FLEXIBLE EXPRESSION OF EMOTIONS IN RELATION TO SYMPTOMS OF DEPRESSION AND ANXIETY IN EMERGING ADULTHOOD

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Abstract

In the realm of mental health research, understanding the interplay between emotion expression and psychological well-being remains a crucial endeavor. The theory suggests that suppression of emotion expression is generally a maladaptive emotion regulation strategy, but empirical studies are ambiguous about this claim. Recently, the concept of flexibility in emotion expression has been studied to overcome the limitations of rigidity connected with the concept of suppression of emotion expression. The purpose of this study was to explore associations between suppression of emotion expression, flexible emotion expression and symptoms of depression and anxiety. We administered self-report scales to participants (N=836) in emerging adulthood to measure suppression of emotion expression, flexible expression and suppression of emotion, and the presence of symptoms of depression and anxiety. We found that the presence of depression and anxiety symptoms was weakly positively related to suppression of emotion expression, but weakly negatively related to flexible suppression of emotion expression. We discuss the results in terms of assessing the adaptive nature of emotion regulation strategies.

Keywords: Flexibility, expression of emotions, depression, anxiety, emerging adulthood.

1. Introduction

The current subject of clinical research is the possibility of utilizing difficulties in emotion regulation within a transdiagnostic approach (Aldao & Nolen-Hoeksema, 2010). Learning adaptive forms of emotion regulation is a critical aspect for healthy psychological development in children and adolescents, whereas maladaptive regulation is fundamental in the onset of mental disorders such as anxiety or depressive disorders.

Within the process model of emotion regulation, Gross & John (2003) identifies two fundamental strategies: cognitive reappraisal and suppression of expression. Growing evidence suggests that maladaptive forms of emotion regulation are associated with a wide range of psychopathological manifestations in both children and adults (Bohnert et al., 2003; Silk et al., 2003). McLaughlin et al. (2011) suggest that maladaptive emotion regulation predicts anxiety, aggression, and eating disorders but is not associated with depressive symptomatology. However, current studies indicate negative relationships between emotion suppression and depressive symptoms (Fearey et al., 2021). Corral-Frías, (2022) claims there is a negative relationship between depression, anxiety, and cognitive reappraisal, while there are positive relationships between emotion suppression and these emotional difficulties.

In the field of research on the adaptiveness of emotion regulation strategies, uncertainties arose, leading researchers to explore the phenomenon from the perspective of emotional flexibility. Models of emotional flexibility define adaptive forms of emotion regulation as the flexible use of different strategies depending on the current situation. According to Burton & Bonanno (2016), emotion regulation strategies are not exclusively effective and adaptive or ineffective and maladaptive. Flexibility in emotion regulation is related to manifestations of psychopathology (Aldao et al., 2015). The ability to flexibly enhance suppression of emotions as well as flexibility in enhancing expression in emotions negatively correlates with anxiety and depression (Burton & Bonanno, 2016). According to Gonzales-Escamilia et al. (2022), there is a negative relationship between enhanced flexible emotional expression and depression and anxiety. The results contradict Chen et al. (2018), according to whom only the ability to flexibly enhance suppression negatively correlates with anxiety, thus requiring further exploration of the phenomenon. The aim of the present research is to elucidate the relationships between emotion suppression, flexibility in emotional expression, and indicators of mental health such as anxiety and depression symptoms.

2. Method

2.1. Participants

The research sample consisted of N=836 respondents from the Slovak Republic, of which n=490 identified as women and n=346 identified as men. The sample comprised respondents in the emerging adulthood period, with an average age of M=19.58. Respondents diagnosed with mental disorders were excluded from the original sample.

2.2. Measurement

The data were collected in May 2023 using pencil-and-paper format across all regions of the Slovak Republic. The questionnaire battery included the General Anxiety Disorder Scale (GAD-7; Spitzer et al., 2006; Cronbach's $\alpha=.85$), the Patient Health Questionnaire-9 (PHQ-9; Kroenke et al., 2001; Cronbach's $\alpha=.84$) for assessing depressive symptoms, the Emotion Regulation Questionnaire (ERQ; Gross & John, 2003; Cronbach's α for emotion suppression = .67; Cronbach's α for cognitive reappraisal = .77) measuring two basic emotion regulation strategies - emotion suppression and cognitive reappraisal, and the Flexible Regulation of Emotional Expression Scale (FREE; Burton & Bonanno, 2016; Cronbach's α for flexible enhancement of emotion suppression = .62).

3. Results

In Table 1, the results of statistical analyses aimed at determining relationships between variables are recorded. Correlational analysis revealed several relationships among the raw scores of individual variables, specifically between indicators of mental health, emotion regulation, and flexibility in emotional expression. A statistically significant weak negative correlation was found between depression (PHQ-9) and cognitive reappraisal (ERQ-CR) (r=-0.193; p<0.001). Cognitive reappraisal also negatively correlated with anxiety (GAD-7) (r=-0.186; p<0.001). Conversely, emotion suppression (ERQ-ES) positively correlated with depression (r=0.141; p<0.001) and anxiety (r=0.152; p<0.001). Flexibility in emotional expression (FREE-EE) showed a statistically significant positive correlation with anxiety (r=0.076; p<0.03). Flexibility in emotion suppression negatively correlated with depression (r=-0.089; p<0.011) and anxiety (r=-0.087; p<0.012).

Table 1. Correlation between	denression anxiety	v emotion regulation an	d flexible regul	ation of emotion expre	ccion
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Variable	ERQ-CR	ERQ-ES	FREE-EE	FREE-ES
PHQ-9	-0.193***	0.141***	0.039	-0.089*
GAD-7	-0.186***	0.152***	0.076*	-0.087*

ERQ-CR – cognitive reappraisal, ERQ-ES - emotion suppression, FREE-EE – flexibility in expression of emotions, FREE-ES – flexibility in emotion suppression.

4. Discussion

Currently, emotion regulation is being examined within the context of a transdiagnostic approach in diagnosing emotional disorders. Within the present study, the existence of relationships between indicators of emotional health, emotion regulation, and flexibility in emotional expression was investigated. The results of our research supported the existence of relationships between these variables; however, the relationships were not sufficiently strong, and these constructs require further empirical investigation.

In our study, the claims by authors regarding the associations between psychopathology symptoms and emotion regulation were supported (Aldao & Nolen-Hoeksema, 2010; Bohnert et al., 2003; Silk et al., 2003). As hypothesized, the utilization of cognitive reappraisal leads to lower levels of depression and anxiety, whereas the use of suppression leads to increased levels of depressive and anxious symptomatology. However, only weak relationships were found between these constructs.

Regarding the evaluation of relationships between emotional flexibility and indicators of emotional health, weak positive relationships were found between flexibility in emotional expression and anxiety, contradicting the claim by Gonzales-Escamilia et al. (2022) that individuals who can flexibly enhance emotional expression have lower levels of depression and anxiety. Inconsistencies in the results

suggest the need for further exploration in future research endeavours. Conversely, in line with previous studies, it was found that enhancing flexible emotion suppression leads to reduced levels of depressive and anxious symptomatology (Burton & Bonanno, 2016; Gonzales-Escamilia et al., 2022).

Based on the results, we can assume that the constructs of emotion regulation and emotional flexibility are related to psychopathology, and focusing on these constructs may lead to more targeted diagnosis or treatment of emotional difficulties.

A limitation of the study is the deliberate sampling method employed, as randomizing the research sample allows for data generalization. Another limitation of the research is the selection of methods that are not standardized in our population and involve self-report scales, which may prompt respondents to provide socially desirable responses.

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