

The Relationships Between Fear of Failure, Toxic Positivity, and Emotional Intelligence of Allied Health College Students

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Abstract – *The purpose of this study is to investigate the relationships between fear of failure, toxic positivity, and emotional intelligence among allied health college. Using descriptive-correlational design while utilizing stratified and convenient sampling techniques, the researchers collected the data from 361 respondents who voluntarily answered the questionnaire to measure performance failure appraisal, emotional intelligence, and toxic positivity scale. Results indicate low levels of toxic positivity, fear of experiencing shame and embarrassment, and fear of having an uncertain future. Levels of fear of devaluing one's self-estimate, fear of important others losing interest, and fear of upsetting important others are found to be average. However, there were high levels in emotional intelligence. Toxic positivity had highly significant relationship with fear of others losing interest, significant relationships with fear of uncertain future and fear of upsetting important others, and no significant relationship with fear of shame and embarrassment, fear of devaluing one's self-estimate and self-awareness.*

Keywords: *fear of failure, toxic positivity, emotional intelligence, allied health college students*

I. INTRODUCTION

In recent years, the concept of toxic positivity gained attention as a psychological concern, especially among young adults navigating academic and social pressures. Quintero and Long (2019) characterized toxic positivity as the excessive generalization of optimism that dismisses genuine negative emotions, which often leads individuals to suppress their emotions. While maintaining a positive mindset can support mental wellness, it becomes counterproductive when it suppresses legitimate feelings of stress, sadness, or fear.

Moreover, students enrolled in allied health college programs face significant academic and clinical stressors. These pressures frequently lead to experiences of fear of failure which include fears of shame and embarrassment, devaluing one's self-estimate, having an uncertain future, important others losing interest, and upsetting important others. In such environments, students may feel compelled to always appear emotionally resilient. Consequently, many may

engage in toxic positivity as a coping mechanism, masking their emotional struggles to meet social and institutional expectations.

This study seeks to fill that gap by investigating the relationship between toxic positivity, fear of failure, emotional intelligence among allied health college students in a faith-based academic environment. Through this investigation, the research aims to contribute evidence-based insights into the emotional well-being of allied health students and offer practical recommendations for integrating emotional intelligence development into allied health college students.

II. LITERATURE REVIEW

According to Gross and John (2003), suppressing or invalidating emotions to maintain a positive appearance can have a detrimental impact on mental health which increases risks of burnout and emotional exhaustion. In contrast, the development of emotional intelligence, which includes self-awareness, self-regulation, empathy, social skills, and motivation has been found to enhance students' ability to cope with emotional intelligence. While these findings are informative, there is still limited empirical evidence on how emotional intelligence mediates the relationship between fear of failure and toxic positivity on allied health college students. This gap highlights the need for targeted studies that can inform interventions designed to support the well-being of allied health college students.

III. MATERIALS AND METHODS

1. **Research Design:** This study used a quantitative, descriptive-correlational design to examine relationships between fear of failure, emotional intelligence, and toxic positivity. Correlational analysis identified the strengths and direction of associations.
2. **Participants/Data Sources:** The study targeted students from three health-allied academic programs, specifically those in their 2nd to 4th year at a sectarian higher education institution in Cavite. A total of 350 respondents who were selected using stratified random sampling and convenience sampling to ensure balanced representation across programs and year levels.
3. **Tools and Instruments:** The researchers adopted three structured questionnaires to collect data: the Performance Failure Appraisal Inventory (PFAI), developed by Conroy et al. (2002) contains a five-point Likert scale of 25 items on five dimensions: fear of failure: shame/embarrassment, self-estimate, uncertain future, loss of interest from others, and upsetting others; the Boston Emotional Intelligence Questionnaire was developed by the Boston Consulting Group (2010) includes 25 items rated on a four-point Likert scale and assesses five areas: self-awareness, self-regulation, social skills, empathy, and motivation; and the Toxic Positivity Scale, developed by Castro et al. (2022), consists of 30 items rated on a four-point Likert scale.
4. **Procedures** The data gathering began after the thesis proposal was approved and research instruments validated by seven experts. A pilot study with 30 students from allied health programs was conducted using Google Forms and printed surveys, with approval from college departments. Data from the pilot was included in the results.

- Analysis Techniques:** descriptive statistics (frequencies, percentages, means, and standard deviations) were used to summarize participant demographics and main variables: emotional intelligence, toxic positivity, and fear of failure.

IV. RESULTS AND DISCUSSION

Level of Fear of Failure

Table 1 presents the descriptive statistics for the level of fear of failure among students. The items assessed include fears related to shame and embarrassment, devaluing self-estimate, uncertain future, losing interest of important others, and upsetting important others. The mean scores indicate that students generally have low to neutral fear levels across these items. Specifically, the fear of experiencing shame and having an uncertain future are rated as low, while fears related to devaluing self-estimate, losing interest of others, and upsetting others are rated as neutral.

Table 1

Descriptive Statistics for the Level of Fear of Failure

Items	Mean	SD	Scaled Response	Verbal Interpretation
Fear of Experiencing Shame and Embarrassment	2.49	0.918	Agree	Low
Fear of Devaluing One's Self-Estimate	2.69	1.14	Neutral	Neutral
Fear of Having an Uncertain Future	2.49	1.13	Agree	Low
Fear of Important Others Losing Interest	2.94	1.04	Neutral	Neutral
Fear of Upsetting Important Others	2.89	1.08	Neutral	Neutral

Legend: 1.00-1.49=very low, 1.50-2.49=low, 2.50-3.49=neutral, 3.50-4.49=high, 4.50-5.00=very high

Extent of Toxic Positivity

Table 2 shows that the overall level of toxic positivity among Allied Health students is low, with a grand mean of 2.47 (SD = 0.63). This indicates that most students do not excessively suppress negative emotions or force positivity in an unhealthy way. Instead, they likely use healthier emotional regulation strategies, reflecting growing emotional authenticity and resilience amid academic and personal challenges.

Table 2

Descriptive Statistics for the Extent of Toxic Positivity

Items	Mean	SD	Scaled Response	Verbal Interpretation
Toxic Positivity	2.47	0.630	Disagree	Low

Legend: 1.0-1.49=high, 1.5-2.49=moderate, 2.5-3.49=low, 3.5-4.0=very low

Level of Emotional Intelligence

Table 3 provides descriptive statistics for the level of emotional intelligence among students. The items evaluated include self-awareness, self-regulation, social skills, empathy, and motivation. The mean scores for all items are around 1.72 to 2.10, indicating that students generally exhibit moderate levels of these emotional intelligence components. The responses rated as "Sometimes" reflect a moderate verbal interpretation according to the scale.

Table 3

Descriptive Statistics for the Level of Emotional Intelligence

Items	Mean	SD	Scaled Response	Verbal Interpretation
Self-Awareness	1.72	0.597	Sometimes	Moderate
Self-Regulation	2.39	0.608	Sometimes	Moderate
Social Skills	2.04	0.607	Sometimes	Moderate
Empathy	2.00	0.656	Sometimes	Moderate
Motivation	2.10	0.632	Sometimes	Moderate

Legend: 1.0-1.49=high, 1.5-2.49=moderate, 2.5-3.49=low, 3.5-4.0=very low

Relationship Between Fear of Failure, Toxic Positivity, and Emotional Intelligence

Fear of Failure and Toxic Positivity

Table 4 shows that the correlation matrix revealed significant relationships between the fear of failure subscales and toxic positivity (TPS). Notably, Toxic Positivity showed a highly significant positive correlation with Fear of Important Others Losing Interest (FOL) ($r = 0.136$, $p = .010$), and significant positive correlations with Fear of an Uncertain Future (FUF) ($r = 0.117$, $p = .027$) and Fear of Upsetting Important Others (FUO) ($r = 0.130$, $p = .013$). These results suggest that individuals with greater fears about important other losing interest, uncertain future, or upsetting others are more likely to engage in toxic positivity behaviors, such as suppressing negative emotions to maintain a positive facade, consistent with Kross and Ayduk's (2011) findings on disengagement strategies in response to distress. In contrast, no significant correlations were found between Toxic Positivity and Fear of Experiencing Shame and Embarrassment (FSE) ($r = 0.056$, $p = 0.289$) or Fear of Devaluing One's Self-Estimate (FDS) ($r = 0.080$, $p = 0.130$), suggesting these shame-related fears, rooted in self-devaluation, are less linked to emotion suppression, aligning with Tangney and Dearing's (2002) research.

Table 4

Correlation Between Fear of Failure and Toxic Positivity

Variable		FSE	FDS	FUF	FOL	FUO
FDS	r	0.715				
	p-value	<.001				
FUF	r	0.608	0.646			
	p-value	<.001	<.001			
FOL	r	0.620	0.536	0.574		
	p-value	<.001	<.001	<.001		
FUO	r	0.569	0.466	0.473	0.620	
	p-value	<.001	<.001	<.001	<.001	
TPS	r	0.056	0.080	0.117	0.136	0.130
	p-value	0.289	0.130	0.027	0.010	0.013

Legends: $p < .001$ = highly significant, $p < .01$ = very significant, $p < .05$ = significant, $p \geq 0.05$ = not significant

Fear of Failure and Emotional Intelligence

Table 5 shows the significant negative correlations that were found between Fear of Failure subscales and Emotional Intelligence components. Self-regulation (BSR) negatively correlates with FDS ($r = -0.210$, $p < 0.001$), FSE ($r = -0.144$, $p = .006$), and FUF ($r = -0.124$, $p = .019$), suggesting that better self-regulation reduces fears related to self-devaluation, shame and embarrassment, and uncertain future. Motivation (BM) also negatively correlated with FDS ($r = -0.229$, $p < .001$), FSE ($r = -0.222$, $p < .001$), FUF ($r = -0.174$, $p < .001$), FOL ($r = -0.124$, $p = .018$), and FUO ($r = -0.112$, $p = .033$), indicating that higher motivation is linked to lower fear levels across all dimensions. Social Skills (BSS) showed negative correlations with FSE ($r = -0.143$, $p = .006$), FUF ($r = -0.139$, $p = .008$), and FDS ($r = -0.132$, $p = .012$), reflecting that stronger social skills reduce fears related to shame, uncertainty, and self-esteem. Empathy (BE) negatively correlated with FUF ($r = -0.127$, $p = 0.016$), suggesting empathetic individuals experience less fear about an uncertain future. Self-Awareness (BSA) showed no significant correlation with any Fear of Failure subscale, implying that awareness alone isn't enough to lessen fear without regulation or coping strategies (Saarni, 1999). Overall, higher emotional intelligence, especially self-regulation, motivation, social skills, and empathy is linked to lower fear of failure.

Table 5

Correlation Between Fear of Failure and Emotional Intelligence

Variable		FSE	FDS	FUF	FOL	FUO	BSR	BSA	BMM	BSS
FDS	r	0.715								
	p-value	<.001								
FUF	r	0.608	0.646							
	p-value	<.001	<.001							
FOL	r	0.620	0.536	0.574						
	p-value	<.001	<.001	<.001						
FUO	r	0.569	0.466	0.473	0.620					
	p-value	<.001	<.001	<.001	<.001					
BSR	r	-.144	-.210	-.124	-.075	-.021				
	p-value	0.006	<.001	0.019	0.154	0.698				

BSA	r	0.067	0.444	0.054	0.063	0.040	0.273			
	p-value	0.204	0.402	0.305	0.231	0.444	<.001			
BMM	r	-.222	-.229	-.174	-.124	-.112	0.568	0.288		
	p-value	<.001	<.001	<.001	0.018	0.033	<.001	<.001		
BSS	r	-.143	-.132	-.139	-.003	-.022	0.407	0.281	0.571	
	p-value	0.006	0.012	0.008	0.957	0.674	<.001	<.001	<.001	
BE	r	-.094	-.092	-.127	-.017	-.062	0.337	0.299	0.532	0.725
	p-value	0.075	0.080	0.016	0.748	0.243	<.001	<.001	<.001	<.001

Legend: $p < .001$ = highly significant, $p < .01$ = very significant, $p < .05$ = significant, $p \geq 0.05$ = not significant

Toxic Positivity and Emotional Intelligence

Table 6 shows that the correlation matrix showed strong, highly significant intercorrelations among the five Emotional Intelligence (EI) dimensions: The strongest relationships are between Empathy and Social Skills ($r = 0.725$, $p < .001$) and Motivation and Social Skills ($r = 0.571$, $p < .001$), supporting prior research that EI subcomponents mutually reinforce emotional competence (Mayer, et al., 2008; Goleman, 1998). Conversely, Toxic Positivity (TPS) showed no significant correlations with Self-Regulation ($r = -0.029$, $p = 0.585$), Motivation ($r = 0.028$, $p = 0.590$), Social Skills ($r = -0.037$, $p = 0.484$), or Empathy ($r = 0.039$, $p = 0.461$), suggesting that toxic positivity is not simply due to low emotional intelligence but rather a social or cultural behavior that can arise even in emotionally intelligent individuals, particularly under pressures to suppress emotions (Quintero & Long, 2019).

Interestingly, toxic positivity showed a significant positive relationship with Self-Awareness ($r = 0.103$, $p = 0.050$), indicating that although individuals may be aware of their emotions, they still choose to suppress or invalidate negative feelings. This supports Gross and John's (2003) view that self-awareness alone is insufficient for effective emotion regulation and aligns with evidence that emotional suppression is maladaptive and undermines healthy emotional expression (Matsumoto et al., 2008).

Table 6

Correlation Between Toxic Positivity and Emotional Intelligence

Variable		BSA	BSR	BMM	BSS	BE
BSR	r	0.273				
	p-value	<.001				
BMM	r	0.288	0.568			
	p-value	<.001	<.001			
BSS	r	0.281	0.407	0.571		
	p-value	<.001	<.001	<.001		
BE	r	0.299	0.337	0.532	0.725	
	p-value	<.001	<.001	<.001	<.001	
TPS	r	0.103	-0.029	0.028	-0.037	0.039
	p-value	0.050	0.585	0.590	0.484	0.461

Legend: $p < .001$ = highly significant, $p < .01$ = very significant, $p < .05$ = significant, $p \geq 0.05$ = not significant

V. CONCLUSION

This study comprehensively examined the levels and interplay of fear of failure, emotional intelligence, and toxic positivity among allied health college students, revealing important insights into their emotional functioning within academic settings. The participants reported generally low levels of fear related to experiencing shame and embarrassment, and having an uncertain future, which suggests a baseline of emotional stability, adaptive coping, and a growth-oriented mindset when facing setbacks. However, some moderate concerns were noted regarding fears related to devaluing one's self-estimate and important others losing interest. These neutral-to-moderate scores indicate that while students maintain a balanced self-perception, they still experience manageable worries about social evaluation and personal shortcomings, which align with increased self-comparison and emotional insight but do not lead to excessive self-criticism.

In terms of toxic positivity, the participants scored low, demonstrating a tendency not to excessively deny or suppress negative emotions. This finding reflects a developing capacity for emotional authenticity and resilience amid the academic and social pressures characteristic of allied health programs. The study also found that emotional intelligence was generally moderate across all five measured dimensions: self-awareness, self-regulation, social skills, empathy, and motivation. Participants showed adequate self-awareness to recognize emotional cues and early discomfort, but self-regulation was somewhat inconsistent, suggesting a need for more robust coping strategies. Social skills were functional but had room for improvement to enhance interpersonal effectiveness, leadership, and collaboration. Empathy levels were moderate, indicating willingness to support others but also highlighting potential growth areas in emotional expression and conflict resolution. Motivation was generally sufficient, though sustaining it in the face of repetitive tasks or challenges remained difficult for some students, emphasizing the need for resilience-building interventions.

The relationships between these constructs further illuminate the emotional dynamics at play. A significant positive correlation existed between fear of failure and toxic positivity, implying that students who fear failure are more prone to engage in toxic positivity by suppressing or masking negative emotions to maintain optimism in adversity. Meanwhile, several emotional intelligence dimensions, particularly self-regulation, motivation, and social skills, showed significant negative correlations with various fear of failure subscales. This suggests that students with stronger emotional regulation and intrinsic motivation experience lower levels of fear associated with shame and embarrassment, self-devaluation, and important others losing interest. Empathy was specifically linked to reduced fear of having an uncertain future, highlighting its role in fostering emotional support and perspective-taking that mitigate anxiety about unknown outcomes. Interestingly, self-awareness did not correlate significantly with any fear of failure components, indicating that simply recognizing emotions is insufficient for overcoming these fears without effective regulation and coping skills.

Regarding toxic positivity and emotional intelligence, the study found no significant relationships between toxic positivity and the most emotional intelligence dimensions, except for a notable association with self-awareness. This suggests a complex disconnect where

individuals may be aware of their emotions but fail to regulate or express them authentically, potentially leading to toxic positivity behaviors. The absence of mediation by emotional intelligence in the link between fear of failure and toxic positivity indicates that toxic positivity may be influenced more by external social and cultural factors such as social desirability, cultural norms, and image maintenance rather than intrapersonal emotional competencies alone.

From these findings, the study concludes that emotional experiences among allied health students are shaped by both internal emotional regulation abilities and external socio-cultural pressures. Emotional intelligence alone cannot fully explain or counteract behaviors like toxic positivity, which may serve as social defense mechanisms to conform to expectations of unwavering optimism. Therefore, comprehensive student support should integrate emotional intelligence development with interventions that challenge harmful cultural norms and encourage emotional authenticity.

Based on these conclusions, the study recommends that academic institutions design and implement programs focused on enhancing self-regulation, empathy, motivation, and social skills to better equip students for the emotional demands of their training and future professional roles. Emotional intelligence training should be paired with workshops and mentoring that promote vulnerability, normalize the expression of negative emotions, and foster psychological safety. Additionally, programs aimed at building self-esteem, reframing failure as an opportunity for growth, and promoting resilience are essential. Institutions should also create supportive environments that encourage open discussions about mental health, stress, and emotional challenges through peer support groups, counseling, and mentorship networks. Including emotional regulation, the impact of toxic positivity, and fear of failure management in the curriculum can provide students with practical tools to navigate their emotional landscapes more effectively.

Furthermore, regular assessments of students' emotional well-being should be incorporated to identify those at risk and provide timely interventions. Family education and involvement can also strengthen students' support systems by increasing awareness of the pressures faced and ways to offer constructive emotional support. Finally, longitudinal and cross-cultural research is encouraged to explore how emotional regulation and fear of failure evolve over time and across different societal contexts, further informing the development of culturally sensitive and effective support strategies. Overall, this study underscores the importance of addressing emotional as well as academic needs to cultivate resilient, self-aware, and compassionate allied health professionals who are better prepared to face the complex challenges of their careers.

AUTHORS' CONTRIBUTIONS

The authors—Darlyn Love R. Adante, Win Joy M. Bautista, Zyprine Khate D. Dinamaan, Giselle Ashley C. Pitogo, and Mylene S. Gumarao worked together in conceptualization of the study, data collection, and manuscript preparation.

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