

Research Paper

A Comparative Study of Emotional Competence, Social Competence, and Mental Health Among Deprived and Non-Deprived Youths

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ABSTRACT

This research article explores differences in emotional competence, social competence, and mental health between deprived and non-deprived youths. It is based on a sample of 100 participants (50 deprived and 50 non-deprived), balanced by gender (25 males and 25 females), aged 18 to 24. Deprivation status was assessed using a standardised measure, while emotional and social competencies and mental health were evaluated through self-report tools. A 2 x 2 ANOVA analysed the effects of deprivation status and gender. Results showed that non-deprived youths scored higher in all areas. Males also had higher scores than females. The interaction of deprivation status and gender was not statistically significant for emotional competence, social competence, or mental health. Findings indicate that deprivation negatively impacts socio-emotional functioning and mental health, highlighting the need for targeted school and community interventions to support youths facing deprivation.

Keywords: *emotional competence, social competence, mental health, deprived youths, non-deprived youths*

Youth represents a crucial developmental stage, characterised not only by rapid emotional changes but also by a range of social expectations, identity exploration, and an increasing desire for independence. During this transformative period, adolescents face the challenge of navigating complex emotional landscapes, establishing and maintaining relationships, and effectively solving interpersonal problems. They must also strive to maintain psychological balance amid external demands, including academic pressures, family responsibilities, and community expectations.

The success with which young people handle these adaptive tasks is greatly influenced by their environmental contexts. Supportive environments rich in resources and positive interactions can improve developmental outcomes, while deprivation, whether emotional, social, or economic, can hinder the growth of essential emotional, social, and mental health skills.

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Emotional competence is defined as the ability to recognise, understand, express, and regulate emotions in ways that promote effective functioning in daily life. For example, being able to identify one's own feelings and those of others allows a young person to respond appropriately in social situations. This skill is vital for managing the intense emotional fluctuations typical of adolescence.

Social competence includes behaviours that are socially appropriate and aligned with set goals during interactions. This involves the ability to cooperate with peers, communicate effectively, demonstrate empathy, and resolve conflicts peacefully. These skills not only improve interpersonal relationships but also lay the foundation for future adult interactions. Mental health is often described as a state of psychological well-being in which individuals can cope with everyday stresses, function productively, and maintain meaningful relationships. This state results from both emotional and social competencies. Adolescents who effectively regulate their emotions tend to engage more positively with their peers. Conversely, those with strong social skills often report a greater sense of belonging and emotional support, factors crucial for healthier mental functioning.

Brasseur et al. (2013) examined emotional competence as a multidimensional construct linked with psychological adjustment and social functioning. Their findings showed that youths with stronger emotional competence were better able to understand, express, and regulate emotions, which supported healthier interpersonal relations and better psychological well-being. The study is relevant because it indicates that emotional competence is a protective factor in adolescent development and mental health.

Romppanen et al. (2021) studied the significance of adolescent social competence for later adaptive functioning and mental health. The researchers found that stronger social competence in adolescence was associated with fewer internalizing symptoms and better functioning in young adulthood. Their work suggests that social competence is not only a social asset but also a mental health resource, making it an important variable in comparative youth research.

Visser et al. (2021) reviewed evidence on neighbourhood deprivation and young people's mental health and well-being. The review reported that deprivation was generally associated with poorer psychological outcomes, although findings varied by context and measurement. The study is important for research on deprived and non-deprived youths because it supports the view that deprivation-related environments may adversely influence emotional adjustment, social development, and overall mental health.

Objectives of the study:

1. To compare deprived and non-deprived youths on emotional competence, social competence, and mental health.
2. To examine whether male and female youths differed on these variables.
3. To test whether deprivation status and gender interact with these variables.

Hypotheses

1. Non-deprived youths would score higher than deprived youths on all variables, and male youths would score higher than female youths.
2. The interaction effect would be weak or non-significant.

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RESEARCH METHOD

Research Design

The study employed a comparative quantitative design within a 2 x 2 factorial framework. The independent variables were deprivation status (deprived versus non-deprived) and gender (male versus female). The dependent variables were emotional competence, social competence, and mental health.

Participants

The sample consisted of 100 college-going youths aged 18 to 24 years. Of these, 50 were categorised as deprived youths and 50 as non-deprived youths. To retain balance across the factorial design, each deprivation group included 25 males and 25 females. The sample structure, therefore, created four equal cells: deprived males, deprived females, non-deprived males, and non-deprived females, each with $n = 25$.

Measures

Deprivation status was assessed using a standardised deprivation scale described in the uploaded thesis. Emotional competence was evaluated using a standardised scale measuring emotional awareness, expression, and regulation. Social competence was gauged via a standardised social competence inventory covering interpersonal behaviour, social adjustment, and cooperative functioning. Mental health was assessed using a standardised measure of psychological well-being and adjustment. All measures were self-report instruments and were administered in a group setting.

Procedure

After obtaining institutional permission and participant consent, the scales were administered to the selected youths. Participants were classified into deprived and non-deprived groups according to their deprivation scores.

Data Analysis

Descriptive statistics were calculated for all groups. Because the uploaded output showed approximately normal distributions and acceptable spread across study variables, parametric analysis was retained. Separate 2 x 2 between-subjects ANOVAs were conducted for emotional competence, social competence, and mental health. Statistical significance was evaluated at the .05 level.

RESULTS

Table 1 presents descriptive statistics for the four groups. For emotional competence, the highest mean was observed among non-deprived males, followed by deprived males, non-deprived females, and deprived females. A similar ordering appeared for social competence and mental health. In each domain, non-deprived youths obtained higher overall means than deprived youths, and male youths obtained higher means than female youths.

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Table 1 Descriptive Statistics for Emotional Competence, Social Competence, and Mental Health by Group

Group	n	Emotional Competence Mean	Emotional Competence SD	Social Competence Mean	Social Competence SD	MH Mean / SD
Deprived male	25	90.70	2.72	154.80	3.24	188.30 / 2.15
Deprived female	25	86.06	3.02	149.60	2.97	184.42 / 3.82
Non-deprived male	25	92.76	3.11	157.40	2.64	190.90 / 2.02
Non-deprived female	25	88.34	2.92	152.20	2.18	185.70 / 1.49

For emotional competence, deprived males scored a mean of 90.70 (SD = 2.72), deprived females 86.06 (SD = 3.02), non-deprived males 92.76 (SD = 3.11), and non-deprived females 88.34 (SD = 2.92). Deprived youths scored lower than non-deprived youths, with significant effects for both deprivation status ($F(1, 96) = 13.54, p < .001$) and gender ($F(1, 96) = 59.02, p < .001$). The interaction was not significant ($F(1, 96) = 0.03, p = .852$).

For social competence, deprived males averaged 154.80 (SD = 3.24), deprived females 149.60 (SD = 2.97), non-deprived males 157.40 (SD = 2.64), and non-deprived females 152.20 (SD = 2.18). Significant effects were found for deprivation status ($F(1, 96) = 21.79, p < .001$) and gender ($F(1, 96) = 87.17, p < .001$), with no significant interaction ($F(1, 96) = 0.00, p = 1.000$).

For mental health, deprived males scored 188.30 (SD = 2.15), deprived females 184.42 (SD = 3.82), non-deprived males 190.90 (SD = 2.02), and non-deprived females 185.70 (SD = 1.49). Significant effects for deprivation status ($F(1, 96) = 14.76, p < .001$) and gender ($F(1, 96) = 80.82, p < .001$) were found, with no significant interaction ($F(1, 96) = 1.71, p = .194$). Overall, deprivation status and gender independently influenced emotional competence, social competence, and mental health, with gender differences most notable in social competence.

Table 2 Summary of 2 x 2 ANOVA Results for the Three Outcome Variables

Variable	Effect	F	df	p
Emotional competence	Deprivation	13.54	1, 96	< .01
Emotional competence	Gender	59.02	1, 96	< .01
Emotional competence	Interaction	0.03	1, 96	NS
Social competence	Deprivation	21.79	1, 96	< .01
Social competence	Gender	87.17	1, 96	< .01
Social competence	Interaction	0.00	1, 96	NS
Mental health	Deprivation	14.76	1, 96	< .01
Mental health	Gender	80.82	1, 96	< .01
Mental health	Interaction	1.71	1, 96	NS

The study compared deprived and non-deprived youths regarding emotional competence, social competence, and mental health, finding that non-deprived youths consistently

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outperformed deprived youths. It also indicated that male youths had higher mean scores than female youths, although the interaction between deprivation status and gender was not statistically significant.

Lower scores among deprived youths may be attributed to developmental disadvantages, such as exposure to chronic stress and limited emotional support, which can hinder their emotional regulation and interpersonal confidence. This suggests that emotional and social competence serve as protective factors for mental health; those who manage emotions and maintain positive relationships are likely to show better mental health outcomes.

Caution is advised in interpreting gender differences, as higher scores among males do not indicate superiority but may reflect socialization and contextual factors. The practical implication is to create support systems that address the diverse needs of all youths rather than ranking them by gender.

CONCLUSION

Non-deprived youths demonstrate better emotional competence, stronger social competence, and healthier mental functioning than deprived youths. Male youths obtained higher mean scores than female youths across all three outcomes, whereas interaction effects were not significant. The central implication is that deprivation remains an important developmental risk condition. Interventions that strengthen emotional regulation, social adaptation, and mental health support are therefore especially important for deprived youth populations.

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Conflict of Interest

The author(s) declared no conflict of interest.

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