



A COMPARATIVE STUDY ON SELF-EFFICACY AND EMOTIONAL WELLBEING IN YOUNG ADULTS DURING CORONAVIRUS PANDEMIC

Ayisha Asheequa* & Angel Maria**

*Undergraduate Student, Little Flower Institute of Social Sciences and Health (LISSAH), Calicut.

**Assistant professor, Little Flower Institute of Social Sciences and Health (LISSAH), Calicut.

Abstract

As the world is battling a pandemic, the people are facing psychological conflicts too. Since young adults are a very productive age group, it is important to understand the negative impact of this pandemic on them. Emotional wellbeing and self-efficacy are often linked with positive thinking and optimism, hence plays an important role in an individual's achievement and motivation. Reviews of previous literature shows that there is no existing literature done on this topic. So this study was conducted to find out the significant difference in emotional wellbeing and self-efficacy before and during the coronavirus pandemic, among 50 young adults of Kerala. The variables were measured using Mental Health Continuum Short Form (Keyes,2005) and Generalized Self-efficacy scale (Schwarzer, Jerusalem, 1995). Purposive random sampling was conducted. Statistical technique - paired sample t-test was used for the analysis of the data. Results indicated a significant decrease in self-efficacy during the pandemic. And, there is a decrease in the percentage of individuals with 'flourishing' emotional wellbeing during the pandemic. The findings of this study can be considered while providing mental health intervention for this population. This study will also contribute to the literature of psychological effects of coronavirus.

Keywords: emotional wellbeing, self-efficacy, coronavirus pandemic

INTRODUCTION

A coronavirus is a common virus that causes an infection in your nose, upper throat and sinuses. Most of these aren't dangerous. In early 2020, after an outbreak in China (which started during December 2019) the World Health Organization identified SARS-CoV-2 as a new type of coronavirus. The outbreak quickly spread worldwide and it was declared as a pandemic on 11 March, by WHO. Majority of the people infected with the COVID-19 virus experience mild to moderate respiratory illness. Aged citizens, and those with existing medical problems like cardiovascular diseases, chronic respiratory diseases, diabetes, and cancer are more likely to develop serious illness. The COVID-19 virus spreads mainly through droplets of saliva or discharge from the nose when an affected person coughs or sneezes. Hence, it is important to wear face masks, maintain hygiene and other precautions suggested by the authorities. Since the virus has a high transmission rate and as there are no specific vaccines or treatments for COVID-19 at the moment, social

distancing should be practised as a preventative measure. The practices related to social distancing has also taken a toll on mental health.

According to a research in China, majority of respondents rated the psychological impact of the outbreak as moderate to severe (Wang, 2020). The primary emotional responses of people included extreme fear and uncertainty. The fear of the unknown heightens the level of anxiety in both healthy individuals and those with pre-existing mental health conditions. There are chances that this might lead to a broad range of public mental health concerns, including mental health disorders, health risk behaviours, distress reactions, and lowered perceived health (Shigemura et al., 2020, p. 281). The psychological impact the outbreak will have on individuals and society can obstruct their readiness to overcome the crisis, and it is obvious that the psychological consequences can still persist even long after the pandemic has ended (Ho et al., 2020). Studies also focus on the psychological impacts of the pandemic on individuals related to the health sector. In the COVID-19 emergency, medical workers are dealing with high risk of infection and insufficient protection against contamination, exhaustion, overwork, discrimination, isolation, patients with negative emotions and a lack of contact with their families. The mental health problems of health workers not only affect their attention, understanding and decision-making capacity, which could hamper the battle against corona virus, but they could also have a long-lasting effect on their overall well-being (Kang et al., 2020). These findings show that the pandemic has affected every sector of the population in its own way. Several Indian researches also substantiate this.

The increase in anxiety and fear among people due to the unpredictable nature of the disease are further increased with socially disruptive, but essential measures like lockdowns and quarantines. All these can lead to several psychological and psychiatric disturbances such as Post-traumatic stress disorder, anxiety, depression, panic disorders, and behavioural disorders. These are further triggered by staying away from family and friends, loneliness, wrong information spread through social media, financial insecurities and stigmatization (Sood, 2020). The high number of suicide cases in India during lockdown also shows how this dilemma affected people emotionally and psychologically, resulting in increased rates of anxiety, depression, loneliness, fear, stress, boredom, etc. Besides the fear of infection, the people are stressed out due to frustration, inadequate information, and financial issues, leading them to suicide (Brooks et al., 2020). A report of two suicide cases in India shows that one of them developed severe anxiety and depression, after he came to know that the person with whom he came in contact with, was found to be infected and the other one developed depressive symptoms, due to fear of possible infection, after he came in contact with people with travel history. Medias are also spreading misinformation regarding the possible painful deaths and significant higher mortality rate with coronavirus infection (Sahoo et al., 2020, p. 102104). This is also a major cause for panic amongst the general public.

Most studies have addressed emotional well-being with regard to mental health. Emotional well-being is a group of symptoms regarding the presence or absence of positive feelings about life and life satisfaction (Keyes, 2002). A study related to the different components of mental health shows that there is a positive relation between age and emotional well-being (Westerhof, Keyes, 2010). So, older adults tend to have more emotional wellbeing than young adults. Young adults also show negative attitude towards mental health treatment (Gonzalez, Alegria, & Prihoda, 2005, p. 612). Considering these findings, it is important to provide mental health interventions to them as they might not reach out for it. Research also shows that self-efficacy relates to goals and achievement outcomes (Schunk, 1995). It will help people in coping up with the pandemic and associated anxiety.

So, this study further explored the emotional wellbeing and self-efficacy of young adults during the pandemic, as the existing literature shows several psychological impacts on people. It is important to analyse the effect of COVID-19 pandemic, as it will help in improving the mental health condition of people and further help in coping with the crisis and to develop possible prevention and treatment options.

HYPOTHESES

H1: There is no significant difference in emotional wellbeing before and during the coronavirus pandemic.

H2: There is no significant difference in self-efficacy before and during the coronavirus pandemic.

METHOD

In this study, the methodology refers to how the research was done and its logical sequence. It includes the designs, sample, data collection and analysis techniques in the study. The main focus of this study was to investigate the difference in emotional wellbeing and self-efficacy before and during the coronavirus pandemic. Therefore, the research approach was quantitative.

Sample

The sample for this study consists of 50 young adults from different parts of Kerala, between the ages of 18 and 35. The sample was collected through purposive random sampling. Purposive random sampling is the process of identifying a population of interest and developing a systematic way of selecting cases, that is not based on advanced knowledge of how the outcomes would appear.

Instruments

1. Mental Health Continuum Short Form (MHC-SF; Keyes 2005a) is a 14-item self-report questionnaire for measuring emotional, social and psychological well-being. Participants were asked to respond to items on a 6-point Likert scale based on the experiences they had had over the last month (never, once or twice, about once a week, two or three times a week, almost every day, or every day). According to Keyes (e.g., 2006, 2008), people can be categorised as flourishing or languishing with respect to their emotional wellbeing. To be categorised as flourishing, individuals should respond that they experience 'everyday' or 'almost everyday' to at least seven items, where one of the symptoms is from the hedonic cluster (i.e., happy, interested in life, or satisfied). And to be categorised as languishing, individuals must respond that they experience 'never' or 'once or twice' to at least seven items, where one of the symptoms is from the hedonic cluster. Individuals who do not fit these criteria for flourishing or languishing are considered as moderately mentally healthy (Keyes, 2002). The MHC-SF scores has good internal consistency (Cronbach's alpha = .91) and the results also supported convergent and divergent validity.
2. Generalized Self-efficacy scale (GSE; Schwarzer, and Jerusalem-1995) is a self-administered questionnaire with 10 items. It has four choice response for each item, with no reverse scored items ('not at all true' to 'exactly true'). It has high internal consistency with Cronbach's alphas between .76 and .90 and criterion related validity.

Procedure for data collection

Close-ended questionnaire design was used to carry out investigation in which the participants were asked to report their feelings based on the given options. Google forms were created and sent to friends, acquaintances, etc. and were forwarded to random people by them as well. The Google form contained a personal information page followed by the questionnaires for Mental Health Continuum and Generalized Self-efficacy. They were requested to report their feelings during the past month in May, 2019. After an year, the same Google forms were sent again and the subjects reported their feelings during the pandemic, in

May, 2020. After collecting data, the previous responses collected in 2019 and the new responses collected during the pandemic were analyzed.

Data Analysis

The SPSS was used to analyse the quantitative data collected. Paired sample t-test was used to analyse the data.

RESULTS

Coronavirus and the lockdown demands social isolation. Loneliness and social isolation is often associated with poor mental health. Emotional well-being is the combination of positive effects and general satisfaction with life. Self-efficacy refers to an individual's belief in their capacity.

This study compared the emotional well-being and self-efficacy of young adults before and during the pandemic.

Table 1

Comparison between scores of MHC and GSE before (pretest) and during (posttest) pandemic, in young adults.

Sl no	Variables	Groups	N	Mean	SD	SE	T value
1	MHC	Pretest	50	47.22	10.914	1.543	.700
		Posttest	50	46.52	13.207	1.868	
2	GSE	Pretest	50	30.38	4.620	.653	.009**
		Posttest	50	28.46	3.898	.551	

** Significant at .05 level

Table 1 shows the comparison between the scores of MHC and GSE before the pandemic and during the pandemic in young adults, done by paired sample t-test. GSE during the pandemic (mean= 28.46, SD= 3.898) is significantly lower than GSE before the pandemic (mean= 30.38, SD= 4.620). For MHC, there is no significant difference in the values before the pandemic (mean= 47.22, SD= 10.914) and during the pandemic (mean= 46.52, SD= 13.207).

The 't' value for the difference in MHC and GSE, before and during the pandemic is .700 and .009 respectively.

The results show that there is significant difference in self-efficacy in young adults, before and during the pandemic, with self-efficacy being lesser during the pandemic than before.

Table 2*Pretest and Posttest results of languishing and flourishing young adults.*

MHC-SF	Pretest (n)	Pretest(%)	Posttest(n)	Posttest(%)
Flourishing	38	76%	29	58%
Moderately Mentally Healthy	8	16%	17	34%
Languishing	4	8%	4	8%

The majority, 76% (n=38), of participants were categorized as flourishing before the pandemic, 16% (n=8) were categorized as moderately mentally healthy, and 8% (n=4) were categorized as languishing at the pretest (see Table 2). In posttest, the percentage of participants categorized as flourishing decreased to 58% (n=29) and the percentage of participants categorized as moderately mentally healthy increased to 34% (n=17). The percentage of participants in the languishing category remained the same.

DISCUSSION

Corona virus pandemic is worsening in many parts of the world, including Kerala. The pandemic has caused moderate-severe psychological impact on majority of people globally. An overall emotional well being is necessary to maintain a positive mood even during the current pandemic. Emotional well being is linked to emotional intelligence and those who are able to understand and regulate their emotions will be able to generally maintain a better outlook on life. It is also evident that higher emotional intelligence is associated with greater optimism (Schutte et al., 1998) and greater life satisfaction (Ciarrochi et al., 2000). Self-efficacy is explored here as it is relevant for motivation and achievement.

The result of paired sample t-test shows that there is a significant difference in the self-efficacy of young adults an year before and during the pandemic. This is because the current situation may have caused a negative impact on the beliefs of people on their own capacities.

Researchers have already explored how personal and environmental factors affect self-efficacy.

This study further emphasises on how the pandemic and social isolation negatively affected young adults of Kerala and have decreased their general belief in themselves to solve problems and reach goals.

Despite analysing the overall emotional wellbeing, Keyes (2002) has distinguished 'flourishing' as a state where individuals have a high level of subjective well-being and an optimal level of psychological and social functioning. Likewise, 'languishing' refers to a state with low levels of subjective well-being and with low levels of psychological and social well-being. Individuals who do not belong to these categories fall in 'moderately mentally healthy' category. Even though the study suggests that there is no significant change in the overall emotional wellbeing of the population, there is a noticeable change in the percentage of 'flourishing' individuals. The decrease in the percentage of 'flourishing' individuals can also be indirectly associated with lower optimism and decreased life satisfaction of people due to the current pandemic. The scarcity of resources, fear of the virus, curfews, decreased social interaction and the restrictions on freedom can be a few possible reasons for this decrease. But analysing the data, it shows no major effect of the pandemic on overall emotional wellbeing.

Since the study shows negative psychological impact on self-efficacy and on previously 'flourishing' individuals, possible measures can be considered to provide psychological aid to the young adults during the

pandemic. Further studies will help to decide what measures can be opted. These interventions should not only be provided during the pandemic, but to people who are battling against psychological ramifications after the pandemic too.

CONCLUSION

In conclusion, this study yields useful insights for further exploring the psychological impacts of the lockdown and the corona virus pandemic, which is one of the major threats the world is facing currently. Further, the study showed that the young adults of Kerala had better self-efficacy and were more 'flourishing' before the outbreak of corona virus. Based on these findings we may hypothesize that the pandemic has : 1) decreased the self-efficacy of the people, and 2) decreased the percentage of 'flourishing' individuals in the state of Kerala.

Acknowledgments

The author appreciates all those who participated in the study and helped to facilitate the research process.

Conflict of Interests: The author declared no conflict of interests.

References

- Brooks, S. K., Webster, R. K., Smith, L. E., Woodland, L., Wessely, S., Greenberg, N., & Rubin, G. J. (2020). The psychological impact of quarantine and how to reduce it: rapid review of the evidence. *The Lancet*, 395(10227), 912–920. [https://doi.org/10.1016/s0140-6736\(20\)30460-8](https://doi.org/10.1016/s0140-6736(20)30460-8)
- Ciarrochi, J.V., Chan, A.Y., & Caputi, P. (2000). A critical evaluation of the emotional intelligence construct. *Personality and Individual Differences*, 28, 539-561.
- Coronavirus and COVID-19: What You Should Know. (2013, August 7). Retrieved from <https://www.webmd.com/lung/coronavirus>
- Gonzalez, J. M., Alegria, M., & Prihoda, T. J. (2005). How do attitudes toward mental health treatment vary by age, gender, and ethnicity/race in young adults? *Journal of Community Psychology*, 33(5), 611–629. <https://doi.org/10.1002/jcop.20071>
- Haushofer, J. (2020, June 5). Which interventions work best in a pandemic? Retrieved from <https://science.sciencemag.org/content/368/6495/1063>
- Ho, C. S., Chee, C. Y., & Ho, R. C. (2020). Mental Health Strategies to Combat the Psychological Impact of COVID-19 Beyond Paranoia and Panic. *Annals of the Academy of Medicine, Singapore*, 49(3), 155–160.
- Kang, L., Li, Y., Hu, S., Chen, M., Yang, C., Yang, B. (2020). The mental health of medical workers in Wuhan, China dealing with the 2019 novel coronavirus. *The Lancet Psychiatry*, 7, E14.
- Keyes, C. L. M. (2002). The Mental Health Continuum: From Languishing to Flourishing in Life. *Journal of Health and Social Behavior*, 43(2), 207. doi: 10.2307/3090197
- Keyes, C. L. M. (2009). Atlanta: Brief description of the mental health continuum short form (MHC-SF).

- Luijten, C.C., Kuppens, S., van de Bongardt, D. et al. Evaluating the psychometric properties of the mental health continuum-short form (MHC-SF) in Dutch adolescents. *Health Qual Life Outcomes* **17**, 157 (2019). <https://doi.org/10.1186/s12955-019-1221-y>
- Lupano Perugini, M. L., de la Iglesia, G., Castro Solano, A., & Keyes, C. L. M. (2017, March 3). The Mental Health Continuum-Short Form (MHC-SF) in the Argentinean Context: Confirmatory Factor Analysis and Measurement Invariance. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5342313/#:~:text=The original 14-item Mental,emotional, social, and psychological.>
- Sahoo, S., Rani, S., Parveen, S., Pal Singh, A., Mehra, A., Chakrabarti, S., ... Tandup, C. (2020). Self-harm and COVID-19 Pandemic: An emerging concern – A report of 2 cases from India. *Asian Journal of Psychiatry*, *51*, 102104. <https://doi.org/10.1016/j.ajp.2020.102104>
- Schunk, D. H. (1995). Self-efficacy, motivation, and performance. *Journal of Applied Sport Psychology*, *7*(2), 112-137
- Schunk, D.H. (1991). Self-efficacy and academic motivation. *Educational Psychologist*, *26*, 207-231
- Schutte, N.S., Malouff, J.M., Hall, L.E., Haggerty, D.J., Cooper, J.T., Golden, C.J., & Dornheim, L. (1998). Development and validation of a measure of emotional intelligence. *Personality and Individual Differences*, *25*, 167-177
- Schwarzer, R., & Jerusalem, M. (1995). Generalized Self-Efficacy scale. In J. Weinman, S. Wright, & M. Johnston, Measures in health psychology: A user's portfolio. Causal and control beliefs (pp. 35-37). Windsor, UK: NFER-NELSON.
- Shigemura, J., Ursano, R. J., Morganstein, J. C., Kurosawa, M., & Benedek, D. M. (2020). Public responses to the novel 2019 coronavirus (2019-nCoV) in Japan: Mental health consequences and target populations. *Psychiatry and clinical neurosciences*, *74*(4), 281–282. <https://doi.org/10.1111/pcn.12988>
- Sood, S. (2020). Psychological effects of the Coronavirus disease-2019 pandemic. *Research & Humanities in Medical Education*, *7*, 23-26. Retrieved from <https://www.rhime.in/ojs/index.php/rhime/article/view/264>
- Wang, C. (2020). Immediate Psychological Responses and Associated Factors during the Initial Stage of the 2019 Coronavirus Disease (COVID-19) Epidemic among the General Population in China. Retrieved from <https://www.mdpi.com/1660-4601/17/5/1729>
- Westerhof, G. J., & Keyes, C. L. (2010). Mental Illness and Mental Health: The Two Continua Model Across the Lifespan. *Journal of adult development*, *17*(2), 110–119. <https://doi.org/10.1007/s10804-009-9082-y>
- World Health Organization: WHO. (2020, January 10). Coronavirus. Retrieved from https://www.who.int/health-topics/coronavirus#tab=tab_1