1. Introduction

Pets are an integral part of many people’s lives, and much research has been done on the positive health benefits of engaging with pets, whether it is for a few minutes or throughout a lifetime. The positive outcomes that result from close interactions with pets have been shown to be mostly supportive in nature; the mere presence of a pet can decrease mental stress (Allen, Shykoff, & Izzo, 2001), elevate mood (Coakley & Mahoney, 2009), and increase confidence in a caregiver (Schneider & Harley, 2006). In one study, the supportive benefits of pet affinity were demonstrated to go beyond even that of close relationships with humans (Allen, Blascovich, & Mendes, 2002). In light of the supportive role of pets, the present research seeks to explore how pet affinity might benefit those who have trouble expressing emotions and gaining social support. Specifically, we will examine how pet affinity might moderate the negative relationship between ambivalence over emotional expression (AEE) and social support.

Social support is defined by Thoits (2010) as “emotional, informational, or practical assistance from significant others, such as family members, friends, or coworkers; support actually may be received from others or simply perceived to be available when needed” (p. 546). Past research has demonstrated that social support has been associated with positive benefits for both physical and mental health in relation to depression, anxiety, cancer, AIDS/HIV, and daily stressors (Cobb, 1976; Nurullah, 2012). Those who feel a lack of social support suffer negative consequences in well-being and mental and physical health. Research has shown that a lack of social support predicts stress, depression (Pauley & Hesse, 2009), and an increased likelihood of developing coronary heart disease (Barth, Schneider, & Von Känel, 2010).

One population that seems to be particularly vulnerable to a lack of social support are individuals who are high in ambivalence over emotional expression (AEE). AEE results from a conflict in which one wants to express one’s feelings, but is afraid of the consequences that may result (King & Emmons, 1990). Those who are high in AEE report a whole host of negative outcomes such as: psychological distress (Katz & Campbell, 1994; King, 1998; Tucker, Winkelman, Katz, & Bermas, 1999), depression, obsessive–compulsive tendencies, anxiety, paranoid ideation, psychoticism (King & Emmons, 1990, 1991), poor interpersonal functioning (e.g., less marital satisfaction; King, 1993), and fear of intimacy (Emmons & Colby, 1995). Similar to social support, the effects are not limited to mental well-being; those who are high in AEE also demonstrate negative physical side effects. Patients high in AEE reported more
physical symptomatology in general (King & Emmons, 1990, 1991), and gastrointestinal cancer patients high in AEE reported more pain, poorer quality of life and emotional well-being, lower social functioning, and engaged in more pain catastrophizing relative to those lower in AEE (Porter, Keefe, Lipkus, & Hurwitz, 2005). AEE has mainly been examined as a stable trait; however, AEE may be influenced by environment and culture. For example, Lu and Stanton (2010) demonstrated that Asians had higher AEE compared with Caucasians, because Asian cultures often discourage public emotion expression.

The negative link between AEE and social support is well documented in a variety of populations. Emmons and Colby (1995) found that college students who were low in AEE tended to also be low in social support. A large national study found that AEE was negatively linked to social support among postmenopausal women (Michael et al., 2006), and a European study found that high levels of AEE was associated with lower social functioning (including support) in Dutch rheumatoid arthritis patients (van Middendorp et al., 2005).

The conceptual basis for this negative relationship between AEE and social support has been the subject of speculation by many researchers. King and Emmons (1990) state that those who are high in AEE tend to overread and overthink others' emotions. This excessive rumination over others' emotions often leads to psychological distress. Furthermore, Lu, Uysal, and Teo (2011) hypothesized that those with high levels of AEE may feel helpless about this distress, and given their relative inability to express their emotions, they have little recourse to resolve the situation. It may also be that those with high levels of AEE are confused about their own emotions, and therefore experience conflict over whether to express them or not. A third possibility is that AEE prevents people from using social support as a coping mechanism, which leaves them with fewer strategies to manage stressful life events. Emmons and Colby (1995) found that those high in AEE tended to utilize avoidant coping styles, and also tended to report negative attitudes toward social support. It is also possible that a lack of social support could lead an individual to experience more AEE as they are unsure of how to express themselves in social situations.

The inability to predict how other people will react to self-expression can lead to hesitancy to disclose emotions to others, as well as a tendency to regret self-disclosure that was perceived to be too revealing. Past research has negatively linked self-disclosure with closeness for people with high social anxiety (Kashdan, Volkmann, Breen, & Han, 2007), which may function in a similar way to AEE in regards to close relationships. Along with the poorer interpersonal functioning (King, 1993) and fear of intimacy (Emmons & Colby, 1995) mentioned previously as negative outcomes for those who are high in AEE, it was also found that self-authenticity moderated the negative association between relationship satisfaction and emotion suppression. This research demonstrated that the incongruence between one's self and his or her emotional expression was the key aspect of the internal conflict (English & John, 2013). Thus, other means of deriving social support should be explored in domains in which a person can act completely authentically, without fear of social repercussions from emotional expression.

The particular domain that this study aims to explore is the supportive role of pets, and whether they can provide a source of non-judgmental social support. There is consistent evidence in current literature of positive benefits resulting from the presence of pets across a variety of populations. Several studies show physical benefits such as improved cardiovascular health and decreased physiological stress from interactions with animals and pets (dogs especially: Albert & Bulcroft, 1988; Brown, 1999; Giaquinto & Valentini, 2009; Zasloff, 1996). In addition, the presence of dogs during psychotherapy sessions has been shown to increase patients' positive views of their therapists as well as their willingness to disclose information (Schneider & Harley, 2006). Another study demonstrated that hypertensive stockbrokers who adopted a pet cat or dog experienced reduced physiological reactions to mental stress, compared to their control counterparts who did not adopt a pet (Allen et al., 2001). Furthermore, hospitalized patients experienced an increase in vitality, better mood, and a decrease in pain and respiratory rates when they were visited by dogs (Coakley & Mahoney, 2009).

Researchers have also shown that in some cases, pets can fill a supportive role similar to the role typically filled by other people. In one study, pet owners were found to have lower blood pressure, lower heart rate, lower cardiovascular reactivity, and faster recovery when their pets were present during a stressful math task or a cold pressor task. Of particular interest, when participants performed the math task in front of their spouse, their blood pressure and heart rate increased; however, when their pet was brought in, their reactivity significantly decreased (Allen et al., 2002). This demonstrates that, in some cases, pets can provide non-judgmental social support, potentially greater than close others. Similarly, a study revealed that college freshmen felt they would benefit from pet therapy specifically because of the associated social support. The students reported viewing their pets as family members that would provide support and comfort in stressful times (Adams, Carlson, & Riley, 2009).

Given all of this evidence of the supportive, non-judgmental role of pets in emotional well-being and social support, the present study was designed to evaluate the relationship between AEE and social support by considering pet affinity (operationalized in this study as the degree to which people value interactions with pets, derived from the Pet Attitude Scale; Templer, Salter, Dickey, Baldwin, & Velere, 1981) as a potential moderator. The first and second hypotheses predicted (respectively) that AEE would be negatively associated with social support, and that pet affinity would be positively associated with social support. The third hypothesis predicted that pet affinity would moderate the association between AEE and social support such that the negative relationship between AEE and social support would be weaker among those high in pet affinity.

2. Methods

2.1. Participants

One hundred and ninety-eight undergraduate dog owners from a large southwestern university completed study materials including measures of social support, AEE, and pet affinity. Participants ranged in age from 18 to 50 (Mean age = 22.04, SD = 4.65, 84.2% female). The sample was ethnically diverse, 33% Caucasian, 13% Black/African American, 12% Asian/Pacific Islander, 5% Multi-Ethnic, 1% Native American/American Indian, and 36% Other.

2.2. Measures

2.2.1. The medical outcomes study (MOS) social support scale (Sherbourne & Stewart, 1991)

The 19-item MOS was used to evaluate participants' perceived access to emotional and informational support (eight items; e.g., “You have someone to give you good advice about a crisis”), tangible support (four items; e.g., “You have someone to take you to the doctor if you needed it”), and affectionate support (three items; e.g., “You have someone to love you and make you feel wanted”) from other people. An additional three items evaluated positive social interactions (e.g., “You have someone to do something
دریافت فوری متن کامل مقاله

امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات