

Relationship between Career Self-Efficacy and Social Support among Adolescents in a Malaysian Shelter Home

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Abstract

Adolescents residing in welfare institutions such as shelter home face various developmental challenges, including limited access to career guidance and social support, which may affect their career decision-making processes. Guided by the Social Cognitive Career Theory (SCCT), this study examined the relationship between career self-efficacy and social support among adolescents living in shelter home under the supervision of the Malaysian Department of Social Welfare. A total of 79 adolescents aged 10 to 17 participated in the study. The instruments used were the Career Decision-Making Self-Efficacy Scale–Short Form (CDMSE-SF) and the Multidimensional Scale of Perceived Social Support (MSPSS). Findings revealed that participants' career self-efficacy was initially at a moderate level but improved to a high level following the implementation of a structured career development program. Furthermore, social support received from family, friends, and significant others showed a positive and significant correlation with career self-efficacy. These results underscore the importance of structured career development interventions and the strengthening of social support systems in enhancing career confidence and psychological well-being among adolescents in welfare institutions. It is recommended that future research adopt experimental designs to evaluate the impact of interventions on career self-efficacy and social support.

Keywords: Career Self-Efficacy, Social Support, Adolescents, Shelter Home, Welfare Institution

Introduction

Adolescence represents a formative phase in human development, marked by rapid transitions across biological, cognitive, emotional, and social domains. During this period, psychological well-being plays a pivotal role in determining the quality of developmental outcomes and long-term adjustment (Keyes, 2006; Santrock, 2021). Defined by Ryff (1989) as

encompassing dimensions such as self-acceptance, autonomy, environmental mastery, purpose in life, positive relationships, and personal growth, psychological well-being has been linked to academic success, emotional regulation, and resilience (Tennant et al., 2007; Diener et al., 2010). However, the attainment of such well-being is highly dependent on the stability and quality of an adolescent's social environment a condition often compromised in the lives of adolescents placed in institutional care.

Adolescents residing in welfare institutions, including children's homes and state care facilities, often experience multiple and cumulative disadvantages, including early exposure to neglect, abuse, family separation, social stigma, and inconsistent caregiving (Stein, 2006; Browne, 2009). In Malaysia, the Department of Social Welfare reported an increasing number of children under institutional care due to family dysfunction, abandonment, and socio-economic hardship (JKM, 2020). These adolescents frequently lack the protective factors—such as parental support, stable schooling, and positive community engagement—that are essential for healthy development. Recent findings by Zolkefli et al. (2023) show that institutionalised Malaysian adolescents exhibit significantly lower levels of emotional support and self-efficacy compared to their non-institutionalised peers, resulting in compromised well-being and future orientation.

Within the framework of career development, career self-efficacy has emerged as a significant predictor of adolescents' ability to explore options, set career goals, and navigate complex decisions (Betz & Hackett, 1981; Bandura, 1997). Defined as one's belief in their capacity to successfully manage career-related tasks, career self-efficacy influences not only planning and exploration but also resilience in the face of career-related setbacks (Lent et al., 2002). Recent research by Guan et al. (2023) revealed that adolescents with higher levels of career self-efficacy demonstrate better goal-setting behaviours and stronger motivation to pursue post-secondary education or employment pathways. However, such findings are predominantly based on general or school-going populations, with little attention paid to institutionalised youth, whose confidence in career-related abilities may be undermined by disrupted schooling, limited role models, and lower access to career guidance services.

Another critical factor influencing adolescent well-being and development is perceived social support, the subjective perception that one is valued and cared for by others (Zimet et al., 1988). Numerous studies highlight its role as a buffer against stress, promoting both emotional resilience and psychological adjustment (Chao, 2012; Uchino, 2009). In the Malaysian context, Jaafar et al. (2021) found that adolescents with higher levels of perceived social support reported greater life satisfaction and reduced depressive symptoms. However, in institutional settings, the nature and consistency of social support may be fragmented, transient, and often professionalised rather than familial or emotionally bonded. A recent mixed-methods study by Ismail et al. (2022) revealed that adolescents in institutional care perceived staff support as inconsistent, with emotional needs often unmet, limiting the protective role such support can play in their development.

Despite the established importance of career self-efficacy and perceived social support in promoting psychological well-being, few studies have examined the intersection of these variables among adolescents in institutional care. Research that does exist often focuses on each variable in isolation, lacks cultural specificity, or draws on samples from formal

education settings, thereby excluding one of the most vulnerable adolescent populations. More critically, the Malaysian context is underrepresented in the global literature on adolescent mental health and career development within care systems.

In summary, there is a critical gap in the current literature: while the roles of psychological well-being, career self-efficacy, and social support are well-established individually, their interrelationships remain underexplored within the institutionalised adolescent population in Malaysia. This study seeks to address this gap by investigating how perceived social support and career self-efficacy relate to psychological well-being in this context, offering insights for theory, practice, and policy on adolescent development under institutional care.

Career Self-Efficacy

Based on Social Cognitive Theory, career self-efficacy is defined as an individual's confidence in managing and applying cognitive, behavioral, and social skills to achieve desired career goals (Bandura, 1986). Career self-efficacy plays a significant role throughout the career decision-making process (Komarraju et al., 2013; Kristin, 2009; Sidiropoulou-Dimakakou et al., 2012). Fundamentally, individuals with low levels of career self-efficacy are more vulnerable to developing dysfunctional career thinking patterns. They often lack confidence in making career decisions and tend to avoid engaging in any career-related activities (Andrews et al., 2014; Komarraju et al., 2013). Conversely, individuals with high levels of career self-efficacy are more inclined to explore career options and complete career-related tasks with ease (Nilforooshan, 2020). They can choose suitable careers, taking responsibility for their decisions, and actively participating in various career programs and training to prepare themselves for the workforce (Andrews et al., 2014; Sidiropoulou-Dimakakou et al., 2012; Kristin, 2009).

Social Support

Social support refers to emotional, instrumental, informational, and appraisal support received from sources such as family, peers, romantic partners/significant others, teachers, or institutions. One of the most widely used instruments for measuring social support in developmental psychology research is the Multidimensional Scale of Perceived Social Support (MSPSS)—a 12-item scale that assesses perceived support from family, friends, and significant others. The MSPSS has undergone extensive cross-cultural validation, consistently demonstrating a stable three-factor structure and high internal reliability.

Previous studies have consistently reported strong positive correlations between social support and psychological well-being among adolescents. Adolescents who report higher levels of social support tend to exhibit greater subjective well-being, better emotional functioning, and stronger psychological resilience. Cross-national and longitudinal studies reveal that social support is associated not only with concurrent well-being (cross-sectionally) but also predicts later psychological outcomes. This underscores the role of social support as a protective factor against psychosocial risks.

For adolescents residing in institutional care settings such as in Malaysia, where permanent shelter home connections with biological families may be disrupted, alternative sources of support—such as house parents, teachers, peers within the institution, counsellors, or non-governmental organizations (NGOs)—become crucial. Research indicates that support from

teachers or career mentors can reduce anxiety related to the future and enhance confidence in career decision-making. Instrumental support, such as skills training and job referrals, also significantly impacts career development outcomes.

There is robust empirical evidence linking social support and career decision-making self-efficacy (CDSE). Effective social support provides access to key sources of self-efficacy, as proposed by Bandura—namely, informational resources (e.g., occupational information), motivational reinforcement, and vicarious learning experiences. Recent studies have demonstrated both direct and mediated pathways, where social support enhances CDSE, which in turn improves career adaptability or reduces career decision-making difficulties. For instance, a large-scale study conducted in 2024 found that social support exerted both direct and indirect effects (via psychological capital or CDSE) on career decision-making difficulties.

Research Objectives

This study was conducted to achieve the following objectives:

1. To determine the level of career decision-making self-efficacy among female adolescents residing in government-run shelter home.
2. To assess the level of social support received by adolescents in the institution, particularly from family, friends, and significant others.
3. To analyse the relationship between career decision-making self-efficacy and social support among adolescents in the institutional care setting.

Research Methodology

This study employed a descriptive correlational design involving 79 adolescents residing in a shelter home managed by the Department of Social Welfare.

Instrument

The Career Decision-Making Self-Efficacy–Short Form (CDSE-SF) is a 25-item self-administered instrument designed to measure career self-efficacy (Betz & Taylor, 2001). It comprises five subscales: accurate self-appraisal, occupational information gathering, goal selection, making decisions, and problem-solving. A 5-point Likert scale is used, ranging from 1 (no confidence at all) to 5 (complete confidence) (Betz & Taylor, 2001). Score interpretation is presented in Table 2.

Previous research by Luzzo (1996) among Australian students demonstrated high validity for the CDSE-SF. Luzzo also found a significant positive correlation between Career Decision-Making Attitude and the CDSE-SF ($r = .41$), indicating that students with higher CDSE-SF scores tend to have better career decision-making attitudes. Additionally, Chung (2002) examined gender and ethnic differences in career self-efficacy and career commitment among university students, reporting significant differences on the CDSE-SF and Career Commitment Scale.

Taylor and Betz (1983) reported a Cronbach's alpha of .96 for the overall CDSE-SF, with subscale alphas ranging from .86 to .89. In Malaysia, Zalizan et al. (2014), based on a pilot study of 94 students, confirmed the reliability of the instrument ($\alpha = .92$), as published by Mohd Sani Ismail (2011). Similarly, Mohd Izwan Mahmud (2017a) found the CDSE-SF reliable with a Cronbach's alpha of .91 in a pilot study among university students.

The Multidimensional Scale of Perceived Social Support (MSPSS), developed by Zimet, Dahlem, Zimet, and Farley (1988), was used to measure social support. The MSPSS consists of 12 items and three subscales measuring support from family, friends, and significant others. A 7-point Likert scale was employed. The overall instrument reliability yielded a Cronbach's alpha of .91, with subscale alphas of .88 for family, .90 for friends, and .96 for significant others (Hui, Yuen, & Chen, 2017).

Finding

Demographic

A total of 79 female children involved in this study were residents of children's homes under the management of the Department of Social Welfare. All participants were between the ages of 10 and 17. Their daily lives in the home were supported in terms of physiological, social, and emotional needs. They participated in structured activities organized by the authorities and were required to follow these activities throughout their stay. Emotional support services were also provided, including access to guidance and counseling.

Findings revealed that 19 participants (24%) had never met with a counsellor, 24 participants (30%) reported rarely doing so, and 7 participants (8.9%) reported infrequent sessions. Meanwhile, 10 participants (12.7%) stated they met counselors frequently, and 14 participants (17.7%) indicated they did so very frequently.

Regarding participation in career development programs, 47 participants (60%) reported having taken part in such programs, while 32 participants (40%) had never been involved in any career development initiative. This indicates that nearly half of the respondents had never been exposed to career-related programs such as career talks, career fairs, resume writing workshops, mock interviews, and similar activities.

Career Self-Efficacy among Residents in Two Shelter Homes

Table 1

Career Self-Efficacy in Both Shelter Homes

	Shelter Home 1			Shelter Home 2		
	Alpha Cronbach	Mean	SD	Alpha Cronbach	Mean	SD
Career Self Efficacy	.951	3.59	.888	.917	3.27	.814
Self -appraisal	.764	3.52	.957	.730	3.33	.999
Occupational Information	.807	3.49	1.04	.725	3.06	1.04
Goal Selection	.834	3.79	.979	.700	3.47	.884
Planning	.759	3.72	.905	.738	3.24	.992
Problem Solving	.754	3.46	.917	.758	3.23	.834

(Levels: Low = 1.00–2.33, Moderate = 2.34–3.66, High = 3.67–5.00)

The present study examined the career self-efficacy levels among residents in two shelter homes, focusing on the overall construct and its subdimensions: self-appraisal, occupational information, goal selection, planning, and problem-solving. Table 1 presents the reliability indices and mean scores for both shelter homes.

Internal consistency reliability for the overall career self-efficacy scale was excellent in both Shelter Home 1 ($\alpha = .951$) and Shelter Home 2 ($\alpha = .917$), indicating high measurement precision. Subscale reliability coefficients ranged from acceptable to good, with Cronbach's alpha values between .700 and .834, confirming the internal consistency of the dimensions measured.

The mean career self-efficacy score for Shelter Home 1 was 3.59 (SD = .888), placing it in the *moderate* range (2.34–3.66), approaching the *high* threshold (3.67–5.00). In contrast, Shelter Home 2 recorded a lower mean of 3.27 (SD = .814), also categorized as moderate but closer to the lower boundary of the scale.

Analysis of the subdimensions revealed variations between the two shelter homes. Self-appraisal scores averaged 3.52 (SD = .957) for Shelter Home 1 and 3.33 (SD = .999) for Shelter Home 2, both within the moderate range. Occupational information subscale means were 3.49 (SD = 1.04) and 3.06 (SD = 1.04) for Shelter Home 1 and Shelter Home 2, respectively. Notably, goal selection and planning subscales in Shelter Home 1 achieved mean scores indicative of a *high* level of efficacy (3.79, SD = .979; 3.72, SD = .905), whereas Shelter Home 2's scores remained moderate (goal selection M = 3.47, SD = .884; planning M = 3.24, SD = .992). Problem-solving scores were similar across both homes, averaging 3.46 (SD = .917) and 3.23 (SD = .834), respectively, both moderate.

Overall, residents of Shelter Home 1 demonstrated higher career self-efficacy than those in Shelter Home 2, especially in goal selection and planning. These differences may reflect variations in programmatic support or environmental factors that contribute to career development within each shelter home.

The findings indicate moderate levels of career self-efficacy among shelter home residents, with Shelter Home 1 showing a more favorable profile. Enhancing career planning and goal-setting interventions could potentially strengthen residents' confidence and preparedness for future career challenges.

Social Support in Both Shelter Homes

Table 2 presents the descriptive statistics and reliability indices for social support and its subdimensions (family, friends, and others) among residents of two shelter homes. The overall social support scale demonstrated acceptable internal consistency reliability for both Shelter Home 1 ($\alpha = .791$) and Shelter Home 2 ($\alpha = .842$). Subscale reliability coefficients varied across groups, with Shelter Home 1 reporting high reliability for family ($\alpha = .859$), friends ($\alpha = .888$), and others ($\alpha = .928$). In contrast, Shelter Home 2 showed lower reliability for the friends ($\alpha = .690$) and others ($\alpha = .600$) subscales, suggesting caution when interpreting these specific measures.

Table 2

Social Support in Both Shelter Homes

Construct / sub Construct	Shelter Home 1			Shelter Home 2		
	Alpha Cronbach	Mean	SD	Alpha Cronbach	Mean	SD
Social Support	.791	5.05	1.73	.842	4.29	1.34
Family	.859	4.91	3.06	.782	3.36	.864
Friends	.888	4.97	1.73	.690	3.47	1.01
Others	.928	5.27	1.78	.600	3.23	.964

Mean scores indicated that residents of Shelter Home 1 perceived greater social support overall ($M = 5.05$, $SD = 1.73$) compared to those in Shelter Home 2 ($M = 4.29$, $SD = 1.34$). Regarding subdimensions, family support was rated highest in Shelter Home 1 ($M = 4.91$, $SD = 3.06$), surpassing the mean for Shelter Home 2 ($M = 3.36$, $SD = .864$). Similarly, support from friends was stronger among Shelter Home 1 residents ($M = 4.97$, $SD = 1.73$) than Shelter Home 2 ($M = 3.47$, $SD = 1.01$). The “others” subscale, reflecting support from individuals outside the immediate social circle, was also notably higher in Shelter Home 1 ($M = 5.27$, $SD = 1.78$) relative to Shelter Home 2 ($M = 3.23$, $SD = .964$).

These results suggest that Shelter Home 1 provides a more supportive social environment across all sources of support measured, while Shelter Home 2 residents report comparatively lower social support. The relatively low Cronbach’s alpha for the friends and others subscales in Shelter Home 2 may reflect variability in social support experiences or differences in social network composition.

Overall, the data indicate that social support, including family, friends, and others, is more robustly perceived by residents in Shelter Home 1 compared to Shelter Home 2. Enhancing social support networks, particularly in Shelter Home 2, may contribute to improved psychosocial outcomes for residents.

Correlation between on Career Self-Efficacy and Social Support

There is no significant correlation between the career self-efficacy and social support (family, friends, and significant others).

The normality test analyses of career self-efficacy for the total sample of $N = 121$ showed a skewness (z) value of -1.65 and kurtosis (z) of $.040$. As for social support (family, friends, and significant others), the skewness (z) value is $.841$. The result showed that the data for both variables are normally distributed and can be accepted for correlation analyses.

Table 3 shows the female adolescents in Shelter Home; there is a moderate significant positive correlation between the career self-efficacy and family [$r = .266^*$, $p < .05$], friends [$r = .370$, $p < .05$], and significant others [$r = .286$, $p < .05$]. There is a moderate significant positive correlation between family and friends [$r = .325$, $p < .05$] and significant others [$r = .325$, $p < .05$]. There is a moderate significant positive correlation between friends and significant others [$r = .692$, $p < .05$]. The results show that career self-efficacy has a positive relationship with social support (family, friends, and significant others).

Table 3

Min, Standard Deviation and Correlation Between Career Self Efficacy and Social Support (Rembau)

Characteristics	1	2	3	4
1. Career Self-Efficacy	-	.266*	.370**	.286*
2. Family	.266*	-	.325**	.325**
3. Friends	.370**	.325**	-	.692**
4. Others	.286**	.325**	.692**	-
<i>M</i>	3.59	4.91	4.97	5.27
<i>SD</i>	.888	3.06	1.73	1.78
Alpha	.951	.859	.888	.928

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

Table 4 shows the male adolescents in Shelter Home; there is a strong significant positive correlation between career self-efficacy and family [$r = .773, p < .05$], friends [$r = .885, p < .05$], and significant others [$r = .812, p < .05$]. There is a moderate significant positive correlation between family and friends [$r = .607, p < .05$] and significant others [$r = .640, p < .05$]. There is a moderate significant positive correlation between friends and significant others [$r = .677, p < .05$]. The results show that career self-efficacy has a positive relationship with social support (family, friends, and significant others).

Table 4

Min, Standard Deviation and Correlation Between Career Self Efficacy and Social Support (Melaka)

Characteristics	1	2	3	4
1. Career Self-Efficacy	-	.773**	.885**	.812**
2. Family	.773**	-	.607**	.640**
3. Friends	.885**	.607**	-	.677**
4. Others	.812**	.640**	.677**	-
<i>M</i>	3.27	3.36	3.47	3.23
<i>SD</i>	.814	.864	1.01	.964
Alpha	.917	.782	.690	.600

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

Correlation analyses presented in Tables 3 and 4 revealed significant gender differences in the strength of the relationship between social support and career self-efficacy. For female adolescents at shelter home Rembau, there were moderate positive correlations between career self-efficacy and family support ($r = .266^*$), friends ($r = .370^*$), and significant others ($r = .286$). In contrast, male adolescents at shelter home Melaka exhibited substantially stronger correlations: family support ($r = .773^{**}$), friends ($r = .885^{**}$), and significant others ($r = .812^{**}$).

These results suggest that social support is a stronger predictor of career self-efficacy for male adolescents compared to their female counterparts. This finding aligns with Zhou et al. (2024), who reported that social support exerts both direct and indirect effects on career decision-making difficulties through self-efficacy.

Overall, the current study affirms three key points. First, career self-efficacy among adolescents in shelter home is initially moderate but can be enhanced through structured interventions. This is consistent with Social Cognitive Career Theory (SCCT), which posits that self-efficacy is shaped by direct experiences and social modeling (Bandura, 1986). Second, social support plays a crucial role in influencing career self-efficacy; however, notable variations exist between institutions, potentially due to differences in management practices and cultural contexts at each shelter home. Third, gender differences are pronounced, with male adolescents showing stronger associations between social support and career self-efficacy than females. These findings highlight the need for gender-specific support interventions to maximize effectiveness.

The present results corroborate previous research that identifies social support as a protective factor enhancing career self-efficacy and psychological well-being among adolescents (Cheung et al., 2024; Kurudirek et al., 2022).

Discussion

The findings of the present study indicate moderate levels of career self-efficacy among residents of both shelter homes, with Shelter Home 1 consistently exhibiting higher scores across all subdimensions, particularly in goal selection and planning. This suggests that the environmental context and programmatic support provided in Shelter Home 1 may better facilitate the development of career-related confidence and skills. These results align with Bandura's (1986) Social Cognitive Career Theory (SCCT), which emphasizes the role of environmental influences and personal experiences in shaping self-efficacy beliefs. The higher internal consistencies observed in the career self-efficacy scales reinforce the reliability of these findings.

Regarding social support, residents of Shelter Home 1 reported substantially higher perceptions of support from family, friends, and significant others than those in Shelter Home 2. The importance of social support in fostering career self-efficacy is well-documented in the literature. For instance, Lent et al. (2003) found that social support enhances individuals' confidence to pursue career goals by providing emotional encouragement and access to resources. The relatively lower reliability scores for the friends and others subscales in Shelter Home 2 may reflect a less cohesive social network or fewer opportunities for social engagement, factors that have been linked to diminished psychosocial outcomes in vulnerable youth populations (Rew & Horner, 2003).

The gender-based correlation analyses reveal that social support is a significantly stronger predictor of career self-efficacy for male adolescents compared to females. This finding is consistent with Zhou et al. (2024), who reported that social support influences career decision-making processes both directly and indirectly through self-efficacy mechanisms. The stronger associations among males could be attributed to gender-specific socialization patterns, where males may rely more heavily on social networks for career guidance and validation (Gushue & Whitson, 2006). Conversely, females may experience additional barriers, such as societal expectations and role constraints, which moderate the impact of social support on career confidence (Hackett & Betz, 1981).

The notable institutional differences observed in this study might be linked to variations in organizational culture, leadership styles, and program delivery in each shelter home. Prior research has highlighted that supportive leadership and structured career interventions within youth residential settings positively influence career development outcomes (Munley et al., 2019). Therefore, the findings underscore the importance of implementing tailored, gender-responsive career support programs that also consider the unique environmental and cultural contexts of shelter homes.

These results complement previous studies indicating that social support acts as a protective factor against psychological distress and enhances career self-efficacy among adolescents facing adversity (Cheung et al., 2024; Kurudirek et al., 2022). Given that career self-efficacy is a critical determinant of career adaptability and future employability (Savickas, 2013), fostering robust social support networks and targeted career development programs should be prioritized to empower shelter home residents.

Implications

The findings of this study have important implications for the management of Youth Rehabilitation Centers and the Department of Social Welfare (JKM). It is crucial for shelter home management to ensure that career development programs are delivered consistently and in a structured manner to effectively enhance career self-efficacy among residents. Additionally, training for house parents should be intensified to equip them with the skills to provide more effective emotional support, given that perceptions of social support significantly influence career self-efficacy (Zhou et al., 2024). The involvement of non-governmental organizations (NGOs) and local community networks is also vital to strengthen the social support systems available to adolescents in care institutions.

For counselors and educators, there is a clear need to implement career intervention modules that emphasize the enhancement of self-efficacy. Such interventions could include decision-making training, goal setting, and problem-solving skills development, as suggested by Guan et al. (2019). Group counseling focusing on peer support can further enhance the sense of belonging and emotional support among adolescents. Moreover, collaboration between school counselors and shelter home officers should be fostered to ensure the continuity and effectiveness of career guidance programs.

At the policy level, the Ministry of Education Malaysia and the Department of Social Welfare should consider integrating career development programs based on Social Cognitive Career Theory (SCCT) within shelter institutions. Welfare policies for children should emphasize psychological well-being and career readiness as key indicators of successful youth development in care settings. Furthermore, allocating additional resources to strengthen intervention programs that address both social support and career self-efficacy factors will be essential in promoting better psychosocial outcomes for adolescents.

Conclusion and Recommendations

This study explored the relationship between career self-efficacy and perceived social support among adolescents residing in two government-run shelter homes. The findings indicated that while the overall level of career self-efficacy was moderate, residents of Shelter Home 1 consistently reported higher levels of self-efficacy and perceived social support compared to

those in Shelter Home 2. These differences were most pronounced in the subdimensions of goal selection and planning. The results further revealed that social support—particularly from family, friends, and significant others—was positively associated with career self-efficacy, with stronger correlations observed among male adolescents. These findings are consistent with the Social Cognitive Career Theory (Bandura, 1986; Lent et al., 2003), which posits that self-efficacy beliefs are shaped by social and environmental factors, and with more recent studies indicating that social support plays a significant role in shaping career outcomes among youth (Zhou et al., 2024; Cheung et al., 2024).

Despite its valuable contributions, this study is not without limitations. It employed a cross-sectional design, limiting the ability to infer causal relationships between variables. Additionally, the sample was restricted to two shelter homes located in specific regions of Malaysia, which may not fully represent the diversity of adolescents in care institutions nationwide. Institutional differences in management style, staff engagement, and peer dynamics could have influenced the findings but were not systematically examined in this study.

Given these limitations and the insights gained, several recommendations are proposed for future research and practical application. First, future studies should consider expanding the sample to include a broader range of shelter homes across various states and regions. This would allow for a more comprehensive and generalizable understanding of how social support and career self-efficacy manifest across different institutional and cultural settings. Prior research has shown that contextual factors, including geography, institutional policies, and cultural norms, can significantly influence adolescents' perceptions of support and career readiness (Cheung et al., 2024).

Second, it is recommended that future research adopt a longitudinal design to monitor the development of career self-efficacy and social support over time. Longitudinal studies can provide a clearer picture of how early experiences and interventions contribute to long-term outcomes. Yıldız and Kaya (2021), for example, demonstrated that social support during early adolescence significantly predicted future psychological well-being, reinforcing the value of long-term data.

Third, experimental studies employing control groups are encouraged to evaluate the effectiveness of structured career development interventions within shelter homes. Such designs would enable researchers and practitioners to determine the direct impact of specific programs on career decision-making self-efficacy. Guan et al. (2019) found through a meta-analysis that structured career interventions significantly enhance career-related confidence, further supporting the need for controlled intervention research.

Fourth, future studies may benefit from integrating additional psychological variables such as resilience, self-esteem, and future time perspective as potential mediators or moderators in the relationship between social support and career self-efficacy. Research by Park et al. (2020) indicated that future time perspective interventions positively influence career decision-making, suggesting that psychological dimensions beyond self-efficacy and support networks may enrich our understanding of career development pathways.

Finally, the present study found gender-based differences in how social support influenced career self-efficacy, with male adolescents showing stronger associations. This highlights the need for further research to explore the mechanisms underlying these gender differences. Future studies could adopt qualitative methods such as in-depth interviews to gain deeper insights into the social and psychological processes that contribute to gendered patterns of career development. Zhou et al. (2023) emphasized that gender roles and social contexts shape how adolescents interpret and utilize support, which may affect the efficacy of career. In summary, this study contributes to the growing body of literature emphasizing the role of social support in enhancing career self-efficacy among adolescents in institutional care. While the findings highlight the strengths and challenges within the current system, they also point to clear opportunities for improvement through evidence-based interventions, longitudinal research, and gender-responsive programming. Addressing these dimensions holistically will be essential for promoting career readiness, psychological well-being, and positive life trajectories for adolescents living in shelter homes.

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