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Trait meta-mood and affect as predictors of somatic symptoms and life satisfaction

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Abstract

Research on whether low emotional intelligence is related to somatic symptoms independent of affect has shown mixed findings (De Gucht, Fischler, & Heiser, 2004; Kooiman, 1998; Lundh & Simonsson-Sarnecki, 2001). This study examined what elements of emotional intelligence and affect predict somatic symptoms and life satisfaction. Undergraduate students ($n = 488$) completed the Trait Meta-Mood Scale, Pennebaker Inventory of Limbic Languidness, Positive and Negative Affect Schedule, and the General Life subscale of the Extended Satisfaction with Life Scale. Measures were regressed on somatic symptoms and life satisfaction. The first model found that negative affect was the best predictor of somatic symptoms, followed by awareness of mood and ability to discriminate among moods. The second model found that affect was the best predictor of life satisfaction, but that the ability to repair negative moods and maintain positive moods also predicted a small amount of the variance. No interaction effects were found. Results do not support previous research that emotional intelligence does not predict somatic symptoms when affect is held constant.

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Keywords: Trait meta-mood; Somatization; Affect; Emotional intelligence; Life satisfaction

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1. Introduction

Emotional intelligence, introduced by Salovey and Mayer (1990), is a broad construct that describes emotional abilities. Mayer and Salovey's (1997) definition of emotion intelligence encompasses four main parts or branches involving the ability to be aware of and express emotions, the ability to notice how feelings influence thoughts, the ability to understand emotions, and the ability to regulate mood in a way that influences growth. Individuals use emotional intelligence to interact with their environment in a way that takes their own emotions and those of others into consideration. Trait meta-mood and alexithymia are two aspects of emotional intelligence.

Trait meta-mood refers to the ability to be aware of and manage one's emotions (Salovey, Mayer, Goldman, Turvey, & Palfai, 1995), but does not include awareness of the feelings of others. In developing their measure of trait meta-mood, Salovey et al. found three main factors: *Attention to Feelings* (Attention) refers to the degree of awareness of one's moods; *Clarity of Feelings* (Clarity) refers to the ability to discriminate among moods; and *Mood Repair* (Repair) refers to the ability to "repair unpleasant moods or maintain pleasant ones" (p. 129). It should be noted that as the measure is self-report, it actually reflects *perceived* emotional intelligence. Greater perceived abilities in Clarity and Repair appear to contribute to higher life satisfaction (Extremera & Fernández-Berrocal, 2005; Palmer, Donaldson, & Stough, 2002). There also appear to be gender differences in perceived trait meta-mood abilities. Previous research has found that although females scored higher on Attention, males reported higher Clarity and Repair (Extremera, Durán, & Rey, 2007; Thayer, Rossy, Ruiz-Padial, & Johnson, 2003). Previous research suggests that when the greater attention to emotions exhibited by women is not balanced by greater emotional repair, this may lead to rumination and more negative affect (Thayer et al., 2003).

Whereas the construct of trait meta-mood is defined by the presence of emotional abilities, alexithymia, which exhibits some overlap with trait meta-mood (Coffey, Berenbaum, & Kerns, 2003; Lumley, Gustavson, Partridge, & Labouvie-Vief, 2005), is defined by the absence of emotional abilities. The term alexithymia was first introduced by Sifneos (1973) to describe patients exhibiting psychosomatic symptoms who had difficulty identifying and describing emotions. Alexithymic individuals tend to focus on external occurrences to the exclusion of emotional content (Kooiman, 1998), and have difficulty linking feelings to bodily sensation and motor activity (Waller & Scheidt, 2004).

Alexithymia is associated with greater report of somatic symptoms and somatization. Somatization has been defined in various ways, but the common thread running through the definitions is report of somatic symptoms that are not explained by an organic condition (De Gucht & Fischler, 2002). Not surprisingly, it has been linked to lower life satisfaction (Grabe et al., 2003). Although a number of studies have found a small to moderate relationship between alexithymia and somatization (De Gucht & Heiser, 2003; Sayer, Kirmayer, & Taillefer, 2003; Waller & Scheidt, 2004), other researchers have found that a bivariate relationship between alexithymia and somatization disappears when negative affect is accounted for (Kooiman, 1998; Lundh & Simonsson-Sarnecki, 2001). De Gucht, Fischler, and Heiser (2004), however, found that, while negative affect was a greater predictor of somatic symptoms, the dimension of alexithymia involving difficulty identifying feelings was a predictor as well. This dimension of alexithymia appears to be related to the Attention and Clarity factors of trait meta-mood (Coffey et al., 2003).

The purpose of this study was to examine whether trait meta-mood predicts somatic symptoms and life satisfaction beyond what is predicted by affect. (For this study, we prefer the term *somatic*

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