

## Perceived self-efficacy

*Autoeficacia percibida*

*Autoeficácia percebida*

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**ABSTRACT:** Considering the increasing aging population, it is essential to go deeper on different aspects that influence well-being in old age in order to generate "successful aging." Research has found that the perception of control over one's life is one of the psychological conditions that can predict successful aging and good health. Efficacy beliefs are specific to each individual and can be improved and increased in several areas in which the person develops. Therefore, not only will this paper present a theoretical development regarding the construct of self-efficacy, but also a description of the different sources that favor the generation of personal efficacy. Such beliefs are important throughout life, although they become a fundamental issue in old age, encouraging the achievement of competent aging.

**Keywords:** Self-efficacy; Positive psychology; Aging.

**RESUMEN:** *Atendiendo al creciente envejecimiento poblacional, se hace indispensable profundizar el conocimiento de distintos aspectos que influyen en el bienestar en la vejez y que generan un “envejecimiento exitoso”. Investigaciones han hallado que la percepción de control sobre la propia vida es uno de los condicionantes psicológicos que permite predecir un buen envejecimiento así como una buena salud. Las creencias de eficacia son propias de cada individuo y pueden ser mejoradas e incrementadas en los diversos ámbitos en los que la persona se desarrolle. Por tal motivo, en el presente artículo se presenta un desarrollo teórico respecto al constructo de autoeficacia, conjuntamente a la descripción de las diversas fuentes que favorecen la generación de creencias de eficacia personal. Dichas creencias son relevantes a lo largo de toda la vida, sin embargo cobran un peso fundamental en la vejez favoreciendo el logro de un envejecimiento competente.*

**Palabras Clave:** *Autoeficacia percibida; Psicología positiva; Vejez.*

**RESUMO:** *Em resposta ao envelhecimento crescente da população, é essencial aprofundar o conhecimento dos diferentes aspectos que influenciam o bem-estar na velhice e contribuir para um "envelhecimento bem-sucedido". A investigação verifica que a percepção de controle sobre a própria vida é uma das condições psicológicas que podem prever um envelhecimento bem-sucedido e boa saúde. As crenças sobre tal eficácia são específicas a cada indivíduo e podem ser melhoradas e aumentadas nas diversas áreas em que a pessoa se envolve. Nessa direção, neste artigo um desenvolvimento teórico em relação à construção de autoeficácia é apresentado, em conjunto com a descrição das várias fontes que possam favorecer a geração de uma eficácia pessoal. Tais crenças são relevantes ao longo da vida; no entanto, elas se tornam uma fundamental questão na velhice, favorecendo a conquista de um envelhecimento competente.*

**Palavras-chave:** *Autoeficácia percebida; Psicologia positiva; Velhice.*

## Introduction

Perceived self-efficacy is defined as the beliefs that people have about their capabilities (Bandura, 1987). The focus is on how capable people think they are to perform a task and be effective in implementing it.

Based on these beliefs, actions are organized and implemented in order to achieve the desired performance. Generally, people tend to develop and remain in activities that they considered themselves capable of doing and dismiss those for which they believe that they do not have the necessary skills. Therefore, the concept of self-efficacy does not refer to the resources that are available, but to one's own opinion about what to do with them (Bandura, 1987). Indeed, it is not only that the individual is capable of doing something, but also that he considers himself able to use resources and abilities to face different circumstances (Prieto Navarro, 2001).

This article aims to show how the beliefs we have about our own abilities can play an important role determining the way we behave and the challenges we assume. These efficacy beliefs are important throughout life, and become fundamental in old age.

## Efficacy beliefs

Psychology has traditionally focused on the notion of self-efficacy, addressing the latter under the names of *personal agency*, *mastery* or *control*. Self-efficacy is of great importance due to its implications for physical and psychological health (Gecas, 1989).

Campos, and Perez (2007) claim that this concept is fundamental in the health context as being an important indicator of healthy behaviors and also a relevant factor in the abandonment of harmful practices. These authors define self-efficacy "as the set of beliefs in one's capabilities to organize and execute courses of action required to produce certain achievements or results" (p. 213). It deals with the confidence that the person has in his/her ability to implement the necessary actions to achieve the proposed outcome, determining the amount of effort that will be used to perform an action.

Meanwhile, and Bandura (2001), who was the main exponent in the development of this construct, clarifies that the concept of self-efficacy does not encompass all domains and areas in which the person develops; that is, someone can feel self-efficient to perform specific tasks, and at the same time consider to be ineffective in others. Therefore, people do not define themselves as self-efficient or not self-efficient, but they do it depending on the environment or the tasks they seek to face.

The levels of perceived self-efficacy can be influenced by social expectation, by individuals' own experiences, by learning through observation, -called vicarious experience – and by the individual's own psychological factors (Bandura, 1982). Therefore, according to the theory of self-efficacy, one's own experience and the interpretation of that experience can serve to increase or decrease efficacy. Theoretically, a decrease in efficacy may have behavioral consequences such as the avoidance of learning opportunities or the reduction of certain efforts that may be seen as unnecessary (Welch, & West, 1995).

Specifically in relation to aging, research suggests that, over the years, self-efficacy tends to decrease. In fact, they often state that in old age, even if there are gains and losses, the latter increase while the former decrease generating a lower sense of self-control (Baltes, Lindenberg, & Staudinger, 2006; Lachman, & Agrigoroaei Neupert, 2011). Lachman, and Firth (2004) consider that this occurs due to a greater number of situations that individuals cannot control because of a decrease in physical, cognitive or functional capabilities. However, the evidence is not clear.

For older adults, *self-efficacy* is associated with the feeling of being able to participate in solving conflicts that may come up in everyday life. This allows them to create the necessary coping strategies to face adversity. Those who do not perceive adequate levels of self-efficacy tend to have low self-esteem and negative feelings about their own chances of overcoming those stressors of aging; it is harder for the elderly to motivate themselves to achieve goals with the skills they have. Consequently, they make a negative assessment of their life. In contrast, older people with high self-efficacy perception motivate themselves into action (San Juan Perez, & Bermúdez, 2000).

Locally, a research was developed comparing the levels of self-efficacy perceived in older adults who had some physical disabilities and in seniors that did not.

The research was focused on the decision-making process. The results show a relationship between these variables for the total sample, showing that people often tend to feel more self-efficient when having more control over their decisions, i.e., when they use less evasive mechanism or procrastination (Pavón, 2014).

Decision-making implies retaining one's own autonomy with respect to situations of one's competence (Croas, & Fernández Colmeneros, 2013). However, this possibility may be seen infringed in the elderly.

Although sometimes it may be due to severe cognitive impairments, in most cases this right to decide over one's own life is limited by external factors, either by others or by institutional regulations, as it occasionally happens in long stay institutions for the elderly. It is often assumed that just because people are old, they are not able to choose and decide appropriately and rationally; sometimes family members or caregivers decide for the elderly regardless of their opinion, even when it directly affects the quality or style of their lives. (Arias, 2013). Generally, in institutions for the elderly, many experiences that increase dependency and discourage personal mastery, affect the elderly in a reduction of personal control and perceived self-efficacy (Langer, & Rodin, 1980).

In this respect, the elderly are in contact with experiences that actively inhibit cognitive challenges decreasing, for example, the opportunities for memory control. It often happens that doctors or nurses are the ones that give medications at specific times, even to people with no cognitive impairment, without giving the seniors the opportunity to remember and be responsible for it. Such situations reduce the ability of control the person has over his environment, affecting self-efficacy beliefs for the performing of tasks (Welch, & West, 1995). Excessive care, based mainly on the avoidance of risk, progressively limit old people's choices not only restricting alternatives and generating unfavorable environments but also preventing their development. Thus, the senior citizen gradually loses control of his own life and his choices are reduced to repeating certain daily routines in which he/she finds nothing pleasant or motivating (Arias, 2013).

Peters, Dieckmann, and Weller (2011) show that seniors' ability to make decisions remain not only intact but also it increases the power of judgment through life experience.

The process may slow down, even require support to facilitate memory or less stimuli and options to make the decision, but it does not affect their quality. Furthermore, findings indicate that older adults rely on their own ability to choose and consider that experiences enable them to learn from their mistakes and are useful as a guide in this stage of life (Pavón, 2011).

Limiting the elderly in decision-making, when they are in full use of their mental faculties, is compared to the violation of their ability to control their own life, which may negatively influence their well-being.

Except for cases of pathological aging where there is a serious cognitive impairment to make decisions and may bring about negative consequences to themselves, the elderly should continue to maintain control of their lives and choose how they want to live it (Arias, 2013).

On the other hand, the environment in which the elderly develop is of great importance in increasing or decreasing efficacy beliefs. Living in long-term institutions, with their family or alone, generates in the elderly different environments that affect the degree of control that the person perceives to have about his/her environment. A person who is in a position of dependence to perform everyday activities probably has little or no opportunity of mastery and control over his/her environment, affecting his/her efficacy beliefs (Welch, & West, 1995). Therefore, it is important to create an adequate and suitable environment for the person to maintain his/her autonomy and safety.

### **Self-efficacy for aging**

Although the concept of self-efficacy has been used in various fields, its use and study in the field of Gerontology is relatively new, so there is little research in this area. Within this field, the concept of *Self-efficacy for aging* has emerged referring to the perception that the person has on the future control in relation to cognitive, physical, emotional and health changes that aging may entail (Fernandez Ballesteros, *et al.*, 2010). The very fact that one trusts someone's personal skills generates new goals that imply a challenge to the person, implementing the necessary strategies to achieve them.

Likewise, having high efficacy beliefs implies considering that one has the necessary abilities to control and dominate the environment; that is to say, it is possible to carry out actions to modify the environment in order to obtain satisfactory results.

Several studies have shown similar self-efficacy scores for aging among middle-aged adults and seniors (Gecas, 1989; Pavón, 2011; Pavón, & Arias, 2012). As regards educational level differences, tests were conducted in a 90 year-old plus group (Zamarrón Cassinello, *et al.*, 2007) and in a 55 to 75 year-old group (Fernandez Ballesteros, *et al.*, 2006).

These studies show that in self-efficacy for aging the scores were higher in people with higher or college education than in those with no formal education or who had not finished primary school.

Based on the same construct, a comparison was made by gender in a group of people aged 44 to 86, and the results showed that women have more favorable beliefs about their capabilities to deal with the changes in aging than men (Pavón, & Arias, 2013). It was also found that those who earned higher incomes, scored significantly higher than those with lower incomes (Fernandez Ballesteros, *et al.*, 2006). The need for high efficacy beliefs about one's own aging is fundamental. High efficacy beliefs will create favorable conditions for achieving good aging, considering that positive beliefs are important to face potential changes that may occur.

### **Development of the perceived efficacy beliefs**

Bandura (1977) starts from the premise that the expectation of self-efficacy determines whether a behavior will be initiated, how much effort it will demand and how long one will persist in a situation, even against the presence of an obstacle or adverse situations. From this perspective, people create and develop self-perceptions about their capabilities that become the means through which to achieve one's goals. In addition, not only do these capabilities enable the individual to exert control over one's own thoughts and feelings but also on its motivations and behaviors. The way people interpret the results of their actions provides information about their own skills, influencing their own subsequent performance. Therefore, the beliefs that people have about themselves are essential for the individual's self-control and performance.

According to Bandura, people have four sources of information to generate efficacy beliefs. The first one is on performance accomplishments; this source has a high influence because it is based on the person's own accomplishments.

*Performance accomplishments*, in which the person can actively participate, have shown to be the most effective in increasing efficacy levels. After strong efficacy expectations are developed through repeated success in certain behaviors, the effect of occasional negative experiences is likely to be reduced. Such experiences, in which the person is actively involved, require a moderate level of mastery. The person does not have to feel overwhelmed by the skills required for the activity, but simultaneously has to perceive he/she has the control to perform it (Welch, & West, 1995).

It is expected that performance accomplishments, whatever the activity carried out, increase the perceived efficacy and facilitate future performance success in that same domain.

The second source is *vicarious experiences*. Seeing others perform activities without adverse consequences may generate expectations in observers who are able to improve if they intensify or persist in their efforts. People persuade themselves that if others have been able to reach a goal, probably they should be able to achieve at least some improvement in performance. Thus, with substantial information, the observers may increase their perception of their own efficacy.

The third source is called *verbal persuasion*. This process refers to the positive opinion of others about the skills the person has; that is to say, that people tend to improve their efficacy beliefs and perform tasks successfully if others convinced them that it is possible to reach a goal. Anyway, this kind of favorable beliefs tends to be weaker and vulnerable to adverse situations for not having experimental foundations.

The fourth of the sources refers to the activation of different emotions that provide information regarding personal skills and self-efficacy perception in relation to their own resources to address it. Generally, people tend to interpret their physiological arousal, and determine whether their emotions correspond or not to their performance. Feelings of nervousness are often associated with poor performance, generating an emotional trigger that may hinder the execution itself. While a balanced activation of pleasurable emotions may favor the mastery of the task, it can also cooperate in increasing and improving beliefs about personal skills to carry out a given task (Bandura, 1977).



Over a lifetime, but mostly in old age, a central aspect for increasing the sense of self-efficacy is strengthening the social support network that works as both instrumental and emotional support, and as a basis for maintaining favorable beliefs about personal skills.

Thereon, recent research has shown that older people have socially active lives (Cornwell, Schumm, Laumann, & Graber, 2009; Fernández Ballesteros, 2009), have functional social support networks and frequently high intimate affective bonds (Arias, & Polizzi, 2010; Cornwell, Schumm, Laumann, & Graber, 2009). Even if people often suffer recurrent losses in their affective bonds in this stage of life, they actively establish new meaningful relationships after turning 60 (Arias, & Polizzi, 2010; Elgart, 2009).

This evidence shows the possibilities of change and active coping of situations to face losses or difficulties (Arias, 2011). This indicates the potential offered by the support network in increasing efficacy beliefs.

### **Influence of stereotypes**

While older people are reaching old age in good physical and mental health and the old age overview increasingly includes positive aspects (Arias, 2011), this is still not enough to ignore certain negative stereotypes about this life stage (Rice, Lockenhoff, & Cartensen, 2002).

The images and implicit representations on aging theories cover both social and personal experiences, which are linked to individual development. They usually tend to reflect a negative image about aging, highlighting the changes perceived as losses, rather than focusing on the continuities. This can result in distorted perceptions about the aging process. These theories exert their influence when conducting self-assessment tests, providing references for the comparison process with social parameters. A key factor in determining its results is the degree of control that is perceived with respect to the aging process (Rice, Lockenhoff, & Cartensen, 2002).

Throughout the life course, crisis and conflict situations arise where it is necessary to evaluate one's own resources to keep a balance between gains and losses (Brandstadter, 1984). As age advances, the loss of control on key areas of development such as physical, cognitive and social aspects increases. In this regard, Heckhausen and Schulz (1995, 2010) propose a model that distinguishes the primary from the secondary control. The first one takes place over one's own behavior to achieve the desired goals in the external world. Therefore, it is necessary to understand what actions are necessary to achieve a goal and the changes that may occur.

The secondary control refers to the changes of one's own motivations facing failures in primary controls, which leads to a reinterpretation of the desires and goals, making the adaptation to the present situation possible. (Schaie, & Willis, 2003). While the primary control decreases, the secondary one increases with age (Heckhausen, & Schultz 1995; Iacub, 2011).

Also, authors like Brandstadter, and Greve (1994) consider that in aging, goals from the past must be replaced by others that are more appropriate to the present time. This is possible through the process of assimilation and accommodation. Assimilation is a process by which goals are set and actions are taken in order to achieve the goal. Accommodation, on the other hand, refers to the process by which the subject reduces his/her own ambitions adapting them to the actual circumstances (Iacub, 2011).

In fact, in old age it is necessary to apply loss compensation mechanisms that enable a favorable adaptation (Baltes, & Baltes, 1990; Baltes, 1996), and at the same time, encourage the maintenance of high self-efficacy beliefs. Adjusting to the goals is beneficial and adaptive as long as it is done based on the actual losses of physical, mental or social resources. However, it would be harmful if done from implicit theories of aging that hold misperceptions and therefore may decrease performance expectations. It is more likely for older people to succeed when they assess their skills and abilities in a realistic way, instead of taking as their own cultural theories of continuous decline.

Thus, the performance accomplishments or failure can have consequences in the perception of the elderly's potential. People who have high levels of efficacy would have a tendency to achieve better results because they establish for themselves more challenging goals and persist against failures. On the other hand, low self-efficacy contributes to discouraging expectations of goals and outcomes (Rice, Lockenhoff, & Cartensen, 2002).

This description highlights the risk of generating a vicious circle that prevents seniors from achieving a performance in line with their physical and mental abilities. Internalized cultural stereotypes produce pessimistic expectations about aging, having a negative impact on self-efficacy. All of which not only generates decrease in the aspirations and goals, but also actual reduction in the activities in general (Rice, Lockenhoff, & Cartensen, 2002).

Even people who have positive expectations about the process of aging appear to be vulnerable to the threat of negative stereotypes, when they feel they are at risk of confirming any of the existing stereotypes about their age group (Steele, 1997). Treating the elderly like children or the excessive assistance to perform certain tasks, favors the strengthening of a negative stereotype. Such relationships can generate in the elderly a decline in self-esteem, affecting efficacy beliefs and reducing levels of personal autonomy (Welch, & West, 1995).

Those seniors influenced by negative social stereotypes are unlikely to establish goals that represent challenges and, therefore, it is unlikely for them to experience success and mastery.

On the contrary, it has been shown that goals that pose a challenge, but are at the same time achievable, increase the persistence and performance in a wide range of fields. (Rice, Lockenhoff, & Cartensen, 2002).

## Conclusions

The present study on theoretical issues and background research on the issue of self-efficacy shows the importance of further research and analysis to increase the quality of life and well-being throughout life in general, but particularly in old age.

Efficacy beliefs are crucial for the individual's development due to the effect they have in his/her own beliefs, emotions and behaviors. People's own perception about their own effectiveness is an essential requirement to ensure the achievement of goals and objectives. As long as a person feels capable and confident in his/her own skills to overcome an obstacle or even achieve proposed goals, he/she tends to be more persistent and is motivated to start activities aiming at achieving benefits and personal satisfaction (Rice, Lockenhoff, & Cartensen, 2002).

The work aimed at improving the current social representations about aging plays a relevant role in achieving greater self-efficacy in older people. Therefore, it is necessary to create opportunities to question the negative stereotypes about aging and prevent these from limiting the possibilities and potentials of older adults (Arias, 2011).

In fact, society can contribute both to minimize differences and to create opportunities for the individual to foster his/her skills in order to achieve competent aging (Fernandez Ballesteros, 2009). This task implies rejecting negative stereotypes that distort the image of the elderly. Several studies have shown the existence of a series of images and negative perceptions, which associate this life stage with physical and mental illness, disability, lack of interest and motivation. This set of beliefs produces a feeling of threat to personal integrity that has a negative effect on various aspects of everyday life (Sabatini, & Arias, 2015). Not only can these beliefs lead to a process of loss of power, but also to the possibilities of making decisions and solving problems in which they may be involved (Iacub, & Arias, 2010) affecting their own efficacy beliefs.

The possibility of deciding over one's life plays a key role when it comes to perceiving control over the personal environment. It is essential not to violate such capacity in the elderly, and especially when the person is in full use of his/her mental faculty. Except for cases in which a serious cognitive impairment may cause difficulty in making certain decisions, seniors must continue keeping the control of their lives and choose how they want to live (Arias, 2013). Frustrating the need for autonomy can lead to a reduction of self-efficacy; hence, it is essential to foster environments in which opportunities for mastery are favored.

The inclusion of positive aspects in the research on the process of aging implies focusing on resources and possibilities for change, as well as on strategies that will allow high levels of well-being and satisfaction, even when facing losses. This positioning provides great opportunities for the design of devices and intervention strategies for and with seniors aiming at developing their potential even in the most advanced stages of life (Arias, 2011).

The development of environments where positive beliefs about one's own aging are encouraged, as well as tools to increase and strengthen senior's own efficacy at aging are essential components for healthy aging.

Specifically, the implementation of devices favoring autonomy and empowerment in this age group will increase their possibilities to challenge and resist stereotypes that limit their abilities. In addition, they will feel more useful, and more valued and also they will believe and trust more in their own capabilities, enabling them to better exercise roles, functions and rights (Iacub, & Arias, 2010).

Thus, they will get a better image of themselves to face life and to implement all their resources and skills to achieve competent aging by developing their beliefs of efficacy in various fields.

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