

Research Paper

## A Comparative Study of Self-Esteem and Emotional Regulation in Anxious and Non-Anxious Adolescents

Priti Sriranjani<sup>1\*</sup>

### ABSTRACT

Using gender as a moderating variable, the current study examines the differences in emotional regulation and self-esteem between anxious and non-anxious adolescents. The study evaluated 120 college-going adolescents in Bhubaneswar, aged 18 to 21 (60 anxious and 60 non-anxious), using a 2×2 factorial design. A standardized anxiety measure was used to identify the participants from a pool of 400 students. Self-esteem and emotional regulation were evaluated using the Rosenberg Self-Esteem Scale and the Emotional Regulation Questionnaire, respectively. A two-way ANOVA found significant main effects of anxiety on self-esteem and emotional regulation. Nevertheless, neither a significant main effect nor a significant interaction between anxiety levels and gender was seen. The results support early mental health treatments and highlight the impact of anxiety on adolescents' psychological functioning.

**Keywords:** *Adolescents, Anxiety, Self-Esteem, Emotional Regulation, Gender, Two-Way ANOVA, Mental Health*

Adolescence is a crucial stage of human growth that includes a variety of biological, social, and psychological changes. Identity discovery, elevated emotional sensitivity, and increasing exposure to social and intellectual pressures are characteristics of this time (Steinberg, 2005). Anxiety is one of the most common issues during adolescence, and in recent decades, its incidence and severity have increased globally (Costello, Egger, & Angold, 2005; WHO, 2021). In addition to interfering with typical psychosocial development, anxiety contributes to deficits in social interactions, academic performance, and emotional health (Essau, Lewinsohn, Olaya, & Seeley, 2014). Comparative research has revealed that anxious adolescents are more likely than their non-anxious classmates to view everyday obstacles as frightening and uncontrollable, which increases their emotional reactivity and stress levels (Muris, 2007). Their capacity to manage is not only compromised by this elevated danger perception, but it also feeds a negative cognitive bias that exacerbates anxiety symptoms and impairs psychological adjustment in general.

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<sup>1</sup>Assistant Professor & Head, Department of Psychology, Narasingh Choudhury (Autonomous) College, Jajpur, Odisha, India

\*Corresponding Author

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In India, cultural expectations, academic pressure, and fast modernization have produced particular stresses that worsen adolescents' mental health problems (Malhotra & Patra, 2014). However, many adolescents suffer in silence from anxiety-related issues due to a lack of mental health knowledge and resources (Hossain & Purohit, 2019).

### ***Self-Esteem and Its Psychological Significance***

Self-esteem is a person's overall perception of their own value and worth (Rosenberg, 1965). Self-esteem serves as a psychological buffer against stress during adolescence, promoting adaptive coping strategies and resilience (Mann et al., 2004; Orth & Robins, 2014). The bidirectional link between self-perception and mental health is shown by empirical research that consistently demonstrates that adolescents with poor self-esteem are more likely to display symptoms of anxiety and depression (Sowislo & Orth, 2013).

Adolescents who experience anxiety usually have lower self-esteem than their peers who do not, which is typically caused by poor self-perceptions and an increased fear of rejection or failure. According to research by Zeigler-Hill (2011), people who suffer from anxiety often internalize their perceived flaws, which results in a chronic undervaluation of their own value. Non-anxious adolescents, on the other hand, typically have more consistent and favourable opinions of themselves, which promotes emotional stability and self-assurance in social settings.

### ***Emotional Regulation and Anxiety***

The capacity to track, assess, and adjust emotional reactions to external stimuli is known as emotional regulation (Gross, 2015). Due to their developing brains and inexperience, adolescents frequently have difficulty controlling their emotions (Casey, Jones, & Hare, 2008). Increased symptoms of anxiety and depressive disorders have been associated with maladaptive techniques such as emotional suppression (Aldao, Nolen-Hoeksema, & Schweizer, 2010; Garnefski & Kraaij, 2007). On the other hand, cognitive reappraisal and other adaptive techniques are linked to increased psychological resilience and well-being (Gross & John, 2003).

Anxious adolescents are more likely to use maladaptive emotion management techniques like avoidance and rumination, which can exacerbate unpleasant feelings and reduce chances for resolution (Cisler et al., 2010). Adolescents who are not anxious, on the other hand, are more likely to apply adaptive techniques like problem-solving and acceptance, which help them bounce back from emotional discomfort faster. Understanding the endurance and intensity of anxiety symptoms during adolescence requires an awareness of these variations in control strategies.

### ***Gender Differences in Psychological Functioning***

The experience and appearance of psychiatric disorders are significantly influenced by gender. According to research, female adolescents are more likely than their male counterparts to report greater levels of anxiety, emotional sensitivity, and the adoption of maladaptive emotion management techniques (Chaplin & Aldao, 2013; Nolen-Hoeksema & Girgus, 1994). Both biological elements, such as hormone fluctuations, and sociocultural norms around emotional expression have an impact on these variations (Zahn-Waxler, Shirtcliff, & Marceau, 2008).

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Boys and girls also frequently receive different social rewards for expressing their emotions, which influences how they develop emotionally and cope. For instance, guys may be socialized to repress feelings, which might result in externalizing behaviours like aggressiveness rather than internalizing disorders like anxiety. In contrast, girls are usually encouraged to show vulnerability and seek help (Rose & Rudolph, 2006; Chaplin, 2015). Designing focused mental health therapies requires an understanding of these gender-specific pathways.

### **REVIEW OF LITERATURE**

According to Kessler et al. (2005), anxiety disorders are among the most prevalent mental health issues in adolescents, with lifetime prevalence rates ranging from 15% to 20%. Social disengagement, drug misuse, and poor academic performance are all more common among adolescents with anxiety (Pine, 2007). Adult emotional and behavioural functioning may be negatively impacted by anxiety throughout this developmental stage (Beesdo, Knappe, & Pine, 2009).

Studies have repeatedly demonstrated a negative correlation between adolescent anxiety and self-esteem. Anxiety is both a cause and an effect of low self-esteem (Zeigler-Hill, 2011). Adolescents with anxiety disorders frequently have low self-esteem and confidence due to poor self-perceptions (Bos, Muris, Mulken, & Schaalma, 2006). These results imply that self-esteem-boosting therapies might be useful in reducing anxiety symptoms. Depression and anxiety are among the psychological issues that are closely linked to poor emotional regulation (Aldao et al., 2010). Internalizing symptoms are more common in adolescents who engage in maladaptive behaviours, including avoidance, rumination, or suppression (Compas et al., 2017). Conversely, it has been discovered that cognitive reappraisal improves social functioning and lowers emotional suffering (John & Gross, 2004). According to several studies, adolescent females often report lower levels of self-esteem than boys, especially in the middle to late stages of adolescence (Kling et al., 1999; Bleidorn et al., 2016).

According to Nolen-Hoeksema (2012), girls are more prone to ruminative thinking and less likely to employ efficient emotion regulation techniques, both of which increase their susceptibility to anxiety and depression. These gendered trends draw attention to the necessity of specialized mental health care.

Few studies have looked at how self-esteem and emotional regulation interact in the setting of anxiety, even though earlier research has addressed these concepts independently in adolescents. Comparative research examining these differences is still scarce, although anxious adolescents frequently exhibit maladaptive emotional regulation techniques and worse self-esteem than their peers who are not anxious. Furthermore, the majority of the research currently in publication is centred on Western societies, which could not take into consideration the particular cultural elements influencing teenage experiences in India, such as pressure to do well academically, expectations from family members, and the stigma associated with mental health (Chandra & Minkovitz, 2007). These sociocultural factors can have a big impact on coping strategies, including emotional regulation and self-esteem, as well as the onset and manifestation of anxiety.

Crucially, it has also been demonstrated that gender moderates these associations, with girls often displaying poorer self-esteem and a stronger propensity for maladaptive regulating

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techniques, which heightens their susceptibility to anxiety and depression. Nevertheless, there is a dearth of integrative research that takes into account the effects of anxiety state and gender on these psychological factors at the same time. In order to close this gap and provide culturally appropriate insights into the interactions between these crucial developmental elements, the current study compares the emotional regulation and self-esteem of anxious and non-anxious adolescents in an urban Indian setting.

### ***Rationale for the Study***

There is still a lack of research that simultaneously looks at anxiety, self-esteem, and emotional regulation via a gendered perspective, despite the increased awareness of adolescent mental health. The majority of current research limits its relevance to Indian adolescents by concentrating on these characteristics either alone or in Western contexts. Thus, by providing a thorough comparative investigation of self-esteem and emotional regulation in both anxious and non-anxious adolescents across genders in an Indian metropolitan setting, this study seeks to close the gap.

### ***Objectives of the Study***

- To compare the self-esteem of anxious and non-anxious adolescents.
- To compare the emotional regulation of anxious and non-anxious adolescents.
- To examine the role of gender in self-esteem and emotional regulation among anxious and non-anxious adolescents.

### ***Hypotheses***

- There will be a significant difference in self-esteem between anxious and non-anxious adolescents.
- There will be a significant difference in emotional regulation between anxious and non-anxious adolescents.
- There will be a significant interaction effect of gender and anxiety on self-esteem and emotional regulation.

## **METHODOLOGY**

### ***Research Design***

A 2×2 factorial design was used in this investigation, and the two independent variables were anxiety level (both anxious and non-anxious) and gender (male and female). This design made it possible to evaluate the primary impacts of gender and anxiety state as well as their interaction effects on the dependent variables, emotional regulation, and self-esteem. A quantitative, between-groups comparative method was used to examine the psychological aspects of the study.

### ***Sampling Technique***

Participants were selected from two government-aided degree institutions in Bhubaneswar, Odisha, using a purposive sampling approach. The Generalised Anxiety Disorder Scale (GAD-7) was used to examine 400 undergraduate students, ages 18 to 21. One hundred and twenty participants—60 anxious and 60 non-anxious adolescents—were chosen based on the results. A balanced sample for factorial analysis was ensured by the equal representation of each gender (30 males and 30 females) within each group. The adolescents were classified as anxious if their GAD-7 score was between 10 and 14, which indicates moderate anxiety; adolescents who scored less than 5 were classified as non-anxious.

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### *Tests Used*

- **Generalized Anxiety Disorder Scale (GAD-7):** Spitzer et al. (2006) created the popular 7-item Generalized Anxiety Disorder Scale (GAD-7), a self-report tool used to gauge the intensity of generalized anxiety symptoms during the past two weeks. Total scores range from 0 to 21, with each item being graded on a 4-point Likert scale from 0 ("not at all") to 3 ("nearly every day"). A threshold of  $\geq 10$  is typically used to indicate clinically significant anxiety, whereas cut-off values of 5, 10, and 15 indicate mild, moderate, and severe anxiety, respectively. Strong convergent validity and good internal consistency (Cronbach's  $\alpha = 0.92$ ) are two of the GAD-7's outstanding psychometric characteristics (Löwe et al., 2008). Because of its short duration, simplicity of use, and precision in diagnosis, it is appropriate for use with adolescents. The GAD-7 was utilized to categorize individuals in this study into two groups: those who were anxious ( $\geq 10$ ) and those who were not. Its cross-cultural adaptability and suitability for evaluating anxiety in urban Indian teenagers are further supported by the scale's validation in Indian populations (Sapra et al., 2020).
- **Rosenberg Self-Esteem Scale (RSES):** The 10-item Rosenberg Self-Esteem Scale (RSES), created by Rosenberg in 1965, is a self-report tool used to evaluate global self-esteem, which represents a person's overall perception of acceptance and value in themselves. A 4-point Likert scale, ranging from "strongly agree" to "strongly disagree," is used to score the items, which include both positively and negatively phrased statements. With broad construct validity across a range of groups and good internal consistency (Cronbach's  $\alpha = 0.85$ ), the RSES is one of the most popular and validated instruments in psychological research. Adolescents' perceived self-esteem was assessed in this study, offering a solid foundation for contrasting anxious and non-anxious groups. Its employment in the setting of Indian adolescents is further supported by its cross-cultural flexibility.
- **Emotional Regulation Questionnaire (ERQ):** The 10-item self-report Emotional Regulation Questionnaire (ERQ), created by Gross and John (2003), evaluates two fundamental emotional regulation techniques: Expressive Suppression (4 items) and Cognitive Reappraisal (6 items). The Likert scale, which has seven points, goes from "strongly disagree" to "strongly agree." With Cronbach's  $\alpha$  often falling between 0.75 and 0.82, the ERQ has proven to have strong psychometric qualities and has been verified in a variety of age groups and cultural situations. The ERQ was utilized in this study to assess the habitual emotion regulation techniques of adolescents, providing information on how both anxious and non-anxious people handle their emotions under stress.

### *Procedure*

Formal authorization and ethical clearance were received from the heads of each involved institution before data collection. Following an explanation of the study's goals, participants received guarantees of anonymity, voluntary involvement, and the freedom to discontinue participation at any moment. The GAD-7 scale was initially used to assess adolescents' anxiety levels after informed consent was obtained. A controlled classroom environment was used to administer the RSES and ERQ to those who satisfied the requirements. All of the surveys were given in English, and help was offered if anyone had trouble understanding them. Over two weeks were spent gathering the data.

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### Statistical Analysis

Data were coded and analyzed using IBM SPSS (Version 26.0). Descriptive statistics (mean, standard deviation) were computed to summarize the scores on self-esteem and emotional regulation. A two-way Analysis of Variance (ANOVA) was conducted to test the main effects of gender and anxiety, as well as their interaction effect on the dependent variables. Post hoc comparisons using Tukey's HSD test were conducted when required. A significance level of  $p < .05$  was used to determine statistical significance.

## RESULTS

### Descriptive Statistics

Table 1 presents the means and standard deviations of Self-Esteem and Emotional Regulation scores across the four groups. These descriptive statistics help understand group-wise performance trends before inferential testing.

**Table 1: Descriptive Statistics of Self-Esteem and Emotional Regulation**

Group	Self-Esteem (M±SD)	Emotional Regulation (M±SD)
Anxious Males	17.3 ± 3.2	42.5 ± 4.8
Anxious Females	16.7 ± 3.5	41.9 ± 5.1
Non-Anxious Males	21.2 ± 2.9	48.1 ± 4.6
Non-Anxious Females	20.8 ± 3.0	47.5 ± 4.9

**Note:** Non-anxious adolescents, both male and female, scored higher on both self-esteem and emotional regulation compared to their anxious counterparts. The gender differences were minimal within each anxious group.

**Table 2 Two-Way ANOVA Results for Self-Esteem**

Table 2 summarizes the ANOVA results for the main and interaction effects on Self-Esteem.

**Table 2: Two-Way ANOVA for Self-Esteem**

Source	SS	df	MS	F	p
Gender	12.30	1	12.30	1.42	.235
Anxiety Level	310.80	1	310.80	35.89	<.001**
Gender x Anxiety	3.70	1	3.70	0.43	.514
Error	1004.00	116	8.66		
Total	1330.80	119			

**Note:** There was a statistically significant main effect of anxiety on self-esteem ( $p < 0.001$ ), indicating that anxious and non-anxious adolescents significantly differed in self-esteem scores. However, gender and the interaction between gender and anxiety were not significant.

**Table 3 Two-Way ANOVA Results for Emotional Regulation**

Table 3 displays the results of ANOVA for Emotional Regulation

**Table 3: Two-Way ANOVA for Emotional Regulation**

Source	SS	df	MS	F	p
Gender	14.20	1	14.20	1.16	.284
Anxiety Level	412.10	1	412.10	38.02	<.001**
Gender x Anxiety	6.90	1	6.90	0.64	.425
Error	1256.30	116	10.83		
Total	1689.50	119			

**Note:** Similar to self-esteem, emotional regulation was significantly affected by anxiety levels ( $p < .001$ ), while gender and the interaction effect did not reach statistical significance.

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### Table 4: Summary of Main Findings

Table 4 summarizes the significance of each effect for the dependent variables.

### Table 4: Summary of Findings

Variable	Gender Effect	Anxiety Effect	Gender x Anxiety
Self-Esteem	NS	Significant	NS
Emotional Regulation	NS	Significant	NS

Note: NS= Not Significant; Significant at  $p < 0.05$  level

Anxiety significantly influences both self-esteem and emotional regulation among adolescents. However, gender alone or its interaction with anxiety did not produce significant effects, suggesting that the psychological differences observed are more influenced by anxiety levels than gender.

## DISCUSSION AND CONCLUSION

In line with previous research, the results of this study show that anxiety significantly affects adolescents' self-esteem and emotional regulation. Compared to their anxious peers, adolescents who were classified as non-anxious showed improved emotional regulation techniques and greater levels of self-esteem. These outcomes support previous research by Muris (2002), who found a negative correlation between adolescent anxiety symptoms and self-esteem. Similarly, research by Aldao et al. (2010) and Garnefski et al. (2004) supports the idea that people with high anxiety levels have trouble regulating their emotions. The insignificant main effect of gender and the non-significant interaction between gender and anxiety suggest that the psychological processes of self-esteem and emotional regulation operate similarly across genders in this context. This supports findings by Matud (2004), who found minimal gender differences in emotional processing among adolescents when anxiety levels were controlled.

The observed differences in mean scores (Table 1) further indicate that while both males and females benefit from lower anxiety levels in terms of psychological well-being, the impact of gender alone is not sufficient to bring about statistically significant differences. These findings reinforce the importance of targeting anxiety reduction in interventions aimed at improving adolescent mental health (Compas et al., 2017).

This study concludes that anxiety significantly reduces both self-esteem and emotional regulation among adolescents, regardless of gender. The implications are noteworthy, suggesting that emotional and psychological well-being programs for adolescents must primarily address anxiety management. Gender-specific interventions may be less essential than those focusing broadly on emotional resilience and anxiety reduction.

### Recommendations

- Mental health programs that include seminars for intervention and anxiety screening should be implemented at educational institutions.
- In order to identify early indicators of anxiety in teenagers, parents and educators need to receive training.
- Access to psychological counselling needs to be provided at educational institutions.
- The curriculum should incorporate courses on emotional intelligence and coping mechanisms.

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- To establish a secure emotional atmosphere, peer support networks have to be established.

### **Suggestions for Future Research**

Future research might examine longitudinal data to evaluate the long-term effects of anxiety on emotional regulation and self-esteem. Qualitative approaches might also be used in studies to better understand the individual experiences of teenagers. Greater generalizability might be obtained from a more varied sample that includes people from various socioeconomic and cultural backgrounds. It would also be beneficial to compare clinical and non-clinical teenage groups in studies.

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### **Conflict of Interest**

The author declares that there is no conflict of interest related to the publication of this research study.

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