Rethinking Social Action.
Core Values in Practice

The Self-Efficacy of the Emerging Adult, Student or Graduate

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Abstract

This research aimed to highlight a model of self-efficacy in emerging adults (ages 18/20 – 30 years). We selected a sample of 191 participants, students and graduates. Our goal was to identify the optimum period of intervention to prevent the abandon and capitalization of the latent abilities of these young people. According to a report of the NASOR [14], the rate of academic studies abandon is of 40 per cent. At the same time, there is a significant number of students or graduates who do not succeed to secure a position suitable to their academic training and thus the opportunity of enhancing the development area closest to them. Between the ages of 18 and 26 we noticed a decrease of the records of the perceived self-efficacy, with a minimum between 25 and 26 years. The reasons could be some artefacts coming from their adolescence period, the changing of the paradigm linked to the educational system (different in the academic environment), the tendency towards independence and the confrontation with difficulties in ensuring adequate material conditions, the low perception of the practical utility of the accumulated knowledge. We identified a peak of the high scores of self-efficacy, statistically significant, around the age of 27. The explanation may be due to positive changes such as: the first professional achievements, followed by the emergence of new career opportunities, the future oriented perspective regarding the foundation of a family. We did not ascertain gender regarding differences.

Keywords: self-efficacy; age; gender; emerging adult; abandon.

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1. Introduction

The personality factors of the social-cognitive theory have an important role in developing coping mechanisms, especially in unstable or crisis situations, and influences decision-making processes.

Self-efficacy refers to how someone perceives his ability to mobilize himself to overcome the difficulties encountered in solving tasks. "We consider that the people's beliefs on their efficacy significantly affect the kind of choices they make. In particular, it affects the level of motivation and perseverance in front of obstacles. Success requires most often an constant effort, low self-efficacy, in this case, becomes a self-limiting factor. To succeed, people need a sense of self-efficacy, along with resistance in front of inevitable obstacles and inequities of life" [2]. People with a high self-efficacy, they set high goals. In case of a failure, they can recover faster. The failure is due rather to the lack of knowledge and skills than to the poor personal capacities. In case of people with low self-efficacy, the emphasis is on personal shortcomings. Obstacles for such persons are difficult to overcome and increase the rate of failure. Such persons have the tendency to diminish effort, they assume smaller goals and in this manner, he builds a personal history with few success experiences. Albert Bandura highlights four sources of self-efficacy: experience of success, social modelling, social persuasion and emotional states.

The human development occurs throughout life and crosses the alternative stages of crisis and stability. During this process, it is important to act on the proximal development zone, defined by Lev Vâgotski, as the difference of individual and collective operation of the cognitive system [apud. 8]. On the other hand, Erik Erikson, in the theory of psychosocial development, reinforces the fact that depending on the successful conclusion of a crisis will be positively influenced by the psychological well-being of an individual during that period. He describes the stage between 18/20 years and 30 years, as determined by the intimate relationship versus isolation. The social determinants for this stage are friends and couple relationship [7]. The way how it will be resolved this period, called by Erikson "the young adult" [apud. 8], could lead to a favourable outcome and to an unfavorable outcome. In the first circumstance, the young adult will develop skills of love and dedication [9]. If not, will emerge a trend of isolation and the person will manifest superficial relationships with others.
2. Problem Statement

According to the study conducted by Karadimas and Kalantzi-Azizi [5], to which participated 291 students from the University of Athens, revealed that self-efficacy plays an important role in shaping threats from situations of challenge or loaded with some stakes. The research carried out by Van Der Westhuizen and collab. [11] with the participation of 429 students from South Africa, targeted the link between academic performance and the following factors: the sense of coherence, place of control, optimism, and self-efficacy. A significant prediction had self-efficacy, even if the effect size showed a lower practical importance of research. Studying the predictors of professional satisfaction and activity performance, Judge Timothy A. and Bono Joyce E. [6], found a group of 227 participants to which satisfaction correlates significantly with self-efficacy (0.45). On the other hand, performance correlates significantly with self-efficacy (0.23), internal locus of control (0.22) and emotional stability (0.19). The research conducted by Di Benedetto and Bembenutty [3] on a sample of 113 students from New York showed that, during a semester, the self-efficacy beliefs have changed and this predicted a positive development on the final performance. They found gender differences. Erlich Richard and Darlene Russ Eft [4] investigated on a sample of 120 students, the academic counselling effect. They found a correlation between the increase in self-efficacy, the level of learning and self-adjustment strategies. The previous researches have not approached sufficiently the self-efficacy variation depending on the age at the stage of development of the emerging adult (18-30 years). This research emphasizes what may be useful for the adaptation of the vocational orientation programs and prevention of abandonment in the academic environment.

3. Research Questions/Aims of the research

Starting from all of the above and from the fact that the dropout rate is very high in the academic environment, we wondered if there are specific periods of age, requiring mainly a support program to prevent this situation. We intended to highlight the relationship between age and self-efficacy, as the latter is a good predictor of performance. The research was focused on students and on those continuing their academic development, between the ages of 18-30 years. In our opinion, knowing these relationships and highlighting the low-level periods may constitute the basis for developing programs designed to support these categories of young people.
to prevent abandonment, orientation to disadaptive activities (considered palliative for reinforcement), structuring of certain psychical disorders (stress, depression) or manifestation of anti-social tendencies.

The first working hypothesis is that there are differences in the level of perceived self-efficacy depending on age.

The second working hypothesis is that there are significant gender differences in perceived self-efficacy.

4. Research Methods

4.1. Participants

Data was collected from 204 participants from Bucharest, Pitesti, Cluj and Alba Iulia. Participants were chosen from young adults, students and MA, aged between 18 and 30 years. After normalization of the data collected remained a number of 191 of which 66 were male (34.5%) and 125 females (65.5%). Among participants, 13 (6.8%) had a very low level of self-efficacy, 42 (22%) low level, 91 (47.6%) medium level, 29 (15.2%) high level and 16 (8.4%) very high level.

4.2. Instruments

For self-efficacy evaluation, we used SES Scale developed by Schwarzer, Jerusalem [10]. The scale has 10 items, each with four possible answers: "completely untrue as far as I'm concerned," "the most untrue," "the most true as far as I'm concerned" and "perfectly true as far as I'm concerned", rated on a scale from 1-4. Some psychometric qualities of the scale were highlighted by Baban [1]. The scale has been validated for the population of Romania by Vasiliu and others [13].

4.3. Procedure

The participants were trained on the questionnaires. The participants were told that there are not correct or less correct answers in items. The participants were instructed to tick off only one option for each item. The administration method for each scale was paper-and-pencil. The scales administration had no time limit. This research was carried out in compliance with Art. 7, 8, 10 and 11 of the Code of Ethics of the profession of psychologist with the right to free practice adopted by Decision 4CN/2013 by the College of Psychologists in Romania as well as with the provisions of Appendix 2, Part 1: Preamble of the Disciplinary Procedure Code [16]. The participants were informed about the objectives pursued and
were explained the content of the tests used and on fact that the participation was voluntary with due observance of the data confidentiality and of the assessment outcomes. Moreover, was brought to the participants’ attention that they could withdraw from the research at any time without any negative repercussion on them. The consent protocol consisted of the free choice of participants to deliver or not the filled in questionnaires to the assessors (authors of research). They had the opportunity to choose between the opportunity to further collaboration or withdrawal from the group subject to research.

4.4. Experimental design

We choose a non-experimental research design to highlight a pattern of relationships between age, gender and perceived self-efficacy:

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The questionnaires were applied individually or in groups without taint the outcome through direct interventions during the assessment.

5. Findings

After the descriptive analysis of data resulted that, the distribution of variable "perceived self-efficacy" is almost symmetric (Table 1), with values of skewness and kurtosis, which approaching normal curve of Gauss values. The results allowed inferential data analysis.

<table>
<thead>
<tr>
<th>Table 1. Descriptive data analysis results</th>
</tr>
</thead>
<tbody>
<tr>
<td>N</td>
</tr>
<tr>
<td>----</td>
</tr>
<tr>
<td>Age</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Self-efficacy</td>
</tr>
</tbody>
</table>

Following one-way analysis of variance (ANOVA) for independent scores or uncorrelated scores, the Levene test for the similarities of variances, revealed that the test result is significant \((F (12.178) = 1.958, p = 0.031)\). This meant that our distribution is inhomogeneous, for this reason was chosen for comparison the Tamhane model. Overall, effect of age on perceived self-efficacy, was statistically significant \((F (12.191) = 2.390, p = \)
0.007). After an adjustment Tamhane, significant differences between mean scores of self-efficacy, depending on age, were those indicated in Table 2.

**Table 2. Significant differences of self-efficacy by age**

<table>
<thead>
<tr>
<th>Age</th>
<th>Mean (M)</th>
<th>Standard Deviation (s)</th>
<th>t-score</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>19 years</td>
<td>31.26</td>
<td>3.360</td>
<td>(-4.725)</td>
<td>0.010</td>
</tr>
<tr>
<td>20 years</td>
<td>32.00</td>
<td>2.253</td>
<td>(-4.000)</td>
<td>0.050</td>
</tr>
<tr>
<td>21 years</td>
<td>31.40</td>
<td>4.416</td>
<td>(-4.929)</td>
<td>0.033</td>
</tr>
<tr>
<td>22 years</td>
<td>31.07</td>
<td>3.362</td>
<td>(-5.600)</td>
<td>0.030</td>
</tr>
<tr>
<td>24 years</td>
<td>30.40</td>
<td>4.290</td>
<td>(-5.600)</td>
<td>0.002</td>
</tr>
<tr>
<td>25 years</td>
<td>30.40</td>
<td>3.152</td>
<td>(-6.000)</td>
<td>0.005</td>
</tr>
<tr>
<td>26 years</td>
<td>30.00</td>
<td>1.414</td>
<td>(-5.600)</td>
<td>0.002</td>
</tr>
<tr>
<td>27 years</td>
<td>36.00</td>
<td>1.673</td>
<td>(-5.600)</td>
<td>0.005</td>
</tr>
<tr>
<td>28 years</td>
<td>33.92</td>
<td>2.060</td>
<td>(-3.523)</td>
<td>0.039</td>
</tr>
</tbody>
</table>

For all cases where we found significant differences in the average between the confidence interval of 95%, does not include zero. This was graphically illustrated in Figure 1, the relationship between age and average scores, confirmed by the research sample, for the perceived self-efficacy.

As a consequence, hypothesis 1 null, was not confirmed.

![Figure 1. The relationship between age and perceived self-efficacy](image)

We used t-student test, for independent samples, for self-efficacy scores, obtained by female and male participants. There were no significant differences between average scores (p > 0.05) and 95% confidence interval, includes zero value.
Figure 2. The relationship between age and self-efficacy for male and female participants

In this situation, we decided confirmation of the second null hypothesis. According to the chart (Figure 2) can be seen the common point for the male and female participants around the age of 27 years. For extreme cases (18 and 30 years) data is not enough to draw a conclusion.

6. Conclusions

From this research, we found that around the age of 27 years there is a maximum manifestation of perceived self-efficacy. This is preceded by a period of stagnation at a medium or low level, with a minimum highlighted around the age of 25-26 years. The causes of this stagnation, followed by a regression at low levels, can be determined by changing the paradigm of cognitive development in a totally different environment with increased demands and with finalities which are not fully understood. Moreover, in a previous study [12], we highlighted the correlation between self-efficacy and sense of coherence, another factor of the social-cognitive personality theory, consisting of the following elements: understanding, flexibility, control, meaning, and sense. The emerging adult, still feels the separation from childhood, begins to understand that the responsibility for his actions is increasingly greater and the crisis of adolescence is still vivid in his memory. Trying to become independent, separation from parents by staying single and to ensure its existence, are challenges, which often resulted in failures and disappointments. Time management becomes increasingly difficult, given high academic requirements, the need to socialize in groups of equals and the need to satisfy their impulses sexual-aggressive. Some young people
have already experienced some form of higher education, noting that, they not provide enough intellectual satisfaction or does not match the goals, and trying to choose another development perspective, possibly in another area. Many young people face the difficulty of finding employment according to academic preparation. In these cases, disillusionment can lead to maladaptive decisions and perception of lack resources, to overcome the situation. For emerging adults, who have already structured personality disorder, their symptoms can increase. A negative response from the social environment may reinforce the perception of inadequacy and lack of efficacy. On the other hand, around the age of 27 years, appear the first achievements. Finding an appropriate job or promotion in a job according to his education can lead to increased confidence in their own resources and activation of latent skills until then. Zone of proximal development can thus be exploited by interacting with the most experienced in the field. In this period are also manifested the first tendencies to form a family. According to the National Statistics Institute [15], the average age at first marriage for men is 30.6 years and for women is 27.4 years. If the results of development period is favourable when the emerging adult is intensifying feelings of love and dedication. Future plans for starting a family, developed with partner/partner is a factor favouring the discovery of new resources and the formulation of strategies aimed at achieving common objectives. Self-confidence and sense of control over future, increases the perceived self-efficacy. The particularly successful experiences are evoked and the emotions are directed to support the development of efficient and adaptive coping mechanisms.

In conclusion, the period between 20 to 26 years is the most suitable for implementation of supportive programs to prevent or lessen the negative effects due to the weak perception of self-efficacy.

References


