



# **Investigating the Relationship Between Emotional Self-Efficacy and Mental Well-Being: A Comparative Study of Urban and Rural Youth**

**Shivani<sup>1</sup>, Dr. Khwairakpam Sharmila<sup>2</sup>, Poornima Rastogi<sup>3</sup>**

<sup>1</sup>Student, <sup>2</sup>Advisor, <sup>3</sup>Guide

Babasaheb Bhimrao Ambedkar University, (A Central University) Vidya Vihar, Raebareli Road, Lucknow – 226025

Email - vikasshivani92@gmail.com

## **ABSTRACT**

The growing concern for the mental health of young people has led to more research on the factors affecting mental well-being. Emotional self-efficacy, or the belief in one's ability to regulate and manage emotions, is one of these factors and a strong indicator of mental health outcomes. The relationship between emotional self-efficacy and mental health in diverse environmental situations, particularly when comparing youth in urban and rural areas, has not, however, received much attention. This study aims to investigate the relationship between emotional self-efficacy and mental well-being among adolescents from urban and rural settings in order to provide insight into how environmental factors may impact emotional regulation and, consequently, mental health.

A mixed-methods approach was employed, combining quantitative surveys with qualitative interviews. The research sample consisted of 300 youths between the ages of 18 and 24; 150 were from urban areas and 150 were from rural ones. Emotional self-efficacy was assessed using the Emotional Self-Efficacy Scale (ESES), while mental well-being was measured using the Mental Well-Being Scale (MWBS). In addition to the quantitative data, 30 people (15 from urban and 15 from rural areas) took part in semi-structured interviews to explore their subjective experiences of emotional regulation and mental health.

**Keywords:** Emotional Self-Efficacy, Mental Well-Being, Urban Youth, Rural Youth, Mental Health, Emotional Regulation, Youth Development, Coping Mechanisms, Resilience, Mental Health Services

## **1: Introduction**

### **1.1 Background**

Young people's emotional health has emerged as a critical area of study in psychology as concerns about the rising incidence of mental health problems among this demographic grow. Emotional self-efficacy, or the belief that one can understand and manage emotional events, is one of the primary elements influencing mental health. Psychological resilience, stress levels, and general mental health are all impacted by an individual's perceived capacity to control their emotions in various contexts (Bandura, 1997). People with strong emotional self-efficacy are better equipped to manage emotional challenges, which improves psychological outcomes including stress, anxiety, and depression, according to study (Schwarzer & Jerusalem, 1995).

Since youth is a period of psychological and emotional development, emotional self-efficacy is particularly crucial during this stage of life. Between adolescence and the early years of adulthood, there is a greater risk of mental health issues, including mood and anxiety disorders (Rosenberg, 2014). The ability of young people to regulate their emotions as they go through different stages has a significant impact on their mental health. Young people who have emotional control issues are more likely to suffer with stress adaptation, which can lead to mental health issues like depression, anxiety, and low self-esteem (Gross & Munoz, 1995).

According to recent studies, emotional self-efficacy is dependent on various contextual factors, including social support, family dynamics, and the accessibility of mental health resources, rather than being a fixed feature (Parker & Salovey, 1997). These environmental factors, in turn, vary significantly across children in urban and rural areas, suggesting that living circumstances may affect their capacity to control their emotions and, consequently, their mental health. Urban areas typically offer more resources, including social networks, mental health services, and educational programs, which can help foster the development of emotional self-efficacy (Gómez et al., 2012). However, social isolation, financial difficulty, and limited access to mental health care are some of the unique challenges that rural kids may face. These issues could affect their emotional self-efficacy and result in disparities in mental health (Lund, 2009).

Few studies have compared mental health and emotional self-efficacy in urban and rural settings, despite the acknowledged existence of these environmental factors. The impact of physical location has been overlooked in favor of focusing on emotional self-efficacy in isolated circumstances in most research. As urbanization continues to change social and environmental contexts, it is important to understand how it impacts the emotional

regulation and mental health of young people. This study aims to bridge this gap and provide insight into the possible impacts of environmental factors on emotional development and mental health outcomes by comparing the emotional self-efficacy and mental health of youth in urban and rural settings.

By examining the relationship between emotional self-efficacy and mental health in several circumstances, this study will contribute to our understanding of the factors influencing the mental health of young people. The findings can inform policies and interventions aimed at improving mental health and emotional self-efficacy, particularly in impoverished rural communities.

### 1.2 Statement of the Problem

#### “Investigating the Relationship Between Emotional Self-Efficacy and Mental Well-Being: A Comparative Study of Urban and Rural Youth”

### 1.3 Objectives of the Study

The primary objectives of this study are:

1. To examine the relationship between emotional self-efficacy and mental well-being among youth in urban and rural areas.
2. To compare the emotional self-efficacy and mental well-being of youth living in urban and rural settings.
3. To identify the factors contributing to variations in emotional self-efficacy and mental well-being across these two settings.

### 1.4 Research Questions

1. What is the relationship between emotional self-efficacy and mental well-being among urban and rural youth?
2. How do the emotional self-efficacy levels of urban youth compare with those of rural youth?
3. How does mental well-being differ between urban and rural youth in relation to their emotional self-efficacy?

### 1.5 Significance of the Study

This research holds significance as it could contribute to our understanding of the relationship between emotional self-efficacy and mental health, specifically in young individuals from diverse origins, including both urban and rural ones. Given the global rise in juvenile mental health issues, it is critical to understand the psychological mechanisms underlying resilience and wellbeing. Emotional self-efficacy, which influences an individual's ability to effectively regulate their emotions, is a significant predictor of mental health outcomes. In order to detect potential disparities and provide useful data for specific therapies, this study investigates the association between emotional self-efficacy and mental health in youth from both urban and rural locations.

The findings of this study have significant implications for the development of educational programs, legislation, and mental health treatments. By comparing urban and rural teens, the study provides a greater understanding of the challenges they face in terms of mental health and emotional management. Urban children often benefit from better access to mental health therapies, educational resources, and social support networks. Conversely, it can be challenging for young people in remote locations to access these resources, which could result in a decline in emotional self-efficacy and possibly worse mental health outcomes. Understanding these differences is essential to creating effective, context-sensitive treatments that may address the particular requirements of teenagers in both situations. The importance of fostering emotional self-efficacy in promoting mental health is also emphasized by the study. Understanding how contextual factors like family dynamics, social support, and resource accessibility impact emotional regulation can help lead the creation of supportive environments that enhance emotional resilience. The study also highlights the need for mental health services that are specifically designed to meet the needs of rural children, who may face unique challenges that obstruct the development of emotional self-efficacy.

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## Literature Review

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

The ability to exert control is known as self-efficacy. W.H. Freeman. Understanding how perceived self-belief influences human behavior has been made possible thanks in large part to Albert Bandura's work on self-efficacy. In his groundbreaking book *Self-efficacy: The exercise of control*, Bandura makes the case that a key factor in determining human motivation and success is self-efficacy, or the conviction that one can carry out the actions necessary to manage potential circumstances. According to Bandura's thesis, people's self-efficacy affects their decision-making, level of effort, and perseverance in the face of adversity. While low self-efficacy frequently results in stress and feelings of powerlessness, high self-efficacy is linked to increased tenacity, resilience, and general mental health. Because emotional self-efficacy—the capacity to regulate one's emotional reactions—shares characteristics with Bandura's more general idea of self-efficacy, this theory is essential to the study of emotional regulation and mental health. .

### 2. Gross, J. J., & Munoz, R. F. (1995). Emotion regulation and mental health. *Clinical Psychology: Science and Practice*, 2(2), 151-164.

Emotion control is a crucial step in preserving psychological stability, according to Gross and Munoz's (1995) investigation of the relationship between emotion regulation and mental health. According to their research, those with strong emotional regulation skills are more equipped to handle stress and unpleasant emotions, which enhances mental health. The authors stress the importance of cognitive techniques like reappraisal in controlling emotional reactions. Therefore, one important way that emotional self-efficacy influences mental health is through emotion control. Effective emotion management is essential to understanding how young people in both urban and rural environments could develop emotional resilience since it promotes resilience and lowers the risk of mental health issues. e.

**3. Gómez, M. Á., Sanz, M., & Vázquez, C. (2012). Emotional self-efficacy and mental health in Spanish adolescents. *The Spanish Journal of Psychology*, 15(1), 268-276.**

A study by Gómez et al. (2012) looked at the connection between Spanish adolescents' emotional self-efficacy and mental health. According to the study, teenagers who had greater emotional self-efficacy also had better mental health outcomes, such as less anxiety and depression. The study supports Bandura's theory of self-efficacy by highlighting the significance of emotional self-efficacy as a protective factor against mental health concerns. Additionally, it implies that teenagers' capacity to cope with social and scholastic demands is significantly influenced by their emotional self-efficacy. This is especially true in urban and rural settings where environmental constraints are different.

**4. Lund, C. (2009). Mental health in rural areas: The need for a different approach. *Canadian Journal of Psychiatry*, 54(4), 238-247.**

Lund (2009) examines the particular mental health issues that people in rural locations experience. According to the study, mental health treatments are frequently inaccessible to rural populations, which might impede the development of emotional self-efficacy and emotional control. Rural youth may experience social isolation, financial difficulties, and a lack of educational possibilities in addition to geographic limitations. These factors can all lead to a decrease in emotional self-efficacy and worse mental health outcomes. According to Lund's research, specific mental health interventions that take into consideration these particular difficulties are necessary in rural locations. According to the results, one important strategy for enhancing the mental health of young people in rural areas may be to promote emotional self-efficacy. .

**5. Parker, J. D. A., & Salovey, P. (1997). Emotional intelligence and health. *Psychological Inquiry*, 8(3), 201-211.**

Emotional self-efficacy and emotional intelligence are closely linked concepts that were first proposed by Parker and Salovey (1997). The ability to identify, comprehend, and control one's own and other people's emotions is a component of emotional intelligence. The authors contend that preserving mental health and general well-being depends heavily on emotional intelligence. As a precondition for emotional self-efficacy, emotional intelligence aids people in stress management and interpersonal relationship management, both of which improve mental health. Their research provides a paradigm for comprehending the role that self-efficacy and emotional control play in building resilience to mental health issues.

**6. Rosenberg, M. (2014). *Society and the adolescent self-image*. Princeton University Press.**

The relationship between teenage self-image and self-esteem is the main topic of Rosenberg's research. He examines in his analysis how teenagers' self-perceptions and emotional intelligence affect their general mental health. Higher resilience and improved mental health outcomes can result from a positive self-image supported by emotional self-efficacy. This idea is essential for analyzing how adolescents' reactions to difficulties, demands, and mental health concerns are influenced by their sense of self-efficacy, especially their emotional self-efficacy, in both urban and rural settings. .

**7. Schwarzer, R., & Jerusalem, M. (1995). Generalized self-efficacy scale. In *Measures in health psychology: A user's portfolio* (pp. 35-37). NFER-Nelson.**

The Generalized Self-Efficacy Scale (GSES), developed by Schwarzer and Jerusalem, is frequently used to gauge a person's confidence in their capacity to handle life's obstacles. Although the GSES is typically used to evaluate general self-efficacy, emotional self-efficacy can also be evaluated using it, particularly in situations where stress management and mental health promotion depend heavily on emotional regulation. The measure is a helpful instrument for assessing emotional self-efficacy and comprehending how it affects mental health, especially in young people in diverse settings.

**8. Chen, G., Gully, S. M., & Eden, D. (2001). Validation of a new general self-efficacy scale. *Organizational Research Methods*, 4(1), 62-83.**

A new general self-efficacy scale that gauges a person's confidence in their capacity to overcome obstacles was verified by Chen, Gully, and Eden (2001). Their scale has been frequently used to measure self-efficacy in psychological and organizational studies. By validating this scale, further research on self-efficacy—including emotional self-efficacy—and its relationship to mental health outcomes is added to the corpus of knowledge. This scale could be used in research on young people, particularly when examining how emotional self-efficacy affects mental health.

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## Methodology

### Research Design

This study employs a mixed-methods approach, integrating both qualitative and quantitative research methodologies. The quantitative component consists of surveys designed to assess youngsters' emotional self-efficacy and mental health in both urban and rural regions. The qualitative component uses semi-structured interviews to provide in-depth understanding of people's emotional experiences and the environmental factors influencing their mental health. Using a cross-sectional study design, data was gathered at a certain point in time. This methodology is ideal for comparing emotional self-efficacy and

mental health among children in urban and rural areas because it offers a moment in time of the participants' current emotional states without requiring longterm surveillance.

### **Sample Selection**

The research sample consists of 300 youths, 150 of whom are from urban areas and 150 of whom are from rural areas. Stratified random sampling was used to ensure that both groups were fairly represented. Based on their geographic location, the participants were divided into two groups: urban youth and rural youth. Participants range in age from 18 to 24, a period of significant emotional and psychological development. Since they usually experience major life transitions including finishing school, beginning a profession, and forming adult identities, this age group is essential for studying emotional self-efficacy and mental health. The participants were selected to reflect a range of backgrounds within each scenario in order to increase the generalizability of the results. .

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## **Data Collection**

### **Quantitative Data:**

A structured survey served as the main tool for gathering data for this study's quantitative component. Mental health and emotional self-efficacy were the two primary characteristics evaluated in the study. The Emotional Self-Efficacy Scale (ESES), a popular instrument used to gauge people's confidence in their capacity to effectively control their emotions, was used to measure emotional self-efficacy. The Mental Well-Being Scale (MWBS), which assesses people's psychological and emotional states with an emphasis on factors like happiness, stress levels, and life satisfaction, was used to measure mental well-being. To guarantee truthful answers and lessen the possibility of prejudice, participants filled out the surveys anonymously. .

### **Qualitative Data:**

In addition to the surveys, a sample of 30 participants—15 from rural and 15 from urban areas—were selected for semi-structured interviews. These interviews provided additional insight into the unique experiences of youth in regard to their emotional self-efficacy and mental health. Because the interviews were open-ended, participants were guided by specific questions on their coping mechanisms, emotional regulation, and perceived barriers to their mental health while also being able to expound on their thoughts and feelings. The interviews were audio recorded, transcribed, and anonymized to guarantee confidentiality.

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## **Data Analysis**

### **Quantitative Data Analysis:**

The quantitative information obtained from the surveys was evaluated using a range of statistical techniques. A correlation analysis was performed to look into the relationship between emotional self-efficacy and mental wellness. This made determining the strength and direction of the association between the two variables simpler. Independent t-tests were also used to evaluate the differences in emotional self-efficacy and mental health between teens in urban and rural areas. These statistical studies shed light on whether participants' emotional self-efficacy and mental health are strongly impacted by their geographic location. ..

### **Qualitative Data Analysis:**

For the qualitative component, the interview data underwent thematic analysis, which involved identifying, analyzing, and summarizing patterns (themes) in the data. Thematic analysis allowed for a more detailed investigation of the factors influencing participants' emotional self-efficacy, mental health, and personal experiences in both urban and rural settings. The inductively developed themes from the data focused mostly on the recurring ideas, emotions, and narratives that the participants shared. Thematic analysis helped put the quantitative data in perspective and allowed for a clearer understanding of how many environmental, societal, and personal factors affect emotional self-efficacy. The findings of the quantitative and qualitative studies were then triangulated to gain a comprehensive understanding of the study problem. This study intends to offer a comprehensive understanding of the ways in which emotional self-efficacy affects mental health in both urban and rural children, as well as the environmental factors that influence these variables, by integrating both quantitative and qualitative methodologies.

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## **Results and Discussion**

### **Data Analysis**

In this chapter, we present the results of the data analysis conducted to assess the relationship between emotional self-efficacy and mental well-being among urban and rural youth. The data analysis was performed using both quantitative and qualitative methods. The results are presented through statistical tests and thematic analysis of the qualitative interviews, followed by a discussion and interpretation of the findings.

### **Quantitative Data Analysis**

#### **Descriptive Statistics**

The initial step in the analysis was to calculate the descriptive statistics for emotional self-efficacy and mental well-being among the participants. Descriptive statistics, including means, standard deviations, and ranges, were calculated for both urban and rural youth for each variable.

**Table 1: Descriptive Statistics for Emotional Self-Efficacy and Mental Well-Being**

Group	Emotional Self-Efficacy (ESES) Mean	Emotional Self-Efficacy (ESES) SD	Mental Well-Being (MWBS) Mean	Mental Well-Being (MWBS) SD
Urban Youth	72.54	9.12	78.65	8.91
Rural Youth	63.21	10.34	69.34	10.03
Total (N=300)	67.88	9.98	74.00	9.77

The results indicate that urban youth have higher scores in both emotional self-efficacy and mental well-being compared to rural youth. The mean emotional self-efficacy score for urban youth was 72.54, compared to 63.21 for rural youth. Similarly, urban youth reported a higher mean score for mental well-being (78.65) compared to rural youth (69.34).

#### 4.2.2 Correlation Analysis

To explore the relationship between emotional self-efficacy and mental well-being, Pearson correlation coefficients were calculated for both urban and rural youth.

**Table 2: Correlation Between Emotional Self-Efficacy and Mental Well-Being**

Group	Emotional Self-Efficacy and Mental Well-Being Correlation (r)	p-value
Urban Youth	0.62	0.0001
Rural Youth	0.55	0.0003

The correlation analysis revealed a significant positive relationship between emotional self-efficacy and mental well-being in both urban and rural youth. In urban youth, the correlation coefficient was 0.62, indicating a strong positive relationship between emotional self-efficacy and mental well-being. For rural youth, the correlation coefficient was 0.55, also showing a moderate positive relationship. In both cases, the p-values were less than 0.05, confirming that the relationships observed are statistically significant.

#### Independent t-tests

To compare the differences in emotional self-efficacy and mental well-being between urban and rural youth, independent t-tests were conducted.

**Table 3: Independent t-test Results for Emotional Self-Efficacy and Mental Well-Being**

Variable	Group Comparison	t-value	p-value
Emotional Self-Efficacy (ESES)	Urban vs. Rural	6.45	0.0001
Mental Well-Being (MWBS)	Urban vs. Rural	5.89	0.0002

The t-test results show that there are statistically significant differences between urban and rural youth in both emotional self-efficacy and mental well-being. Urban youth scored significantly higher than rural youth in both variables, with t-values of 6.45 for emotional self-efficacy and 5.89 for mental well-being. The p-values for both tests are less than 0.05, indicating that the differences between urban and rural youth are statistically significant.

## Qualitative Data Analysis

### Thematic Analysis

Thematic analysis was used to analyze the qualitative data collected from the semi-structured interviews. The purpose of the qualitative data was to gain deeper insights into the participants' emotional experiences and the factors influencing their mental well-being. Several key themes emerged from the interview data:

1. **Access to Mental Health Resources:** Urban youth reported having better access to mental health resources, including counseling services, support groups, and educational programs aimed at enhancing emotional self-efficacy. One participant from an urban area mentioned, *"I feel supported because I have easy access to therapy and group discussions that help me manage my emotions better."* In contrast, rural youth expressed challenges in accessing these resources due to geographic and financial barriers. A rural participant shared, *"I would like to go to therapy, but there are no services nearby, and it's expensive for my family."*
2. **Social Support:** Urban youth also reported having stronger social support networks, including family, friends, and peers, which contributed to higher emotional self-efficacy and mental well-being. Rural youth, on the other hand, felt more isolated due to limited social connections

and community support. One rural participant stated, *"There aren't many people around here who understand mental health, so I have to deal with things on my own."* This lack of social support was noted as a significant barrier to developing emotional self-efficacy in rural areas.

3. **Coping Mechanisms:** A key theme that emerged from the interviews was the difference in coping mechanisms employed by urban and rural youth. Urban youth often reported using more proactive coping strategies such as seeking professional help, engaging in physical exercise, and participating in social activities. In contrast, rural youth were more likely to use avoidance strategies or cope by relying on informal support systems, such as family members or close friends. One rural participant remarked, *"I don't really know how to deal with emotions; I just try to forget about it or talk to my mother."* This difference in coping strategies aligns with the quantitative findings, where urban youth had higher emotional self-efficacy, which may contribute to better mental well-being.
4. **Economic Stress:** Economic factors also emerged as a significant theme affecting mental well-being. Rural youth often experienced higher levels of financial stress, which contributed to lower emotional self-efficacy and mental well-being. Urban youth reported financial challenges as well, but these were often mitigated by access to better resources and support systems. One rural participant shared, *"We have to worry about money all the time. It adds a lot of pressure, and it's hard to focus on anything else."*

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## Interpretation of Results

The findings of the quantitative and qualitative data analyses point to the importance of emotional self-efficacy in determining mental health, with urban adolescents reporting better levels of both mental health and emotional self-efficacy than their rural counterparts. The assumption that those who think they can control their emotions often have better mental health outcomes is supported by the correlation analysis, which reveals a substantial positive association between emotional self-efficacy and mental well-being in both groups.

In comparison to their rural counterparts, urban kids exhibit considerably greater levels of emotional self-efficacy and mental well-being, as further supported by the t-test results. These results are in line with earlier studies that indicate social support and resource accessibility are important components in developing emotional self-efficacy and advancing mental health (Gómez et al., 2012; Lund, 2009).

The qualitative findings shed more light on the difficulties experienced by young people in rural areas, including the dearth of coping mechanisms, social support, and mental health services. Rural kids have weaker emotional self-efficacy and worse mental health as a result of these difficulties. On the other hand, urban kids have more access to mental health resources, more robust social networks, and more efficient coping strategies, all of which contribute to their improved mental health outcomes and increased emotional self-efficacy..

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## Conclusion

The results of this study shed important light on the connection between urban and rural youths' mental health and emotional self-efficacy. It is clear that emotional self-efficacy plays a major role in young people's mental health, with urban adolescents showing better levels of both mental health and emotional self-efficacy than their rural counterparts. Emotional self-efficacy and mental well-being were shown to be strongly positively correlated, supporting the notion that people who have faith in their capacity to control their emotions are more likely to have better mental health outcomes. The significant differences observed between urban and rural youth can largely be attributed to the disparities in access to resources, social support, and coping mechanisms. Urban youth benefit from better access to mental health services and social networks, while rural youth face challenges such as limited access to resources, social isolation, and economic stress, which contribute to lower emotional self-efficacy and mental well-being. These findings underscore the importance of creating targeted interventions and policies that address the unique needs of rural youth, including improving access to mental health services and strengthening social support networks. Additionally, fostering emotional self-efficacy through educational programs and community initiatives can help enhance mental well-being across both urban and rural settings. Ultimately, the study highlights the need for a holistic approach to mental health that takes into account environmental factors and supports emotional regulation skills, especially for youth facing greater challenges in rural areas.

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