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# The only way out is through: emotional processing and recovery after a depressing life event

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## Abstract

This two-part study addresses the question of whether emotional processing is a useful strategy for coping with dysphoria following a depressing life event. In Part I, after a covert, moderately distressing mood induction, subjects who were assigned to an emotional processing condition reported better mood in the long run than subjects who were assigned to either distraction or unemotional problem solving conditions. In Part II, content analysis of the essays written by the subjects supported a simple habituation model of the benefits of emotional processing. Weak support was also found for the hypothesis that low to moderate levels of emotional arousal potentiate positive cognitive restructuring. Taken together, the results suggest that the negative emotional arousal that accompanies activation of depressive schemata may be a component of natural recovery from depression. © 1998 Elsevier Science Ltd. All rights reserved.

*Keywords:* Emotional processing; Depression; Rumination

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## 1. Part I

### 1.1. Introduction

What is the best way to cope with depressed mood? Should you try to “get your mind off your troubles?” Should you “roll up your sleeves and get to work” solving the underlying problem? Or should you simply “have a good cry?” While popular wisdom seems to suggest that all of these alternatives are viable coping strategies, the empirical literature on coping styles (e.g. Carver et al., 1989) has only recently begun to compare the relative effects of distraction, problem solving and emotional processing on depressed mood.

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There is ample evidence that emotional processing is an important part of coping with anxiety. For example, Rachman (1980) suggested that pathological distress is often the result of incomplete emotional processing. He identified a number of factors that promote successful emotional processing, including engaged exposures, rehearsals, talk, catharsis and vivid, long presentations. All of these strategies focus the person's attention on their distress and the causes of that distress.

Furthermore, emotional processing has long been viewed as essential in the clinical literature on anxiety disorders (e.g. Foa and Kozac, 1986). It is now widely accepted that recovery from anxiety disorders is dependent on the person actively experiencing their anxiety while facing down their fears. The experience of anxiety is a crucial component of exposure therapy for phobias (Page, 1991), panic disorder (Salkovskis and Clark, 1991), obsessive-compulsive disorder (Kozac et al., 1988), and post-traumatic stress disorder (Foa and Riggs, 1995).

There is also some evidence that the experience and expression of emotion is an important curative aspect of psychotherapy more generally (Greenberg and Safran, 1987; Greenberg and Korman, 1993). Orlinsky and Howard (1986), for example, found a positive correlation between the expression of negative affect early in the course of therapy and good outcome. Hoyt (1980) found that therapists tend to rate sessions in which patients expressed their feelings as productive, whereas poor sessions were characterized by the suppression of emotion. Finally, Strongman (1993) addressed the importance of basic research in emotion, noting that the links between emotion and cognition are relevant to therapeutic change, particularly for cognitive-behavioral therapy.

The question still remains, however, as to whether emotional processing is a useful coping strategy in response to dysphoric mood following a depressing life event. While it is possible that emotional processing is just as important in recovery from depression as it is in recovery from anxiety, it is also possible that focusing on dysphoric affect would tend to amplify and prolong depressed mood, rather than ameliorating it.

To date, there is some evidence on both sides of this question. Most notably, Nolen-Hoeksema and her colleagues (e.g. Nolen-Hoeksema, 1987; Nolen-Hoeksema et al., 1993) suggest that "cognitions and behaviors that repetitively focus the depressed individual's attention on his or her symptoms and the possible causes and consequences of those symptoms" (Morrow and Nolen-Hoeksema, 1990) will both intensify and prolong periods of depressed mood. Nolen-Hoeksema (1991) and her colleagues focus on rumination, rather than emotional processing, and stress the chronic, passive nature of such cognitions (e.g. Nolen-Hoeksema et al., 1994). Instead, they recommend distraction to ameliorate the negative affect, followed by unemotional problem solving.

There are other studies, however, which suggest that emotional processing can lead to improvements in well-being in the long run. Pennebaker and his colleagues (e.g. Spera et al., 1994) have found that, in the long term, people who write essays about traumatic or depressing events (such as job loss) in which they express their feelings and explore the possible causes and implications of the events, show substantial improvements in well-being, including immune function, effective problem solving and mood. While people who engage in emotional processing may initially appear to be more distressed than their distracting or problem solving peers, in the long run, they may be at a distinct advantage (Pennebaker et al., 1988, 1990; Pennebaker and Susman, 1988).

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