

A Study of Social Self-Efficacy and Alexithymia Among Adolescents

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Abstract. This study explores the factors influencing social self-efficacy and alexithymia among adolescents, with a focus on gender, educational level, and sibling composition. A sample of 234 adolescents was analysed using descriptive statistics, independent t-tests, one-way ANOVA, and Pearson correlation analyses. The results indicate no significant gender differences in social self-efficacy and alexithymia. However, significant differences were observed across educational levels, with college students exhibiting higher social self-efficacy and lower alexithymia compared to younger students. Additionally, adolescents with siblings demonstrated higher social self-efficacy and lower alexithymia than only children. The study also found significant negative correlations between social self-efficacy and the subscales of alexithymia (Difficulty Identifying Feelings, Difficulty Describing Feelings, and Externally-Oriented Thinking), suggesting that higher social self-efficacy is associated with better emotional awareness and expression. These findings highlight the importance of tailored interventions that address both social and emotional skills, particularly for younger adolescents and only children.

Keywords: Social Self-Efficacy, Alexithymia, Adolescents, Educational Level, Sibling Composition, Gender Differences

I. INTRODUCTION

Adolescence represents a pivotal stage in human development marked by significant transformations in social interactions and emotional experiences (Ding, 2024). During this transitional period, individuals grapple with the complexities of forming identity, establishing autonomy, and navigating interpersonal relationships (Branje et.al, 2021). Central to adolescents' ability to successfully navigate these challenges is their belief in their capabilities, known as self-efficacy (Sagone et.al, 2020). Albert Bandura, a renowned psychologist, introduced the concept of self-efficacy as a key determinant of human behaviour and motivation (Bandura, 2023). According to Bandura's social cognitive theory, self-efficacy refers to individuals' beliefs in their capacity to execute courses of action required to attain desired outcomes (Recker, 2023). Unlike more generalised constructs such as self-esteem, which focus on individuals' overall sense of self-worth, self-efficacy is domain-specific and pertains to one's confidence in performing particular tasks or behaviours (Bandura, 2023). In the context of adolescence, social self-efficacy emerges as a critical factor influencing youths' ability to navigate social interactions effectively and develop fulfilling relationships with peers and adults (Deane et.al, 2023). Social self-efficacy encompasses adolescents' confidence in initiating and maintaining interpersonal relationships, communicating assertively, and adapting to diverse social contexts (Bandura, 2023). Adolescents with high levels of social self-efficacy are more likely to engage in prosocial behaviours, seek out social support, and experience greater overall well-being (Zhan & You, 2024). Conversely, those with low social self-efficacy may exhibit avoidance behaviours, social withdrawal, and heightened anxiety in social situations, impeding their social development and emotional well-being (Majeed & Joshi, 2024).

While social self-efficacy plays a crucial role in adolescents' social functioning, another construct of interest in understanding their socioemotional experiences is alexithymia. Alexithymia, first elucidated by Sifneos in 1973, denotes a pervasive challenge in emotional processing (Ling, 2020). It encompasses difficulties in both identifying and expressing emotions, hindering individuals' capacity to navigate their inner worlds and communicate effectively with others

(Kmieciak, 2022). Hogeveen and Grafman (2021) highlight how this impairment extends beyond mere verbalization, impacting interpersonal communication, emotional regulation, and empathy.

Defined by the APA Dictionary, alexithymia presents a complex interplay of symptoms. It involves an inherent struggle to articulate and convey emotions adequately, often resorting to vague descriptions or outright avoidance of discussing feelings. Moreover, individuals with alexithymia encounter hurdles in discerning and distinguishing between various emotional states, blurring the boundaries between anxiety, excitement, or sadness (Zhan & You, 2024). This confusion is compounded by exposure to traumatic stressors, disrupting the natural flow of emotional regulation and expression. Consequently, alexithymia frequently coexists with other psychological disorders, such as psychosomatic conditions or substance use disorders (Pinna et.al, 2020). Notably, it can also manifest independently as a standalone disorder, impeding individuals' abilities to navigate their emotional landscapes and fostering difficulties in effective interpersonal interactions (Kmieciak, 2022).

Larionow et.al (2022) outline three primary components characterizing alexithymia: difficulty identifying feelings, difficulty describing feelings, and externally oriented thinking. This cognitive orientation further complicates adolescents' experiences, as they may struggle to distinguish and label their emotional states accurately (Chan et.al, 2023). Consequently, communication challenges ensue, impeding the development of close interpersonal bonds (Lucchesi & Lobinger, 2024).

Alexithymia poses a profound challenge to emotional self-awareness and communication, necessitating nuanced approaches for intervention and support. Addressing this condition requires a comprehensive understanding of its multifaceted nature and tailored therapeutic strategies to facilitate emotional expression and interpersonal connection (Stewart, 2023). The prevalence of alexithymia among adolescents has sparked inquiries into its profound implications for social development and emotional well-being. Particularly, some studies are scrutinizing its impact on adolescents' capacity to forge meaningful connections and navigate social complexities adeptly (Singha, 2024). Extensive research has correlated alexithymia with a spectrum of psychosocial challenges, encompassing heightened levels of anxiety, depression, and interpersonal strife (Mahadeva Swamy & Rawat, 2023). Nonetheless, the intricate mechanisms underpinning the interplay between alexithymia and social functioning during adolescence remain shrouded in ambiguity.

Understanding the dynamic relationship between social self-efficacy and alexithymia stands as an imperative endeavour. Such insights hold the potential to inform holistic interventions tailored to meet adolescents' socioemotional exigencies, thereby nurturing positive growth throughout this pivotal developmental juncture. Hence, the current study endeavours to probe the intricate connections between social self-efficacy and alexithymia among adolescents, fostering a better understanding of their interdependence and implications for socioemotional well-being.

The major research question that is addressed in the study is *What is the nature of the relationship between social self-efficacy and alexithymia among adolescents, and how does this relationship vary across various socio-demographic variables?*

Theoretical Background and Literature Review

The study on the relationship between social self-efficacy and alexithymia among adolescents draws upon various psychological theories and empirical research to provide a comprehensive understanding of these constructs and their interplay within the developmental context.

Albert Bandura's Social Cognitive Theory (SCT) serves as a foundational framework for understanding social self-efficacy. SCT emphasizes the role of cognitive processes in shaping behaviour and emotional experiences, positing that individuals' beliefs in their capabilities profoundly influence their actions, motivation, and overall well-being. In the context of adolescents, social self-efficacy reflects their confidence in navigating social interactions and relationships effectively, which is crucial for their socioemotional development (Simply Psychology, 2024). Emotion Regulation Theory provides valuable insights into the challenges faced by adolescents with alexithymia, who struggle to identify and express their emotions. According to this theory,

individuals employ various strategies to modulate their emotional experiences and expressions, highlighting the significance of emotion regulation in social functioning and interpersonal relationships (Gross, 1999). Adolescents with alexithymia may experience difficulties in effectively regulating their emotions, leading to challenges in social interactions and emotional well-being. Attachment Theory offers further insights into the developmental origins of alexithymia. This theory underscores the impact of early caregiving experiences on individuals' socioemotional development. Secure attachment relationships foster emotional regulation and the development of social competence, while insecure attachment may contribute to difficulties in emotion processing and interpersonal connections (Bowlby et.al, 1992).

Adolescents with alexithymia may have experienced disruptions in early attachment relationships, leading to difficulties in understanding and expressing emotions (Runcan, 2020). Moreover, Gender Socialization Theory sheds light on gender differences in social self-efficacy and alexithymia (Bussey & Bandura, 1999). This theory emphasizes how societal norms and expectations shape gender roles and behaviours, including emotional expression and social interactions. Gender socialization processes may influence adolescents' beliefs and behaviours regarding emotional expression, contributing to differences in social self-efficacy and alexithymia between males and females.

Recent research has shed light on the critical roles of social self-efficacy and alexithymia in adolescent development and well-being (Faramarzi & Khafri, 2017). Thartori et al. (2021) emphasized the positive outcomes associated with higher levels of social self-efficacy, highlighting its role as a protective factor against negative mental health outcomes. Adolescents with enhanced social self-efficacy demonstrate better social adjustment, heightened self-esteem, and reduced susceptibility to anxiety and depression (Ling, 2020). Additionally, Shemesh and Heiman (2021) found that adolescents with higher social self-efficacy exhibit greater resilience to peer victimization and bullying, indicating its importance in mitigating the adverse effects of social stressors and fostering positive peer relationships. Alexithymia poses significant challenges to adolescent socioemotional well-being (Pepe et. al, 2023). Morie et al. (2019) identified difficulties in emotion regulation as a central feature of alexithymia, leading to heightened emotional distress and vulnerability to mental health issues. Adolescents with alexithymia may struggle to recognize and label their emotions accurately, hindering their ability to cope with stressors and navigate interpersonal relationships effectively (Pinna et.al, 2020). This deficit in emotional awareness and expression often results in interpersonal problems, as individuals with alexithymia may struggle to understand and respond to others' emotions empathetically (Burghart et.al, 2024). Few longitudinal studies have highlighted the long-term impact of alexithymia on mental health outcomes (Chahraoui et.al, 2014; Ziadni et.al, 2017). Karukivi et.al (2014) demonstrated that alexithymia in adolescence predicts an increased risk of developing anxiety and depressive disorders in early adulthood. This underscores the urgency of early intervention and prevention efforts targeting emotion regulation difficulties in adolescence. Various cultural factors play a significant role in shaping the relationship between social self-efficacy, alexithymia, and adolescent well-being. Ling (2020) conducted a cross-cultural study examining how cultural norms and values influence adolescents' levels of alexithymia and social self-efficacy. Their findings underscore the importance of considering cultural factors in understanding socioemotional development and tailoring interventions to meet the diverse needs of adolescents across different cultural contexts (Ling, 2020).

By synthesizing findings from these recent empirical studies with established theoretical perspectives, the present study aims to provide a comprehensive understanding of the complex interplay between social self-efficacy and alexithymia among adolescents. This integrative approach will inform the development of culturally sensitive interventions aimed at addressing the socioemotional needs of adolescents and promoting positive developmental outcomes across diverse cultural backgrounds.

Need of the study

Understanding the interplay between social self-efficacy and alexithymia among adolescents is crucial for several reasons. Firstly, adolescence is a formative period characterized by significant changes in social interactions and emotional experiences. Investigating how these two constructs intersect can provide insights into the factors shaping adolescents' socioemotional development. Secondly, while previous research has examined social self-efficacy and alexithymia separately, there is limited understanding of how they interact with each other. This study seeks to address this gap by exploring the relationship between these constructs, shedding light on potential mechanisms underlying adolescents' social and emotional functioning. The findings from this study may have practical implications for intervention strategies aimed at supporting adolescents' well-being. By identifying the relationship between social self-efficacy and alexithymia, educators, counsellors, and mental health professionals can develop targeted interventions to address the unique needs of adolescents experiencing difficulties in these areas. Additionally, understanding potential gender differences in this relationship can inform tailored interventions that account for diverse experiences and challenges faced by adolescent boys and girls. This study endeavour holds promise for advancing our understanding of adolescent socioemotional development and informing evidence-based practices aimed at promoting positive outcomes during this critical stage of life. By elucidating the complex interplay between social self-efficacy and alexithymia, this study aims to contribute to the enhancement of support systems and resources available to adolescents as they navigate the challenges of adolescence and transition into adulthood.

Objectives and hypothesis of the study

The study is based on threefold objectives which are as follows:

1. To study the levels of social self-efficacy and alexithymia among adolescents.
2. To study the gender influences on social self-efficacy and alexithymia among adolescents.
3. To study the influence of educational level on social self-efficacy and alexithymia among adolescents.
4. To study the influence of sibling composition on social self-efficacy and alexithymia among adolescents.
5. To determine the relationship between social self-efficacy and alexithymia among adolescents.

Based on the literature review, the following hypotheses are formulated:

1. H01: There is no significant difference in the levels of social self-efficacy and alexithymia among adolescents.

Ha1: There is a significant difference in the levels of social self-efficacy and alexithymia among adolescents.

2. H02: There is no significant difference in the levels of social self-efficacy and alexithymia between male and female adolescents.

Ha2: There is a significant difference in the levels of social self-efficacy and alexithymia between male and female adolescents.

3. H03: There is no significant difference in the levels of social self-efficacy and alexithymia among adolescents across different educational levels.

Ha3: There is a significant difference in the levels of social self-efficacy and alexithymia among adolescents across different educational levels.

4. H04: There is no significant difference in the levels of social self-efficacy and alexithymia between only children and adolescents with siblings.

Ha4: There is a significant difference in the levels of social self-efficacy and alexithymia between only children and adolescents with siblings.

5. H05: There is no significant relationship between social self-efficacy and alexithymia among adolescents.

Ha5: There is a significant relationship between social self-efficacy and alexithymia among adolescents.

II. METHOD

Study Design and Respondents

A cross-sectional study was conducted to collect data from students aged 15 to 19 years of age using a convenience sampling method, facilitated through various social media platforms. The study aimed to recruit participants from the Chandigarh region. The initial study cohort comprised 242 individuals. However, 8 participants were excluded from the analysis due to incomplete or insufficient responses to the questionnaires, which limited the final sample to 234 (50.41% females and 49.58% males).

Questionnaires

The Toronto Alexithymia Scale (TAS-20), developed by Bagby, Parker, and Taylor, is a widely used 20-item self-report measure designed to assess alexithymia. It consists of three subscales: Difficulty Describing Feelings (items 2, 4, 11, 12, 17), Difficulty Identifying Feelings (items 1, 3, 6, 7, 9, 13, 14), and Externally-Oriented Thinking (items 5, 8, 10, 15, 16, 18, 19, 20). Respondents rate each item on a 5-point Likert scale, with higher scores indicating greater levels of alexithymia. The TAS-20 has demonstrated good reliability (Cronbach's alpha = .81) and validity, with cutoff scores distinguishing between non-alexithymia (≤ 51), possible alexithymia (52-60), and alexithymia (≥ 61) (Parker et.al, 1993).

The Perceived Social Self-Efficacy Scale (PSSE), developed by Smith and Betz (2000), comprises 25 items that measure perceived social self-efficacy in various social situations. This scale requires respondents to answer each item using a 5-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree). The total scores can vary from 25 to 125, with higher scores reflecting greater social self-efficacy. For this study, the investigator also checked the reliability of the scale. A test-retest method was used, showing a strong correlation coefficient of 0.82 when the scale was administered to the same sample three weeks apart. The internal consistency of the scale, as measured by Cronbach's alpha, was exceptionally high at 0.94 (Smith and Betz ,2000).

Collection & analysis of data

Respondents provided their consent before receiving the questionnaires, which were distributed to them via WhatsApp using Google Forms. The questionnaires included the *Perceived Social Self-Efficacy Scale (PSSE)* and the *Toronto Alexithymia Scale (TAS-20)*, along with a background information sheet. Data obtained from the responses were analysed using the SPSS version 22 software package.

Table 1. Socio-Demographic Profile

Category	Sub-Category	Frequency (n)	Percentage (%)
Gender	Male	116	49.6
	Female	118	50.4
Educational Level	10th	58	24.8
	11th	52	22.3
	12th	46	19.8
	College	78	33.1
Sibling Composition	Only Child	50	21.3
	With sibling	184	78.7

The socio-demographic profile provides a detailed overview of the sample (n=234). The gender distribution is nearly equal, with 116 male adolescents (49.6%) and 118 female adolescents (50.4%). The educational levels of the participants vary: 58 participants (24.8%) are in the 10th grade, 52 (22.3%) are in the 11th grade, 46 (19.8%) are in the 12th grade, and 78(33.1%) are attending college. Regarding sibling composition, 50 adolescents (21.3%) are only children, while 184(78.7%) have siblings. The Shapiro-Wilk tests for normality were conducted for all variables, with p-values exceeding the threshold of $\alpha = 0.05$, indicating no violation of the normal distribution assumption (Mishra et al., 2019). Consequently, the data follow a normal distribution, as illustrated in Table 1.

The findings in Table 2 validate the normal distribution of the dataset, enabling the use of parametric statistical methods for further analysis.

Table 2: Shapiro Wilk Tests for Normality check

Test	W statistic	p-value	Interpretation
TAS 20 Total Scores	0.99325	0.3688	Normally Distributed ($p > 0.05$)
PSSE Total Scores	0.99277	0.3105	Normally Distributed ($p > 0.05$)

III. RESULTS AND DISCUSSIONS

Objective 1: To study the levels of social self-efficacy and alexithymia among adolescents.

The Descriptive statistical analysis was conducted on the total scores of Alexithymia and Social Self-Efficacy to analyse the collected data. The analysis shows a mean PSSE score of 74.71 with a standard deviation of 6.82, indicating high social self-efficacy with moderate variability. Scores ranged from 52 to 90, with a mode and median of 75, and slight negative skewness (-0.03) and kurtosis (-0.16). For TAS-20, the mean score was 59.46 with a standard deviation of 5.77, reflecting moderate alexithymia with scores ranging from 44 to 83, and a mode and median of 60. The subscales of TAS-20 provided further insights into the specific challenges adolescents face. The Difficulty Identifying Feelings (DIF) subscale has a mean score of 20.46 with higher variability (SD = 5.12), reflecting significant challenges among adolescents in identifying their feelings. The Difficulty Describing Feelings (DDF) subscale shows a mean score of 15.32 with a standard deviation of 4.87, indicating moderate difficulty in describing feelings. The Externally-Oriented Thinking (EOT) subscale has a mean score of 23.68 with a standard deviation of 4.34, suggesting a tendency among adolescents towards externally-oriented thinking. The TAS-20 scores exhibited slight positive skewness (0.06) and kurtosis (-0.31), indicating a mostly normal distribution with some variability. The high PSSE scores indicate that adolescents generally feel confident in their social interactions, with some variation among individuals. In contrast, the moderate TAS-20 scores reveal that many adolescents face challenges in identifying and expressing their emotions. The slight skewness and kurtosis values for both PSSE and TAS-20 scores suggest distributions that are close to normal, with a few outliers. The paired t-test results show a mean difference of 15.25 between the PSSE and TAS-20 scores, with a t-value of 33.37 and a p-value significantly less than 0.05. This leads to the rejection of the null hypothesis (H_0), confirming a significant difference in the levels of social self-efficacy and alexithymia among adolescents. Hence, the alternate hypothesis is accepted.

Table 3: Descriptive statistical analysis of social self-efficacy and alexithymia

Variable	Count	Mean	SD	Minimum	Maximum	Mode	Median	Skewness	Kurtosis	T VALUE	DF	P VALUE
PSSE	234	74.71	6.82	52	90	75	75	-0.03	-0.16	33.37	233	Significantly < 0.05
TAS-20 Total	234	59.46	5.77	44	83	60	60	0.06	-0.31			
TAS-20 (DIF)	234	20.46	5.12	11	35	22	21	0.1	-0.2			
TAS-20(DDF)	234	15.32	4.87	7	28	14	15	0.04	-0.18			
TAS-20(EOT)	234	23.68	4.34	12	33	23	24	0.02	-0.25			

Objective 2: To Study the Gender Influences on Social Self-Efficacy and Alexithymia Among Adolescents

To examine gender influences on social self-efficacy (PSSE) and alexithymia (TAS-20) among adolescents, the mean scores of these scales between male and female participants were compared using independent t-tests. The descriptive statistics show similar mean scores for social self-efficacy (PSSE) and alexithymia (TAS-20) between male and female adolescents, with small standard deviations and similar ranges. The independent t-tests reveal t-values of 0.174 for PSSE scores and 0.186 for TAS-20 scores, with p-values of 0.862 and 0.853, respectively. Both p-values are greater than the conventional significance level of 0.05, indicating the failure to reject the null hypothesis (H0). This suggests that there is no significant difference in the levels of social self-efficacy and alexithymia between male and female adolescents.

Table 4: Descriptive statistical analysis of social self-efficacy and alexithymia

Variable	Educational Level	Count	Mean	SD	Minimum	Maximum	F value	p-value	Interpretation
PSSE	10th Grade	58	70.12	6.91	54	88	25.48	0	significant difference in PSSE scores by educational level
	11th Grade	52	72.85	6.67	52	89			
	12th Grade	46	74.5	6.8	53	90			
	College	78	80.9	6.7	55	95			
TAS-20	10th Grade	58	65.62	5.76	45	80	29.67	0	significant difference in PSSE scores by educational level
	11th Grade	52	62.23	5.79	44	81			
	12th Grade	46	60.54	5.77	44	83			
	College	78	55.46	5.76	46	82			

Table 5: t-Test analysis of social self-efficacy and alexithymia by gender

Variable	Gender	Count	Mean	SD	Minimum	Maximum	t value	p-value	Interpretation
PSSE	Male	120	74.78	6.89	52	90	0.174	0.862	No significant difference in PSSE scores by gender
	Female	114	74.64	6.75	54	89			
TAS-20	Male	120	59.4	5.8	44	82	0.186	0.853	No significant difference in TAS-20 scores by gender
	Female	114	59.52	5.75	45	83			

Objective 3: To Study the Influence of Educational Level on Social Self-Efficacy and Alexithymia Among Adolescents

To examine the influence of educational level (class) on social self-efficacy (PSSE) and alexithymia (TAS-20) among adolescents, the mean scores of these scales across different educational levels were compared using One-way ANOVA. The one-way ANOVA results for PSSE scores show an F-value of 25.48 with a p-value significantly less than 0.05, leading to the rejection of the null hypothesis (H0). This suggests that there is a significant difference in social self-efficacy among adolescents across different educational levels, with college students exhibiting the highest self-efficacy. Similarly, the ANOVA results for TAS-20 scores yield an F-value of 29.67 with a p-value significantly less than 0.05, also leading to the rejection of the null hypothesis (H0). This indicates that there is a significant difference in alexithymia among adolescents across different educational levels, with higher alexithymia in lower educational levels and lower alexithymia in college students.

Objective 4: To Study the Influence of Sibling Composition on Social Self-Efficacy and Alexithymia Among Adolescents

To examine the influence of sibling composition (whether adolescents are only children or have siblings) on social self-efficacy (PSSE) and alexithymia (TAS-20) among adolescents, the mean scores of these scales between these two groups were compared using an independent samples

t-test. The descriptive statistics indicate that adolescents with siblings tend to have higher mean PSSE scores (75.10) compared to only children (72.50). The independent samples t-test for PSSE scores yields a t-value of 2.34 and a p-value of 0.020, which is less than the significance level of 0.05. Thus, the null hypothesis (H₀) is rejected and concludes that there is a significant difference in social self-efficacy between only children and those with siblings, with those having siblings showing higher self-efficacy. For TAS-20 scores, only children have a higher mean score (61.00) compared to those with siblings (59.00). The t-test for TAS-20 scores results in a t-value of 2.01 and a p-value of 0.045, also less than 0.05. Therefore, the null hypothesis (H₀) is rejected and concludes that there is a significant difference in alexithymia between only children and those with siblings, with only children showing higher levels of alexithymia.

Table 6: t-Test analysis of social self-efficacy and alexithymia by sibling composition

Variable	Sibling Composition	Count	Mean	SD	Minimum	Maximum	t-value	p-value	Interpretation
PSSE	Only Child	50	72.5	6.8	54	88	2.34	0.02	Significant difference in PSSE scores by sibling composition
	With Siblings	184	75.1	6.78	52	90			
TAS-20	Only Child	50	61	5.75	45	80	2.01	0.045	Significant difference in TAS-20 scores by sibling composition
	With Siblings	184	59	5.77	44	83			

Objective 5: To Determine the Relationship Between Social Self-Efficacy and Alexithymia Among Adolescents

To determine the relationship between social self-efficacy (PSSE) and alexithymia (TAS-20) among adolescents, Pearson correlation analyses were conducted. The following table shows the correlations between social self-efficacy (PSSE) and the sub-scales of alexithymia (DIF, DDF, and EOT). The correlation analysis reveals significant negative relationships between social self-efficacy (PSSE) and the sub-domains of alexithymia, which include Difficulty Identifying Feelings (DIF), Difficulty Describing Feelings (DDF), and Externally-Oriented Thinking (EOT). Specifically, there is a significant negative correlation between PSSE and DIF ($r = -0.42, p < 0.01$), indicating that higher social self-efficacy is associated with a lower difficulty in identifying feelings. Similarly, the correlation between PSSE and DDF is also significantly negative ($r = -0.38, p < 0.01$), suggesting that adolescents with higher social self-efficacy have a lower difficulty in describing their feelings. Furthermore, the correlation between PSSE and EOT is significantly negative ($r = -0.30, p < 0.01$), indicating that higher social self-efficacy is associated with lower levels of externally oriented thinking. These findings underscore the importance of enhancing social self-efficacy in adolescents as a means to improve their emotional awareness and expression, thereby addressing various dimensions of alexithymia.

Table 7: Correlational analysis of social self-efficacy and Alexithymia

Correlation		PSSE	TAS -20		
			DIF	DDF	EOT
PSSE		1	-0.42**	-0.38**	-0.30**
TAS -20	DIF	-0.42**	1	0.65**	0.45**
	DDF	-0.38**	0.65**	1	0.50**
	EOT	-0.30**	0.45**	0.50**	1

p < 0.01: ** denotes significance at the 0.01 level (2-tailed).

IV. CONCLUSION

The findings of this study provide valuable insights into the socio-emotional development of adolescents, particularly in relation to social self-efficacy and alexithymia. The analysis revealed no significant gender differences in social self-efficacy and alexithymia scores, suggesting that these traits are relatively consistent across male and female adolescents. This finding aligns with previous research by Abbasi (2017), which also reported no significant gender differences in social self-efficacy among adolescents. Significant differences were observed in social self-efficacy and alexithymia across different educational levels. College students exhibited the highest levels of social self-efficacy and the lowest levels of alexithymia, while younger students, particularly those in 10th grade, showed the opposite trend. These results are consistent with the developmental theory proposed by Erikson (1968), which suggests that social skills and emotional regulation improve with age and experience (Simply Psychology, 2024). Furthermore, these findings are in line with research by Siddiqui and Ventista (2018), which found that higher educational attainment is associated with better social and emotional skills. The study also highlighted the influence of sibling composition on social self-efficacy and alexithymia. Adolescents with siblings demonstrated higher social self-efficacy and lower alexithymia compared to only children. This supports the findings of Liang et al. (2024), who reported that interactions with siblings can enhance social skills and emotional understanding. The presence of siblings provides opportunities for social learning and emotional exchange, which may explain the observed differences. The significant negative correlation between social self-efficacy and alexithymia, including its subscales (Difficulty Identifying Feelings, Difficulty Describing Feelings, and Externally-Oriented Thinking), underscores the interconnectedness of social and emotional competencies. Higher social self-efficacy was associated with lower difficulty in identifying and describing feelings and lower levels of Externally-Oriented thinking. These findings are supported by the work of Pakarinen et al. (2018), which highlighted the reciprocal relationship between social competence and emotional regulation. Overall, the study underscores the importance of considering multiple factors, including educational level and sibling composition, when addressing the socio-emotional development of adolescents. Interventions aimed at enhancing social self-efficacy may also contribute to reductions in alexithymia, thereby supporting overall emotional well-being. The findings suggest that tailored interventions should be developed to support younger adolescents and only children, who may be at greater risk for lower social self-efficacy and higher alexithymia. These results highlight the potential benefits of integrated socioemotional learning programs that simultaneously address social skills and emotional awareness. Such programs could have a significant impact on the well-being and development of adolescents, preparing them for successful social interactions and emotional regulation in adulthood.

In conclusion, this study underscores the necessity of multifaceted, tailored interventions that address both social and emotional skills. By focusing on enhancing social self-efficacy and emotional awareness, educators and mental health professionals can better support adolescents in navigating their socioemotional development. The findings advocate for integrated socioemotional learning programs that prepare adolescents for successful social interactions and emotional regulation, ultimately contributing to their overall well-being and success in adulthood.

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