



Specificity of emotion regulation difficulties related to anxiety in early adolescence



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ABSTRACT

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Etiological models identify difficulties in emotion regulation as potential contributors to the development and maintenance of anxiety. To date, studies with adolescents have not tested whether different types of anxiety symptoms are related to different emotion regulation difficulties. The current study aimed to examine specificity of associations between emotion regulation difficulties and symptoms of social and generalized anxiety in early adolescence. Ninety adolescents (ages 11–14 years) completed measures of emotion regulation and anxiety symptoms. Social and generalized anxiety symptoms showed similar bivariate correlations with emotion regulation. However, when controlling for generalized anxiety, social anxiety symptoms were uniquely related to emotion understanding, acceptance, evaluation, and reactivity. Generalized anxiety symptoms were uniquely related to emotion modification. The current study suggests that social and generalized anxiety symptoms have both common and unique associations with emotion regulation difficulties in early adolescence, and has implications for which emotion regulation skills to target in clinical interventions.

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Anxiety disorders are the most prevalent mental health problem affecting children and adolescents (Brown et al., 2008), with 31.9% of adolescents experiencing an anxiety disorder in their lifetime (Merikangas et al., 2010). Etiological models have identified difficulties in emotion regulation as factors that may contribute to the development and maintenance of anxiety (Brumariu & Kerns, 2010; Jacob, Thomassin, Morelen, & Suveg, 2011; Southam-Gerow & Kendall, 2002; Thompson, 2001). The current study extends earlier work on emotion regulation and anxiety by examining the specificity of emotion regulation difficulties in relation to symptoms of social anxiety and generalized anxiety in early adolescence. We focus on these two types of anxiety because, while they can co-occur, they are hypothesized to show differential associations with emotion regulation (Mennin, Holaway, Fresco, Moore, & Heimberg, 2007; Mennin, McLaughlin, & Flanagan, 2009; Turk, Heimberg, Luterek, Mennin, & Fresco, 2005).

Anxiety and emotion regulation

The separation of emotion and emotion regulation has been notoriously difficult in the literature (Gross & Thompson, 2007; Kring & Werner, 2004). Anxiety is defined as an aroused negative emotional state accompanied by a sense of

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apprehension and lack of control concerning potential future threat (Barlow, 2000, 2002; Weems & Silverman, 2008). Emotion regulation has been defined in the developmental literature as “the extrinsic and intrinsic processes responsible for monitoring, evaluating, and modifying emotional reactions, especially their intensive and temporal features, to accomplish one's goals” (Thompson, 1994, pp. 27–28). Thus, while the experience and expression of emotion are central to anxiety, research has only begun to examine how deficiencies in children's emotion regulation capacities are related to anxiety (Jacob et al., 2011). Examining specific emotion regulation difficulties in relation to different types of anxiety symptoms in youth could inform our understanding of the development and treatment of anxiety interventions (Gross & Thompson, 2007).

Monitoring processes of emotion regulation, such as hypervigilance to threat cues, may maintain anxiety by keeping individuals' attention focused on potential threats, and empirical evidence provides support of this idea (e.g., Muris, Merckelbach, Gadet, & Meesters, 2000; Vasey, Daleiden, Williams, & Brown, 1995). Moreover, youth with a lack of awareness of their own emotions also experience greater anxiety symptoms (e.g., Suveg, Hoffman, Zeman, & Thomassin, 2009). Biased evaluations of emotional stimuli also may lead to heightened anxiety (Thompson, 2001). Children with anxiety disorders make more threat interpretations of ambiguous situations than children without a disorder (e.g., Barrett, Rapee, Dadds, & Ryan, 1996), more negatively evaluate their ability to manage emotions (e.g., Suveg & Zeman, 2004), and show more cognitive errors when interpreting emotional events (e.g., Brumariu, Kerns, & Seibert, 2012). Finally, the modification aspect of emotion regulation may relate to anxiety in that individuals who are not able to adjust their emotions to fit the context appropriately may develop anxiety (Thompson, 2001). Indeed, empirical evidence shows that youth with high levels of anxiety symptoms report less adaptive methods of emotion management (e.g., Carthy, Horesh, Apter, & Gross, 2010).

Although emotion regulation difficulties and anxiety in youth are empirically related, there is a debate about whether emotion regulation difficulties have specificity for different types of disorders or symptoms. Campbell-Sills and Barlow (2007) suggest that emotion regulation difficulties are central to all internalizing disorders. Aldao and Nolen-Hoeksema (2010) found evidence supporting this idea in that two emotion regulation strategies – rumination and suppression – were related to both anxiety and depression in adults. By contrast, Kring and Werner (2004) suggested that specific aspects of emotion dysregulation may be associated with specific disorders. For example, they suggest that major depressive disorder may be associated with emotion regulation difficulties in experiencing and regulating positive affect, whereas anxiety disorders may be associated with emotion regulation difficulties related to situation selection, attention allocation, and modification of emotions (Kring & Werner, 2004).

Evidence for specificity effects of emotion regulation with social anxiety and generalized anxiety has been found in studies with adults. In regards to the monitoring aspect of emotion regulation, difficulties with awareness of emotions and poor emotional understanding have been linked more consistently to social anxiety than generalized anxiety (Mennin et al., 2007, 2009; Turk et al., 2005). When considering the evaluative component of emotion regulation, lack of acceptance of emotions was uniquely related to social anxiety symptoms but not generalized anxiety symptoms (Mennin et al., 2007), although no differences were found between adults with social anxiety disorder or generalized anxiety disorder in another study (Mennin et al., 2009). Difficulties with emotion modification were linked more strongly to generalized anxiety than social anxiety in two studies (Mennin et al., 2007, 2009) but not in a third (Turk et al., 2005). Collectively, these studies suggest that, in adults, difficulties in monitoring and evaluation of emotions may be more strongly associated with social anxiety, whereas difficulties in modification of emotion may be more central to generalized anxiety.

Several studies examined emotion regulation difficulties in relation to either social or generalized anxiety in children. Difficulties monitoring emotions have been linked to greater social anxiety symptoms in youth (e.g., Rieffe, Oosterveld, Mieres, Terwogt, & Ly, 2008), but not consistently related to generalized anxiety (e.g., Stirling, Eley, & Clark, 2006). Difficulties in evaluating emotions have been associated with social anxiety disorder (Anderson & Hope, 2009; Melfsen, Osterlow, & Florin, 2000), greater social anxiety symptoms (Muris, 2002; Rieffe et al., 2008), and greater generalized anxiety symptoms (Calamari et al., 2001; Muris, 2002). Modification of emotion is also related to both social anxiety disorder (Anderson & Hope, 2009) and social anxiety symptoms (Findlay, Coplan, & Bowker, 2009; Rydell, Thorell, & Bohlin, 2007). Only two studies with children directly compared the relations of emotion regulation difficulties with these two different types of anxiety (Legerstee, Garnefski, Jellesma, Verhulst, & Utens, 2010; Legerstee, Garnefski, Verhulst, & Utens, 2011). A study of children ages 9–11 years found that children with different types of anxiety disorders did not differ on their use of any coping strategies (Legerstee et al., 2010).

Present study hypotheses

In summary, difficulties in emotion regulation are related to social and generalized anxiety in youth, although only two studies (Legerstee et al., 2010, 2011) examined both types of anxiety in the same sample, and these studies assessed only modification of emotion. The goal of the current project was to examine the common and unique emotion regulation difficulties associated with social anxiety and generalized anxiety symptoms in early adolescence. This is a developmental period when social evaluative concerns become more prevalent and children continue to experience generalized anxiety (Weems, 2008). Children also experience various stressors as a part of normative development (e.g. increased peer pressure), and how adolescents navigate these emotional challenges may be particularly important for their risk of developing symptoms of psychopathology (Compas, Orosan, & Grant, 1993).

Social anxiety is characterized by a fear of what others think and the possibility of being humiliated. Because of the focus on external threat, socially anxious adolescents may be less aware of and clear about their own emotions. We, therefore,

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