



RESEARCH PAPER

**Fear of Failure, Self-Efficacy, and Emotional Dysregulation in Adolescents**

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**ABSTRACT**

Pakistani adolescents face high-stakes examination culture, collectivist family expectations, and limited psychological support, increasing susceptibility to fear of failure. This cross-sectional study examined statistical associations among fear of failure, self-efficacy, and emotional dysregulation in Pakistani adolescents and tested self-efficacy as an indirect pathway. A convenience sample of N = 300 adolescents (150 males, 150 females; aged 13–19 years) was recruited from secondary and higher secondary institutions in Faisalabad, Pakistan. Fear of failure (PFAI), self-efficacy (GSES), and emotional dysregulation (DERS) were measured using validated instruments showing acceptable to excellent reliability. Fear of failure correlated significantly positively with emotional dysregulation and negatively with self-efficacy; self-efficacy correlated negatively with emotional dysregulation. Simple regression showed fear of failure predicted 19.7% of variance in emotional dysregulation. Bootstrapped mediation (PROCESS Model 4) indicated a significant indirect association via self-efficacy, accounting for approximately 22% of the total effect (partial mediation). Males reported higher self-efficacy; females and rural adolescents reported higher emotional dysregulation. Findings underscore self-efficacy as a key intervention target.

**KEYWORDS** Fear of Failure, Self-Efficacy, Emotional Dysregulation, Pakistani Adolescents, Cross-Sectional Mediation, Secondary Education

**Introduction**

Adolescence is a developmental period characterised by rapid biological, cognitive, identity-related, and social change. These shifts coincide with increasing academic and interpersonal demands, which place pressure on adolescents' appraisal, self-belief, and emotion regulation capacities. When academic achievement is framed as the primary route to family status and social mobility, performance-related fear becomes a clinically and educationally significant variable to study. The convergence of these developmental processes with escalating academic, interpersonal, and institutional demands places extraordinary pressure on adolescents' psychological resources, particularly their capacity to appraise challenges accurately, believe in their own competence, and regulate their emotional responses under stress. When academic achievement is culturally framed as the primary pathway to family honor, social mobility, and personal worth, the stakes associated with performance become magnified to a degree that can fundamentally reshape how young people experience learning and relate to their own potential. (Cashman et al., 2024)

In Pakistani educational settings, these developmental pressures are intensified by a distinctive confluence of collectivist family norms, high-stakes examination culture, limited access to school-based psychological support, and socioeconomic conditions that make academic credentials the primary determinant of life opportunities for millions of families. Pakistani adolescents are routinely exposed to performance expectations that extend far beyond individual achievement to encompass family reputation, community

standing, and intergenerational obligation. In this context, the fear of failing an examination or disappointing a parent carries symbolic weight that is qualitatively different from what is documented in Western educational settings, making Pakistan a particularly compelling and theoretically important context for studying the psychological consequences of performance-related fear (Sharma et al., 2025).

The present thesis investigates three psychologically interrelated constructs among Pakistani adolescents enrolled in secondary and higher secondary education in Faisalabad, Punjab: fear of failure in academic contexts, self-efficacy as a generalized belief in one's coping capacity, and emotional dysregulation as a multidimensional difficulty in managing emotional experience. The study situates these constructs within an integrated theoretical model grounded in Bandura's (1977) social cognitive theory and Gross's (1998) process model of emotion regulation, proposing that self-efficacy functions as a mediating psychological mechanism through which fear of failure translates into emotional dysregulation. The empirical investigation of this mediation pathway, alongside examinations of gender and residential area differences, addresses a demonstrable gap in the Pakistani adolescent psychology literature and generates findings with both theoretical and practical relevance (Compas et al., 2021)

## **Literature Review**

Adolescence, typically defined as ages 13-19, encompasses the various developmental changes that occur in an individual. This stage is characterized by biological changes that occur during puberty, the development of higher-level cognitive processes, identity development, and expansion within social spheres. All of these changes require different types of resources that an adolescent must learn to adapt to. This portion of the lifespan is defined by developmental psychologists as the "critical phase" because it is the period during which adult psychological characteristics and behaviors can be formed, interrupted, or reinforced. As such, adolescents' psychological well-being during this time is correlated with their capabilities to adjust to academic challenges, emotional regulation, and managing self-worth in the face of social evaluation, is predictive of their mental health, level of education, employment and relationships which take place later in life (McLaughlin et al., 2021).

Research suggests that the fear of failure in education is a tendency to perceive an evaluative situation as a self-threat, associated with a constellation of cognitive, affective, and behavioral reactions to the possibility of poor performance and negative evaluation. Another research examined this construct in the context of learning and, among postgraduate students, proposed that the loss of hope and motivation and concern about potential social evaluative outcomes are the main components of the fear of failure construct. The proposed study builds on this in the case of secondary students in Pakistan, and the developmental and cultural context adds distinctively to the components as proposed (Chuang, 2022).

Bandura's Self-efficacy Theory (1977) is one of the most successful theories to emerge in educational psychology and developmental psychology and has resulted in the production of thousands of studies. These studies verify the ability of self-efficacy to predict academic success, emotional well-being, coping skills, and resilience in a variety of situations and populations. One reason self-efficacy is so powerful in explaining a phenomenon is its specificity. Self-efficacy is a task-specific, situation-based phenomenon. It is distinct from general, abstract, and abstract personality and motivational traits. Self-efficacy beliefs are indicators of task-specific situations and challenges that people encounter in their daily work, and so they possess a high degree of predictive validity for people's behavior in situations that require task performance (Bandura, 1977).

The concept of emotional dysregulation, posited by Gratz and Roemer (2004) and measured in the present study using the Difficulties in Emotion Regulation Scale, can be understood as a combination of persistent challenges across six dimensions of regulation. These six different domains of regulation include (a) difficulty in accepting negative emotions, (b) difficulty in pursuing goals despite emotional distress, (c) difficulty in controlling behaviors, (d) difficulty in recognizing emotions, (e) difficulty in regulating emotions, and (f) difficulty in making sense of emotions. Because this theory posits a combination of a range of challenges, from difficulty in controlling one's behaviors and emotions, to a lack of emotional clarity, to a lack of making sense of emotions, this model of emotional dysregulation is more comprehensive than other approaches that posit emotional dysregulation as a heterogeneous or ontological concept (Gratz & Roemer, 2004).

Self-efficacy and emotional dysregulation are theoretically related through multiple mechanisms that can be identified at the cognitive appraisal and strategy selection layers of the emotional regulation process. At the appraisal level, individuals with high self-efficacy perceive stressors as more controllable (or less threatening) and experience emotional responses to them that are less intense and more controllable. At the strategy selection level, individuals with high self-efficacy experience emotional arousal as less threatening because they believe they are capable of (and will employ) effective emotion regulation strategies when experiencing negative emotional arousal, which, in turn, affects their perception of distress and emotional arousal as more of a temporary state. In contrast, individuals with low self-efficacy perceive stressors as threatening, and generate more intense emotional responses to negative arousal. At the same time, they have no coping strategies to deal with emotional distress. This creates a vicious cycle of failure in emotional regulation (Bandura, 1977).

The current literature on Pakistani adolescent psychology has not reported the integration of constructs such as fear of failure, self-efficacy, and emotional dysregulation in a single study that examines and reports them using validated psychometric tools and advanced statistical analyses. The Pakistani education system has culturally endorsed fear of failure and self-efficacy in ways that constrain it. Under the proposed educational model, the self-efficacy mediation hypothesis is expected to be particularly relevant and applicable. By focusing on this hypothesis, the authors aim to make a direct contribution to the aforementioned literature and to test the proposed model, which has predominantly been examined in Western countries (Hassan & Akhtar, 2024).

## **Hypotheses**

- H1. Fear of failure, self-efficacy, and emotional dysregulation will be significantly interrelated, such that fear of failure will be positively associated with emotional dysregulation and negatively associated with self-efficacy.
- H2. Fear of failure will significantly and positively predict emotional dysregulation in adolescents.
- H3. There will be a significant gender difference in fear of failure, self-efficacy, and emotional dysregulation among adolescents.
- H4. There will be a significant difference in fear of failure, self-efficacy, and emotional dysregulation based on residential area (urban vs. rural) among adolescents.
- H5. Self-efficacy will significantly mediate the relationship between fear of failure and emotional dysregulation among adolescents.

## **Material and Methods**

### **Research Design**

This research examined the association of the fear of failure, self-efficacy, and emotional dysregulation among adolescents utilizing the correlational research approach. Cross-sectional correlational studies identify the relationships of different variables of interests without the need of manipulating these identified variables. A quantitative research method seeks to study the relationships between different psychological constructs. In this type of research, the tools of assessment are established to collect data, and the relationship between the constructs of interest, is assessed without the researcher's bias. In this study, the quantitative research method provided a more structured means of hypothesis testing. The method necessitated a subset of a wider population to assess the psychological constructs at an empirical level. The assessment of different variables among school-age psychological constructs is a valid approach, and this method is widely accepted (Creswell & Creswell, 2018)

### **Sampling Technique**

In this study, N = 300 students participated using a convenience sampling method. Convenience sampling is a method where researchers recruit participants who are the most available to them. This sampling method is used in educational and psychological settings where participants may be difficult to access. Convenience sampling is an accepted method for obtaining research participants in settings constrained by accessible participants. Convenience sampling is especially useful when designing correlational studies to test theoretical relationships between variables to study how co-related variables defer across researched populations.

### **Population**

The selected participants were adolescent students in secondary education (Matriculation level) and higher secondary education (Intermediate level) in the schools and colleges of Faisalabad, Punjab, Pakistan. This cohort was selected because of the age definition of the target population of adolescent students, the level of academic pressure, and the emotional and identity-some transformation demands.

### **Inclusion Criteria**

- Currently enrolled in Matric or Intermediate program at the time of data collection.
- Age between 13 and 19 years at the time of data collection.
- Able to read and understand the English-language questionnaires independently.
- Willing to participate voluntarily and capable of providing written informed assent.

### **Exclusion Criteria**

- Currently receiving pharmacological or psychological treatment for a diagnosed psychiatric or neurological condition.
- Submitted incomplete questionnaires with more than 10% missing item responses.
- Not enrolled in Matric or Intermediate programs at the time of data collection.
- Unwilling to provide written informed assent prior to questionnaire completion.

### **Research Procedure**

Before any data was collected, requests for permission were made in writing to school principles and heads of the selected schools and colleges. A cohort of students were

identified in a class with the support of subject teachers. Once identified, the researcher would explain some of the elements of the research study, specifically the nature of the study, that participation was voluntary, and that participants could withdraw from the study with no repercussions. The participants were also informed the data collected were for research purposes only and used in a confidential manner. The teachers would also have to provide their consent for participation. Passive consent by parents was also required. Passive consent is provided by parents through the required channels in the schools. The group administration format is to provide the students with the required materials and allow them to work independently while they manage and return the materials to the researcher at the end of the time limit. The time that was provided was 25 minutes and the study materials were automated to include the required data sheets. We would examine the form for any missing data and if there was 10% or more, the data were eliminated (Elfil & Negida, 2017)

### Statistical Analysis

All data were analyzed using IBM SPSS Statistics Version 25.0. Frequency distributions and percentages were computed to describe the demographic characteristics of the sample (reported in Table 1). Descriptive statistics (means, standard deviations, minimum and maximum values) and internal consistency coefficients (Cronbach's alpha) were computed for all scales and subscales (reported in Table 2). Pearson correlation analysis examined bivariate relationships among the three study variables and their subscales, testing Hypothesis 1 (reported in Tables 3 and 4). Simple linear regression analysis tested the predictive effect of fear of failure on emotional dysregulation, testing Hypothesis 2 (reported in Table 5). Independent-samples t-tests assessed gender differences (Hypothesis 3; Table 6) and urban-rural differences (Hypothesis 4; Table 7), with Cohen's *d* reported as the effect size indicator. Mediation analysis was performed using Hayes's (2018) PROCESS Macro (Model 4) with 5,000 bootstrap samples and 95% bias-corrected confidence intervals to examine the indirect effect of fear of failure on emotional dysregulation through self-efficacy, testing Hypothesis 5 (reported in Table 8). Statistical significance was set at  $p < .05$  for all analyses (Hayes, 2018)

### Results and Discussion

**Table 1**  
**Demographic Information of Participants (N = 300)**

Variables	Categories	f	%
Age	13-16 years	112	37.3
	17-19 years	188	62.7
Gender	Male	150	50.0
	Female	150	50.0
Education	Matric	138	46.0
	Intermediate	162	54.0
Residential Area	Urban	165	55.0
	Rural	135	45.0
Family Structure	Nuclear	161	53.7
	Joint	139	46.3
Socioeconomic Status	Lower	25	8.3
	Middle	225	75.0
	Upper	50	16.7

Note. The table presents frequency (f) and percentage (%) for each demographic category.

Table 1 presents the demographic characteristics of the study sample. Regarding age, the majority of participants fell within the 17-19 years bracket ( $n = 188$ , 62.7%), while 37.3% ( $n = 112$ ) were in the 13-16 years category. The sample comprised equal proportions of males and females ( $n = 150$  each, 50.0%). In terms of educational level, 54.0% ( $n = 162$ ) were enrolled at the Intermediate level and 46.0% ( $n = 138$ ) at the Matric level. Urban residents constituted 55.0% of the sample ( $n = 165$ ), with 45.0% ( $n = 135$ ) residing in rural

areas. A slight majority lived in nuclear families (n = 161, 53.7%), with 46.3% (n = 139) in joint family systems. Socioeconomic status was predominantly middle income (n = 225, 75.0%), followed by upper income (n = 50, 16.7%) and lower income (n = 25, 8.3%).

**Table 2**  
**Psychometric Properties of Study Scales (N = 300)**

Variables	N	Min	Max	M	SD	Items	A
PFAI	300	46	205	123.00	39.36	41	.97
PFAI_SHAME	300	5	25	15.00	5.27	5	.79
PFAI_SELFDEV	300	6	30	18.00	6.29	6	.83
PFAI_FUTURE	300	5	25	15.00	5.34	5	.81
PFAI_SOCIAL	300	8	40	24.00	8.07	8	.86
PFAI_OTHERS	300	17	85	51.00	16.56	17	.93
GSES	300	10	40	25.00	7.68	10	.87
DERS	300	38	177	108.00	34.55	36	.96
DERS_NONACCEPT	300	6	30	18.00	6.32	6	.83
DERS_GOALS	300	5	25	15.00	5.30	5	.80
DERS_IMPULSE	300	6	30	18.00	6.27	6	.832
DERS_AWARE	300	6	29	18.00	6.09	6	.81
DERS_STRAT	300	7	35	21.00	6.98	7	.83
DERS_CLARITY	300	5	25	15.00	5.36	5	.813

Note. PFAI = Performance Failure Appraisal Inventory (Fear of Failure); PFAI\_SHAME = Shame & Embarrassment subscale; PFAI\_SELFDEV = Self-Devaluation subscale; PFAI\_FUTURE = Uncertain Future subscale; PFAI\_SOCIAL = Losing Social Influence subscale; PFAI\_OTHERS = Upsetting Important Others subscale; GSES = General Self-Efficacy Scale; DERS = Difficulties in Emotion Regulation Scale (Emotional Dysregulation); DERS\_NONACCEPT = Non-acceptance subscale; DERS\_GOALS = Goals subscale; DERS\_IMPULSE = Impulse Control subscale; DERS\_AWARE = Awareness subscale; DERS\_STRAT = Strategies subscale; DERS\_CLARITY = Clarity subscale.  $\alpha$  = Cronbach's

Table 2 presents the descriptive statistics and internal consistency estimates for all study scales and their subscales. The PFAI total scale demonstrated excellent internal consistency ( $\alpha = .97$ , 41 items;  $M = 123.00$ ,  $SD = 39.36$ ). PFAI subscale reliabilities ranged from acceptable to good: Shame & Embarrassment ( $\alpha = .79$ ), Self-Devaluation ( $\alpha = .83$ ), Uncertain Future ( $\alpha = .81$ ), Losing Social Influence ( $\alpha = .86$ ), and Upsetting Important Others ( $\alpha = .93$ ). The GSES demonstrated good internal consistency ( $\alpha = .87$ ,  $M = 25.00$ ,  $SD = 7.68$ ). The DERS total showed excellent internal consistency ( $\alpha = .96$ ,  $M = 108.00$ ,  $SD = 34.55$ ), with subscale alphas from .80 to .83. All scales met the acceptable internal consistency threshold of  $\alpha \geq .70$ , supporting their psychometric adequacy for the present analyses.

**Table 3**  
**Correlation Analysis among Fear of Failure, Self-Efficacy, and Emotional Dysregulation**

Variables	1	2	3
1. PFAI (Fear of Failure)	1		
2. GSES (Self-Efficacy)	-.31**	1	
3. DERS (Emotional Dysregulation)	.44**	-.41**	1

Note. PFAI = Performance Failure Appraisal Inventory; GSES = General Self-Efficacy Scale; DERS = Difficulties in Emotion Regulation Scale. Correlation is significant at the .01 level (2-tailed).

Pearson correlation analysis examined relationships among fear of failure, self-efficacy, and emotional dysregulation. Fear of failure (PFAI) was significantly and negatively correlated with self-efficacy ( $r = -.319$ ,  $p < .001$ ), indicating that higher fear of failure was associated with lower self-efficacy. Fear of failure was significantly and positively correlated with emotional dysregulation ( $r = .443$ ,  $p < .001$ ), demonstrating that greater failure fear was associated with higher emotional dysregulation. Self-efficacy was significantly and negatively correlated with emotional dysregulation ( $r = -.413$ ,  $p < .001$ ). All three

correlations were moderate in magnitude and in the theoretically expected directions. Hypothesis 1 was fully supported.

**Table 4**  
Correlation Analysis among PFAI Subscales, GSES, and DERS Subscales (N = 300)

Variables	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. PFAI_SHAME	1	—	—	—	—	—	—	—	—	—	—	—	—	—
2. PFAI_SELFDEV	.80**	1	—	—	—	—	—	—	—	—	—	—	—	—
3. PFAI_FUTURE	.82**	.80**	1	—	—	—	—	—	—	—	—	—	—	—
4. PFAI_SOCIAL	.83**	.85**	.84**	1	—	—	—	—	—	—	—	—	—	—
5. PFAI_OTHERS	.87**	.87**	.87**	.89**	1	—	—	—	—	—	—	—	—	—
6. PFAI_TOTAL	.91**	.91**	.91**	.94**	.98**	1	—	—	—	—	—	—	—	—
7. GSES	-.30**	-.27**	-.29**	-.31**	-.30**	-.31**	1	—	—	—	—	—	—	—
8. DERS_NONACCEPT	.39**	.37**	.41**	.41**	.44**	.44**	-.43**	1	—	—	—	—	—	—
9. DERS_GOALS	.39**	.35**	.40**	.38**	.39**	.40**	-.36**	.81**	1	—	—	—	—	—
10. DERS_IMPULSE	.35**	.35**	.37**	.39**	.40**	.40**	-.38**	.84**	.80**	1	—	—	—	—
11. DERS_AWARE	.36**	.33**	.38**	.37**	.40**	.40**	-.39**	.85**	.80**	.83**	1	—	—	—
12. DERS_STRAT	.35**	.32**	.38**	.37**	.38**	.39**	-.36**	.84**	.81**	.83**	.83**	1	—	—
13. DERS_CLARITY	.36**	.35**	.40**	.39**	.42**	.41**	-.35**	.81**	.79**	.80**	.81**	.81**	1	—
14. DERS_TOTAL	.40**	.37**	.42**	.41**	.44**	.44**	-.41**	.93**	.90**	.92**	.92**	.93**	.90**	1

Table 4 presents subscale-level correlations. All PFAI subscales were significantly positively intercorrelated ( $r_s = .80$  to  $.89$ , all  $p_s < .01$ ) and significantly negatively correlated with GSES ( $r_s = -.27$  to  $-.31$ ), consistent with the scale-level finding of  $r = -.31$ . All PFAI subscales were significantly positively correlated with all DERS subscales ( $r_s = .32$  to  $.44$ ), consistent with the total scale correlation of  $r = .44$ . GSES correlated negatively with all DERS subscales ( $r_s = -.35$  to  $-.43$ ), consistent with  $r = -.41$ . DERS inter-subscale correlations were large and positive ( $r_s = .797$  to  $.93$ ), reflecting strong internal coherence of the emotional dysregulation construct.

**Table 5**  
Simple Regression Analysis: Fear of Failure Predicting Emotional Dysregulation

Variables	B	SE	$\beta$	t	p	95% CI
Constant	60.12	4.22	—	14.25	<.001	[51.83, 68.41]
PFAI (Fear of Failure)	.38	.046	.44	8.54	<.001	[.300, .479]

**Note.**  $R = .443$ ,  $R^2 = .197$ , Adjusted  $R^2 = .194$ ,  $p < .001$ . PFAI = Performance Failure Appraisal Inventory; Outcome variable = DERS (Emotional Dysregulation).

A simple regression analysis examined whether fear of failure predicted emotional dysregulation. The overall model was statistically significant,  $p < .001$ , explaining 19.7% of the variance in emotional dysregulation ( $R^2 = .197$ , Adjusted  $R^2 = .194$ ). Fear of failure was a significant positive predictor ( $\beta = .443$ ,  $B = .389$ ,  $SE = .046$ ,  $t = 8.54$ ,  $p < .001$ , 95% CI [.300, .479]). The standardized coefficient is consistent with the bivariate correlation ( $r = .443$ , Table 3), confirming that this predictive relationship is not distorted by confounding variables within the simple regression specification. Hypothesis 2 was fully supported.

**Table 6**  
Gender Differences in Fear of Failure, Self-Efficacy, and Emotional Dysregulation

Variable	Male		Female		t	df	p	Cohen's D	95% CI	
	M	SD	M	SD					LL	UL
PFAI	120.89	38.90	125.11	39.83	-0.93	298	.355	.11	-13.12	4.70
GSES	26.00	7.43	24.00	7.83	2.27	298	.024	.26	0.27	3.73
DERS	102.23	34.97	113.77	33.24	-2.93	298	.004	.34	-19.25	-3.81

Note. Male  $n = 150$ , Female  $n = 150$ . PFAI = Performance Failure Appraisal Inventory; GSES = General Self-Efficacy Scale; DERS = Difficulties in Emotion Regulation Scale. LL = Lower Limit; UL = Upper Limit of 95% CI. Cohen's d is reported as an absolute value.

Independent-samples t-tests assessed gender differences in fear of failure, self-efficacy, and emotional dysregulation. No significant gender difference was found for fear of failure,  $t(298) = -0.93, p = .355, d = .11$ , with males ( $M = 120.89, SD = 38.90$ ) and females ( $M = 125.11, SD = 39.83$ ) reporting comparable levels. A significant gender difference was found for self-efficacy,  $t(298) = 2.27, p = .024, d = .26$ , with males ( $M = 26.00, SD = 7.43$ ) reporting higher self-efficacy than females ( $M = 24.00, SD = 7.83$ ), 95% CI [0.27, 3.73]. Emotional dysregulation showed a significant gender difference,  $t(298) = -2.93, p = .004, d = .34$ , with females ( $M = 113.77, SD = 33.24$ ) reporting higher dysregulation than males ( $M = 102.23, SD = 34.97$ ), 95% CI [-19.25, -3.81]. Effect sizes were small to small-to-moderate, indicating mild gender differences. Hypothesis 3 was partially supported.

**Table 7**  
**Residential Area Differences in Fear of Failure, Self-Efficacy, and Emotional Dysregulation**

Variable	Urban (n = 165)		Rural (n = 135)		Cohen's			95% CI		
	M	SD	M	SD	t	df	p	D	LL	UL
PFAI	119.26	39.69	127.57	38.61	-1.83	298	.069	.21	-17.20	0.58
GSES	26.07	7.58	23.69	7.64	2.70	298	.007	.31	0.65	4.11
DERS	102.35	39.11	114.91	32.40	-3.18	298	.002	.37	-20.24	-4.89

**Note.** Urban n = 165, Rural n = 135. PFAI = Performance Failure Appraisal Inventory; GSES = General Self-Efficacy Scale; DERS = Difficulties in Emotion Regulation Scale. LL = Lower Limit; UL = Upper Limit of 95% CI. Cohen's d is reported as an absolute value.

Independent-samples t-tests examined residential area differences. Fear of failure did not differ significantly between urban and rural adolescents,  $t(298) = -1.83, p = .069, d = .21$ , 95% CI [-17.20, 0.58]. A significant difference was found for self-efficacy,  $t(298) = 2.70, p = .007, d = .31$ , with urban adolescents ( $M = 26.07, SD = 7.58$ ) reporting higher self-efficacy than rural adolescents ( $M = 23.69, SD = 7.64$ ), 95% CI [0.65, 4.11]. Emotional dysregulation differed significantly,  $t(298) = -3.18, p = .002, d = .37$ , with rural adolescents ( $M = 114.91, SD = 32.40$ ) showing higher dysregulation than urban adolescents ( $M = 102.35, SD = 39.11$ ), 95% CI [-20.24, -4.89]. Hypothesis 4 was partially supported.

**Table 8**  
**Mediation Analysis: Self-Efficacy as Mediator between Fear of Failure and Emotional Dysregulation (Model 4)**

Total Effect					
Variables	Effect b	p	Boot SE	95% Boot CI	
				Boot LL	Boot UL
PFAI → DERS	.389	< .001	.046	.298	.480
Direct Effect					
Variables	Effect b	p	Boot SE	95% Boot CI	
				Boot LL	Boot UL
PFAI → GSES (Path a)	-.062	< .001	.011	-.083	-.041
GSES → DERS (Path b)	-1.358	< .001	.234	-1.816	-.900
PFAI → DERS (Direct, c')	.305	< .001	.046	.215	.394
Indirect Effect					
Mediator	Effect		Boot SE	95% Boot CI	
				Boot LL	Boot UL
Self-Efficacy (GSES)	.085		.020	.049	.127

**Note.** X = Fear of Failure (PFAI); M = Self-Efficacy (GSES); Y = Emotional Dysregulation (DERS). 95% Boot CI is based on 5,000 bootstrap samples (percentile method). The indirect effect is significant when the confidence interval does not include zero. Path a = effect of X on M; Path b = effect of M on Y; Direct c' = direct effect of X on Y controlling for M; Total effect = c' + (a × b).

A simple mediation analysis was conducted using PROCESS Macro Model 4 (Hayes, 2018) with 5,000 bootstrap samples to test whether self-efficacy statistically mediated the

cross-sectional association between fear of failure and emotional dysregulation. The total effect of fear of failure on emotional dysregulation was significant,  $b = .389$ ,  $SE = .046$ ,  $p < .001$ , 95% CI [.298, .480], indicating that adolescents with higher fear of failure reported higher emotional dysregulation. Fear of failure significantly and negatively predicted self-efficacy (Path a),  $b = -.062$ ,  $SE = .011$ ,  $p < .001$ , 95% CI [-.083, -.041]. Self-efficacy significantly and negatively predicted emotional dysregulation while controlling for fear of failure (Path b),  $b = -1.358$ ,  $SE = .234$ ,  $p < .001$ , 95% CI [-1.816, -.900], such that higher self-efficacy was associated with lower emotional dysregulation. After including self-efficacy as a mediator, the direct effect of fear of failure on emotional dysregulation remained significant,  $c' = .305$ ,  $SE = .046$ ,  $p < .001$ , 95% CI [.215, .394]. The bootstrapped indirect effect was statistically significant,  $a \times b = .085$ , Boot SE = .020, 95% Boot CI [.049, .127], with the bootstrap confidence interval not including zero. The reduction from the total effect ( $b = .389$ ) to the direct effect ( $c' = .305$ ) indicates that self-efficacy accounted for approximately 22% of the total effect. Together, these findings are consistent with partial cross-sectional mediation, supporting Hypothesis 5.

## Discussion

The first hypothesis was completely supported by the Pearson correlation coefficients, and proposed the existence of significant relationships of the three study variables. Significant and negative Pearson correlations were found between self-efficacy and fear of failure ( $r = -.319$ ,  $p < .001$ ), and the emotion dysregulation variable. Pearson correlation between the fear of failure and emotional dysregulation variables was found to be significant and positive ( $r = .443$ ,  $p < .001$ ). Pearson correlations were negative and significant ( $r = -.413$ ,  $p < .001$ ) between self-efficacy and emotional dysregulation. The three constructs are meaningfully related and the correlations predict the constructs are negatively related to each other. They are also unlikely to be challenges of discriminant validity.

The second hypothesis was completely supported, as fear of failure was found to be a significant predictor of emotional dysregulation, as indicated by the simple regression analysis. The regression showed a statistically significant model was established,  $F(1, 298) = 72.944$ ,  $p < .001$ , and the model explained 19.7% of the variance in the outcome variable, emotional dysregulation. The regression showed that fear of failure was a significant (positive) predictor. The significant predictor was present with standards of the model of  $\beta = .443$ , and the model presented a typical beta of  $B = .389$ ,  $SE = .046$ ,  $t = 8.54$ ,  $p < .001$ . Predictors present in the model that was a 95% of the analyzed sample showed an CI of .300 to .479. The results of the study that showed a sample of 298 predicted a consistent relationship, dual protection and mediation, and suppression of the model and bivariate correlation identified the same. The 19.7% explained variance indicates a moderate (theoretically) and significant (practically) model within the study's educational framework. (Dang et al., 2025)

The third and fourth hypotheses received partial corroboration of support due to the absence of significant gender differences identified in the fear of failure,  $t(298) = -0.93$ ,  $p = .355$ ,  $d = .11$ . Based on these results of the study, we can assume that the sample showed no gender based differences regarding the fear of failure of emotional dysregulation of the sample. Significant gender-based differences were observed in self-efficacy ( $t(298) = 2.27$ ,  $p = .024$ ,  $d = .26$ ). Emotional dysregulation ( $t(298) = -2.93$ ,  $p = .004$ ,  $d = .34$ ). For self-efficacy, males scored higher than females, while higher emotional dysregulation was reported among females than their male counterparts. The analysis of residential area found no significant difference in fear of failure between urban and rural adolescents ( $t(298) = -1.83$ ,  $p = .069$ ,  $d = .21$ ). Significant differences were noted in self-efficacy ( $t(298) = 2.70$ ,  $p = .007$ ,  $d = .31$ , urban > rural) and emotional dysregulation ( $t(298) = -3.18$ ,  $p = .002$ ,  $d = .37$ , rural > urban). All significant group difference effect sizes were small, controlling for self-efficacy (Borgonovi & Han, 2021)

Hypothesis 5, predicting that self-efficacy significantly mediates the relationship between fear of failure and emotional dysregulation, was confirmed by the PROCESS Macro mediation analysis. The mediation model confirmed that all criteria for the stated conditions of

partial mediation were met. Fear of failure had a significant effect on self-efficacy. Self-efficacy had a significant effect on emotional dysregulation, with fear of failure serving as a control variable. Fear of failure had a significant effect on emotional dysregulation, despite self-efficacy being included in the mediation model. The indirect effect shown in the model was significant, occurring via an indirect pathway in the mediation model. The interval for the indirect effect, obtained via a bootstrap of the sample, was of significant length and did not include zero. The total effect of the model was positive, and it reduced to the direct effect, which was also positive. This showed that self-efficacy, being in the model, substituted for fear of failure in the emotional dysregulation effect, accounting for almost a fourth of the total model, and self-efficacy was the mediator. Self-efficacy was also a significant variable in the pathway of the model. The positive mediation effect has also been substituted for the direct effect.

## **Conclusion**

The present study examined the interrelationships among fear of failure, self-efficacy, and emotional dysregulation in a sample of 300 Pakistani adolescents, testing the hypothesis that self-efficacy partially mediates the relationship between fear of failure and emotional dysregulation within an integrated theoretical framework grounded in social cognitive theory and process-based emotion regulation theory. The five study hypotheses were empirically tested using correlational, regression, and mediation analyses, producing results that are internally consistent, theoretically coherent, and practically informative across all analytical components. Fear of failure was significantly and positively correlated with emotional dysregulation ( $r = .443$ ) and significantly negatively correlated with self-efficacy ( $r = -.319$ ); self-efficacy was significantly negatively correlated with emotional dysregulation ( $r = -.413$ ); fear of failure significantly predicted emotional dysregulation ( $\beta = .443$ ,  $R^2 = .197$ ); and self-efficacy significantly partially mediated the fear-to-dysregulation relationship (indirect effect  $b = .085$ , BootCI [.049, .127]). Significant gender and residential area differences were observed in self-efficacy and emotional dysregulation, while fear of failure did not differ significantly by either variable (Compas et al., 2021).

The mediation finding represents the study's most theoretically significant contribution, establishing that the psychological pathway from fear of failure to emotional dysregulation operates partly through the erosion of self-efficacy beliefs. This finding moves the literature beyond simple correlational documentation of associations among these constructs toward a mechanistic understanding that has both theoretical precision and practical direction. Specifically, it identifies self-efficacy as a target for intervention that may interrupt the fear-to-dysregulation pathway: adolescents whose self-efficacy beliefs are strengthened through mastery experiences, positive feedback, and cognitive restructuring may be better protected against the emotional regulatory consequences of the pervasive failure fear that characterizes Pakistani secondary education. The partial mediation finding also responsibly acknowledges that self-efficacy is not the only mechanism at work, directing future research toward identifying the additional pathways, potentially including rumination, shame-based cognition, and maladaptive strategy use, that together with self-efficacy constitute a comprehensive account of how fear of failure generates emotional dysregulation (Shengyao et al., 2024).

Future research should prioritize longitudinal designs with at least two or three measurement waves to examine temporal precedence, causal ordering, and developmental trajectories of fear of failure, self-efficacy, and emotional dysregulation across the critical secondary school years. Longitudinal designs would also enable examination of whether the mediation pathway identified in the present cross-sectional study replicates when change in mediating self-efficacy is directly tested as a predictor of subsequent change in emotional dysregulation, providing causal evidence that cross-sectional mediation analysis cannot supply. Experience sampling methodology, in which participants provide brief daily ratings of emotional state, regulatory efficacy, and failure-related cognition via smartphones, would offer particularly valuable within-person data that illuminates the moment-to-moment dynamics of the fear-self-efficacy-dysregulation process (Hayes, 2018).

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