seek professional help. In the study



by Schulze et. Al (2020), the findings proved that the relevance of shame for seeking help and fear of being stigmatized are interrelated as it could lead to the development of mental health problems. Schulze et al. (2020) further highlight that personal negative attitude such as low self-esteem, shy, and extremely introverted were also associated with high anticipated self-stigma, as indicated by stronger expectations of shame to reach out for help.

In humanistic counselling approach by Carl Rogers (2017), when one's experience is unacceptable to him or herself or is distorted in the self-image is now in incongruence state. Hence, Rogers noted that who is attending counselling is currently in a state of incongruence as their self-perception and their experiences occur discrepancy Kuba (2013). Rogers (2017) believed that every human being has their potential to achieve their goal (Purkey, 1970). This means that the person is aware of the needs to focus on here and now, disclose current feelings, and strive to grow continuously (Orkibi & Ronen, 2017). According to Rogers (2017) every individual has an uncovered tendency of self-actualizing which helps individual to expand new capacities in order to remain well-being and expand sense autonomy. In every counselling session, a client is said to be in a process of self-actualizing while discovering capabilities and experiencing of closer distance between ideal self and real self (Fatima & Khan, 2020) When a person begins to communicate about their issues by showing a vulnerable side of them. According to Rasmussen [37], those who always get in touch with their emotions and abilities are those who are said to be fully functioning as a human being as they believe in their intuitions and will not deny their innermost desires.

2.4 State Hypotheses and Their Correspondence to Research Design

The variables measured in this study are social support, self-esteem, and willingness to seek counselling. Figure 2 shows social support is the independent variable or the input, while willingness to seek counselling is the dependent variable or the output of the study. Simultaneously, self-esteem mediates between social support and willingness to seek counselling. In short, the main focus of this present study is to establish the indirect relationship between social support on the willingness to seek counselling and to see the mediating role of self-esteem. The conceptual model illustrates the indirect effect of social support on willingness to seek counselling through an intermediary mediator variable, self-esteem, allocated between social support and willingness to seek counselling, as demonstrated in Figure 2. This model is framed based on recent research by Cui et al. (2021), which states the direct effect of social support on willingness to seek counselling was insignificant through the mediator, self-esteem. Similarly, in a previous study by Etikan and Bala (2017), they reported self-esteem is fully mediated in the relationship between social support and willingness to seek counselling.

Realising the roles between social support and self-esteem in influencing a person to seek psychological help, the current study examines the direct effect of social support and self-esteem on willingness to seek counselling among undergraduates. The study also examines the mediating role of self-esteem in the relationship between social support and willingness to seek counselling among undergraduates.

This study believe that the self-esteem seems to become a mediating role of social support and



willingness to seek counselling, as clearly shown in Figure 2.

Based on the literature reviewed, the following hypotheses are presented:

H1: Social support does not significantly predict willingness to seek counselling among undergraduates in a public higher education institution in Malaysia.

H2: Self-esteem does not significantly predict willingness to seek counselling among undergraduates in a public higher education institution in Malaysia.

H3: Self-esteem does not mediate between social support and willingness to seek counselling among undergraduates in a public higher education institution in Malaysia.

3. Method

3.1 Research Design

The present study uses quantitative research where the correlational design is applied. A correlational study can reference what extent two or more variables are related (Orkibi & Ronen, 2017). This investigates the degree of indirect and direct relationship between social support, self-esteem, and willingness to seek counselling. Data was collected from the questionnaires and then analysed to determine the indirect effect of social support on willingness to seek counselling through the intermediate self-esteem factor.

Since the data is collected from the selected sample at one point in time; hence, this study is also known as a cross-sectional study. According to Boru (2018), a cross-sectional study is commonly applied to measure the prevalence of the outcome of interest for a given population since a cross-sectional study is comparatively cheap and easy to perform. They distributed a survey using a free online platform to reduce social distance during the outbreak of the COVID-19 pandemic. A set of questionnaires consists of one demographic survey and three self-report instruments to measure social support, self-concept, and willingness to seek counselling.

3.2 Participants

The data collection took place in one public higher education institution in Malaysia. The study population consists of 1,265 students enrolling in various academic programs at the College of Education from the first to final year. Of that number, 386 were males, and 883 were females. The minimum age of participants is 18, whereas the maximum age is above 25. Ethical approval from the university was obtained once the research committee approved the study. Cochran's (1963) formulas have been used to calculate the final sample size in this study. The number adopted in this study is within acceptable standards. Stratified random sampling is implemented to stratify an affiliated party such that the chosen sample is more representative of the population (Etikan & Bala, 2017). Whenever each stratum in a population is crucial to ensure a sample that represents the entire population, stratified random sampling is the most precise sampling technique (Kaliyadan & Kulkarni, 2019). This is because a stratified selection from a desired population will ensure that possible samples from each stratum are equal to be picked. In view of its accuracy, researchers can retrieve



smaller but highly useful sample sizes (Sharma, 2017). The process begins with dividing the targeted population into subgroups or strata. Once the researcher has divided the population, the samples are selected through simple random sampling to ensure each stratum has an equal probability of being chosen. Based on this procedure, several 295 out of 1265 undergraduates were randomly picked.

3.4 Measurement

This study survey consists of four sections. The first section consists of demographic information, followed by the second section, which consists of 53 items of self-report instruments. The instruments are the Multidimensional Scale of Perceived Social Support (MSPSS), Self-Concept Questionnaire (SCQ), and Attitudes Toward Seeking Professional Psychological Help Scale - Short Form (ATSPPH-SF). According to Zimet et. al. (1988), the original English version of MSPSS recorded .88 validity. While according to Ibrahim et al. (2019), MSPSS displayed excellent internal consistency and very good reliability in the context of Malaysia. Ibrahim et al. (2019) reported that MSPSS displayed excellent Cronbach's alpha reliability ranging from .85 to .91 among 176 young adults in Klang Valley in Malaysia. For instance, the results were .87 for the subscale of Family, .85 for the subscale of Friends, and .91 for the subscale of Significant Ones.

According to Addeo et. al. (1994), the construct validity of the original English version of the Self-Concept Questionnaire (SCQ), which is also adopted in this study, displays a Cronbach alpha of .70. Moreover, the study conducted by Zamzur & Yahya (2019) using students in other public higher education institutions, they also reported a high non-clinical reliability range from 0.70 to 0.89 for each subscale, which are .76 for Self-deprecation, .70 for Attractiveness, and .89 for Self-confidence/respect. The internal consistency of the original version of ATSPPH-SF is reported as a Cronbach alpha of .82 by Fischer and Turner in 1995 (Pederson & Vogel, 2007). Whereas the reliability of ATSPPH-SF obtained from samples of 555 students in Malaysia from both public and private universities recorded by Eui and Tan (2019) ranged from .79 to .83 among college students in Malaysia.

3.5 Data Analysis

A series of actions were carried out on the received data to establish, categorise, transform, integrate, and extract data in an applicable output form for upcoming analysis (Albers, 2017). Data analysis involves methods implemented on received data to describe facts, expand explanations and test hypotheses. In performing data analysis, two categories of analysis are involved: descriptive data analysis and inference data analysis. Then, the collected data from the survey will be analysed based on the research questions.

PROCESS Macro Model 4 was performed to answer the research questions. It is applied to examine the relationships of the independent, mediator, and dependent variables. At the end of the data analysis, the mediation analysis quantifies how self-esteem transforms change from a cause (social support) to its effect (willingness to seek counselling). Hence, the direct effect of social support on willingness to seek counselling and the indirect effect of social support on willingness to seek counselling through the mediator, self-esteem, was analysed



using Hayes PROCESS Macro Model 4.

4. Results

4.1 Demographic Findings

The findings included descriptive data for gender, age, race, programmes of study, as well as year of study of 295 respondents which presented in frequency and percentage forms.

Descriptive analysis showed that a total of 88 (29.8%) male students participated in the study, while a total of 207 (70.2%) female students were randomly chosen. There are 4 groups of age range which were "19 and below", "20-21", "22-23", and "24 and above". The 68 participants (23.0%) fall under the category of 19 and below age group. 86 respondents stand from the age of 20-21, which equivalent to 29.2%. While 89 respondents stand from the group of 22-23 age group, which equivalent to 30.2%. Last but not least, the rest of 52 participants were aged from 24 and above, which recorded 17.6% of total respondents.

Since 295 respondents are undergraduates from Faculty of Educational Studies, the population consisted of First Year students to Final Year Students. According to the findings, 68 respondents (23.0%) are currently First Year students; 87 respondents (29.5%) are Second Year students; 92 respondents (31.2%) are Third Year students; and the rest of 48 respondents (16.3%) are Final Year students. The race distribution of 295 respondents. Majority of respondents are Malay, which recorded total of 249 students (84.4%). Then, Chinese and Indian respondents are same in amount which is 15 respondents (5.1%) from each race. Besides that, 9 respondents stand from Sarawak Natives also participated in the study and recorded 3.0% of total respondents. Lastly, 7 respondents stand from Sabah Natives attained 2.4% from the total respondents.

Among 295 undergraduate-respondents from Faculty of Educational Studies, all of them are currently studying from 8 different programmes of study. The findings showed that 36 respondents (12.2%) from Bachelor of Educational in Agricultural Science; 36 respondents (12.2%) from Bachelor Education in Home Science; 36 respondents (12.2%) from Bachelor Education Teacher English as Second Language; 36 respondents (12.2%) from Bachelor of Education in Malay Language; 35 respondents (11.9%) from Bachelor of Education in Guidance and Counselling; 36 respondents (12.2%) from Bachelor of Counselling; and 44 respondents (14.9%) from Bachelor of Science Human Resource Development.

4.2 Research Objective Findings

The following findings are reported based on the research hypothesis. Research Hypothesis 1 examines whether social support significantly predicts willingness to seek counselling, while research Hypothesis 2 examines whether self-esteem significantly predicts willingness to seek counselling. To answer these hypothesis, multiple linear regression analysis was conducted. The model of social support and self-esteem on willingness to seek counselling was statistically significant, F(2, 295) = 34.577, p < .001, and accounted for 18.6% of the variance. Table 1 and Table 2 present the findings of this analysis.



Table 1. Model Summary of Social Support and Self-Esteem on Willingness to Seek Counselling (N=295)

Model	R	R2	. •	SE of the	
			R^2	Estimate	
1	.438	.191	.186	.333	

Table 2. Analysis of Variance of Social Support and Self-Esteem on Willingness to Seek Counselling (N=295)

Model		SS	df	MS	F	p
1	Regression	7.687	2	3.843	34.577	.000
	Residual	32.457	292	.111		
	Total	40.144	295			

Note. SS = sum of squares; df = degrees of freedom; MS = mean square; F = F distribution; p = significant value.

The results show that social support (β = .070, p = .268) does not predict the willingness to seek counselling as significant. Therefore, Hypothesis 1 is accepted. Additionally, it was found that self-esteem (β = .433, p < .001) predicts the willingness to seek counselling is significant. Hence, Hypothesis 2 is rejected. In this case, self-esteem individually contributes meaningful information in predicting willingness to seek counselling. These findings are shown in Table 3.

Table 3. Coefficients of Social Support and Self-Esteem in Predicting Willingness to Seek (N=295)

	Unstandardised		Standardised		
	Coefficients		Coefficients		
	В	SE	β	t	p
(Constant)	.029	.204		.145	.000
Social Support	.004	.019	.070	.222	.268
Self-Esteem	.615	.080	.433	7.684	.000

Note. B = unstandardised regression coefficients; SE standard error; β = standardised regression coefficients; t = sample value of t-test statistic; p = significant value.

Research Hypothesis 3 examines whether self-esteem mediates the relationship between social support and willingness to seek counselling among undergraduates. Hayes' (2018) PROCESS Macro Model, 4 with 10,000 bootstrapping, was used to determine if self-esteem mediated the effect of social support on willingness to seek counselling among undergraduates.

The results demonstrated that both path a and path b of social support on self-esteem (B = .658, SE = .01, p < .001) and self-esteem on willingness to seek counselling (B = .533, SE = .08, p < .001) were significant. Moreover, the direct effect of social support on willingness to seek counselling (path c') was insignificant, B = .042, SE = .08, 95% CI [-.033, .042], p



= .642. In contrast, the indirect effect of social support on willingness to seek counselling was significant, B = .155, SE = .026, 95% CI [.107, .208]. The total effect, or *path c*, of social support on willingness to seek counselling was also significant (B = .567, SE = .08, 95% CI [.018, .095]). Both indirect and total effects were statistically significant based on the 95% confidence intervals since they did not include "0", whereas direct effect was not statistically significant because it included "0" (Hayes, 2018). The fact the indirect effect was significant, whereas the direct effect was insignificant, suggests the study had a full mediation. As a result, Hypothesis 3 is rejected as well.

In path analysis, the decomposition of effects was computed using Alwin and Hauser's (1975) recommended calculation. For simple mediation models, the ratio of the indirect effect to the total effect, and the ratio of the indirect effect to the total effect are the two relevant measurements.

$$P_{M} = \frac{ab}{ab+c'} = \frac{ab}{c} = 1 - \frac{c'}{c} = 1 - \frac{(-.04)}{(-.23)} = 0.826$$

The ratio of the direct effect to the total effect, in which a is the slope linking X to M, b is the conditional slope linking M to Y, c is the total effect of X on Y, and c' is the conditional slope linking X to Y (Alwin & Hauser, 1975). Therefore, self-stigma mediated 82.6% of the total effect of social support on willingness to seek counselling.

$$1 - P_M = 1 - \frac{ab}{ab + c'} = 1 - \frac{ab}{c} = \frac{c'}{c} = \frac{(-.04)}{(-.23)} = 0.174$$

Figure 2 shows regression coefficients for the relationship between social support and willingness to seek counselling as mediated by self-esteem.

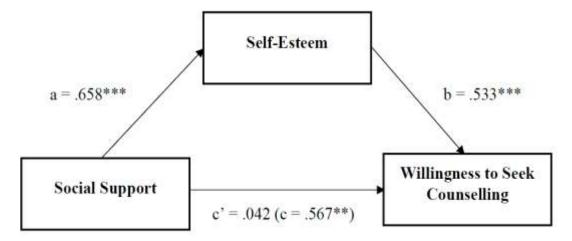


Figure 2: The Formula of Regression Coefficients for the Relationship between Social Support and Willingness To Seek Counselling As Mediated By Self-Esteem



The formula above is the regression coefficients for the relationship between social support and willingness to seek counselling as mediated by self-esteem. The unstandardised regression coefficients of total effect between social support and willingness to seek counselling is in parentheses. **p < .01. ***p < .001.

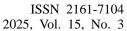
5. Discussion

Based on the research findings, it can be concluded that social support does not significantly predict individuals' willingness to seek counselling. This finding contradicted the findings by Martinez et al. (2020), Cheng et al. (2018), and Jung et al. (2017), as they proposed that social support is a major element that always predicts one's willingness to seek counselling. However, the present findings are similar to those by Heerde and Hemphill (2018), which emphasised that social support could discourage and lessen the likelihood of someone seeking professional psychological help. As mentioned earlier, social support acts as a stress buffer for individuals who are currently distressed. Therefore, there is the possibility that social support has successfully helped individuals to release stress with short-term stressors, as emphasised by Heerde and Hemphill (2018).

Furthermore, some individuals are more comfortable sharing their issues with their family and peers than disclosing them with strangers (Jung et al., 2017). Individuals from low socioeconomic status seeking professional psychological help may consider it unnecessary and perceived that professional help is usually costly and unaffordable (Heerde & Hemphill, 2018). Mental health stigma is a massive barrier to why many people are reluctant to seek help. This suggests mental issues are taboo in the community; Individuals may be discouraged from seeking treatment openly (Jung et al., 2017). Thus, internalising these stigmas is the first step to feeling shame and embarrassment before even taking action to seek psychological help.

In light of the various barriers students face in seeking help, it is clear that a comprehensive, university-wide mental health strategy has moved from being a good idea to an absolute necessity. This strategy needs to be built on solid policies and administrative frameworks designed specifically to break down those obstacles. For example, universities could establish proactive policies that make mental health literacy training mandatory for all faculty and staff, giving them the tools to spot and refer students who are struggling (Bayer et. al, 2023). Beyond that, a truly effective administration would ensure that counselling services are not just well-funded, but also woven smoothly into the daily student experience—maybe through an easy-to-use digital platform for scheduling appointments and finding anonymous support. By championing these policy and administrative shifts, institutions can start building a culture where students feel genuinely safe and supported, directly challenging the very stigmas that so often stop them from getting the help they need (Schomerus et al., 2024); Gask et al., 2023).

There may be more barriers keeping oneself from seeking proper help, such as individuals' self-stigma, public stigma, difficulties in identifying issues, shame, cultural background, beliefs, and a preference for self-reliance (Pace et al., 2018). These factors may directly affect social support and willingness to seek counselling.





The results also show that self-esteem significantly positively influences their willingness to seek counselling. Those with a strong sense of identity would favour getting professional psychiatric care more favourably. Most notably, this conclusion is per the previous study conducted by Cheng et al. (2018), which discovered that self-esteem is a great indicator of help-seeking attitude. In addition, stable self-esteem results towards seeking professional psychological treatment as a predictor of help-seeking attitudes (i.e. intention, willingness) based on the structural model stated by Colmar et al. (2019). This finding is backed up by Amemiya and Wang (2017), who highlighted that an individual's readiness to seek help largely depends on their attitude and that attitudes are directly linked to how they evaluate themselves, positively or negatively. As a result, someone with high self-esteem is likely to be more open about getting professional psychological help.

Surapaneni (2015) supports the conclusion that negative self-perception contributed to a significant variance towards psychological help-seeking attitudes, in which negative self-perception is negatively correlated between social support and willingness to seek counselling. According to the conceptual framework suggested by Surapaneni (2015), the internalisation of socially unfavourable views results in less possibility of help-seeking attitudes. This is consistent with the findings of Cheng et al. (2018), who found that poor self-view significantly predicts attitudes toward seeking mental health care.

Simonsmeier et al. (2020) noted a significant and positive predictive relationship between self-esteem and willingness to seek counselling. In brief, self-esteem can predict one's willingness to seek counselling in a positive direction. Once individuals internalise, they are weak and incompetent (Magaard et al., 2017), they tend to avoid embarrassment, feign feelings of inadequacy, and hide their psychological issues from society (Cui et al., 2021). Their perceptions about their worthlessness and inferiority directly impact their decision to seek psychological help (Cui et al., 2021). Hence, self-perception and self-beliefs enormously impact individuals' help-seeking decisions.

The present study also found that self-esteem is fully mediated by social support and willingness to seek counselling. Cui et al. (2021) conducted a previous study that found similar results, which established that self-esteem is significantly mediated between self-esteem and willingness to seek counselling. Social support was found to be the separate mediator between social support and willingness to seek counselling.

The result that self-esteem completely mediates the link between social support and a willingness to get counselling has serious implications for university policy and administration. This shows us that institutions need to take the lead with initiatives that directly build students' self-esteem as a way to prevent mental health issues. Policies could be designed to promote positive self-perception through campus-wide peer mentorships, workshops, and even academic rules that value growth more than just getting a perfect grade Gask et al, 2023). On the administrative side, universities should invest in training their counsellors to specifically focus on helping students build a stronger sense of self-worth. When a university's programs are intentionally aligned to boost student self-esteem, they give students the confidence to overcome feelings of not being good enough and to get the help



they need, regardless of their social network (Bayer et at, 2023; Tafrishi et al., 2022)

The findings align with Person-Centered Theory, which highlights the influence of supportive environments on the development of one's self-esteem. In turn, this impacts an individual's attitude about getting psychological help. Farber et al. (2019) also stated that self-esteem predicts help-seeking attitudes. Cui et al. (2021) stated that the direct effect of social support on willingness to seek counselling becomes insignificant when the mediator, self-esteem, is in charge. Full mediation by self-esteem was recognised between social support and willingness to seek counselling. Moreover, Etikan and Bala (2017) also reported consistent results by stating that individuals' self-esteem is fully mediated between social support and willingness to seek counselling. In other words, psychological and material resources provided by a social network provides the experience of self-esteem, which finally impacts one's willingness to seek counselling.

The current results can be interpreted as if the individual is cultivated in a supportive environment where they could always turn to trusted ones anytime. Their sense of self is linked to favourable self-evaluation. The process of developing one's conception of self is varied as different types of social background result in various personalities (Tembo et al., 2017). In sum, support from social networks has always influenced how individuals value themselves, which in turn may impact help-seeking attitudes.

5.1 Conclusion

The findings have implications for theory and practice. The study was guided by Person-Centered Theory by Carl Rogers, which emphasises that individuals with high self-esteem have more social support and that eventually affects one's self-esteem. The theory fits into a multicultural setting like Malaysia because it reflects the phenomenon of help-seeking attitudes among Malaysian undergraduate students. The findings may be used as a guide to develop a campus reach-out program. It is hoped that students may gain awareness of the importance of seeking professional psychological help and eventually lessen the stigma of those reaching out for help.

Furthermore, the results validate existing theoretical literature and fill the knowledge gap in Malaysian society regarding how social support contributes to one's self-esteem, which might later predict their willingness to seek professional psychological help. Social support predicted self-esteem significantly, and self-esteem substantially anticipated the desire to seek counselling. As shown in the present hypothesis, it will eventually alter an individual's attitudes and inclinations to seek professional treatment, as stated in the applied theory.

The present study also demonstrates the need for university educators and counsellors to collaborate in helping students who might have mental health issues. Educators play a great role in identifying the stress experienced by students and their need for professional psychological help. Educators should be more sensitive and alert if students show symptoms of psychological distress and take early action to help those students. Good cooperation between educators and counsellors will help students to obtain psychological help from professionals. University management may also play a role; they may email students and



inform them about the university's availability of mental health support. A text-based crisis line might be created to reach out to all students, as help is merely a few clicks away.

Ultimately, the job of creating a supportive mental health environment falls on university administration and leadership. It is not enough to simply offer services; institutions have to shift from just reacting to problems to taking a proactive, integrated approach. This means policy has to be at the heart of the solution, ensuring mental health is woven into the very fabric of campus life, from academic rules to residential support. By treating mental health as a top priority, not an afterthought, and by strategically putting resources and administrative oversight in place, universities can do more than just handle a crisis. They can genuinely build a resilient, supportive community where students feel empowered to seek help and thrive, creating a culture of well-being that benefits everyone.

5.2 Limitations and Further Study

While the study provides information on the mediating role of self-esteem between social support and willingness to seek psychological help, it is also essential to note its limitations. First, the study used a self-report questionnaire to gather the data. Self-report questionnaires related to traits, personal beliefs, attitudes and behaviours are highly context dependent. There may be external factors that may affect the rating of willingness to seek help. The second limitation is on the participants' recruitment. Although stratified random sampling was employed, errors may occur when individuals fall into multiple strata or subgroups. This overlap could create bias, as participants who belong to more than one stratum may have a higher chance of selection than those who belong to only one. Consequently, this may result in misrepresentation or a false reflection of the target population.

The third limitation is that all the analysed data were self-reported, which makes the findings susceptible to biases such as inaccurate self-perceptions or social desirability effects. These factors may limit the validity and reliability of the results. Finally, the present study delimits data on undergraduates recruited from a college in a public higher education institution. As such, generalisation should be done cautiously because the findings are limited to such a population.

Future studies may also consider a larger sample size in the same institutions or other institutions based on the limitations. Future studies may also consider using a mixed method incorporating a qualitative approach to understand better the issue being studied. Future research could also replicate these findings on different populations from diverse age groups and backgrounds, which may provide a different outcome.

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