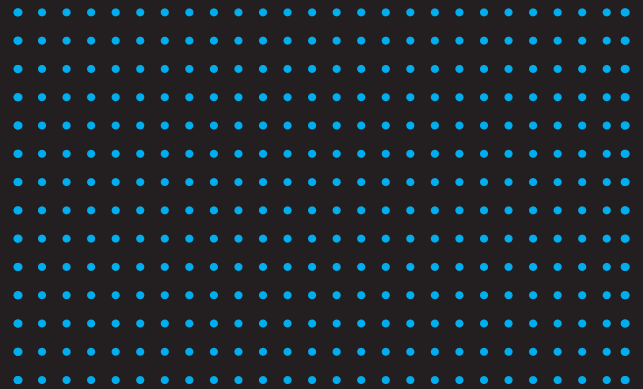




# SPO 2024

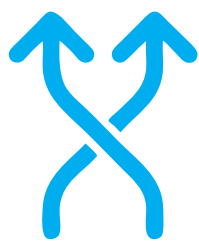
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## ***VZŤAHY MEDZI STRATÉGIAMI EMOCIONÁLNEJ REGULÁCIE A STRATÉGIAMI ZVLÁDANIA***

### ***RELATIONSHIPS BETWEEN EMOTION REGULATION STRATEGIES AND COPING STRATEGIES***

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#### ***ABSTRACT***

Emotion regulation and stress coping are similar yet distinct concepts (Gross, 2009). Emotion regulation primarily focuses on managing present emotions, while coping encompasses broader strategies targeting stress management. In the cross-sectional study, we examined relationships between cognitive emotion regulation strategies (CERS) (CERQ, Garnefski et al., 2001) and coping strategies (SVF 78, Janke & Erdmann, 2003) in a Slovak sample ( $N = 97$ ;  $M_{age} = 38,3$ ;  $SD_{age} = 10,9$ ). Overall, adaptive CERS positively correlated with nearly all positive coping strategies, except guilt denial, substitutional satisfaction, and need for social support, and negatively correlated with self-blame and resignation. Less adaptive CERS, in general, did not correlate with positive coping strategies but positively correlated with all negative coping strategies. Linear regression results suggested that both adaptive and less adaptive CERS significantly predicted negative coping strategies, while adaptive ER strategies also significantly predicted positive coping strategies. Our findings indicate a potential for increasing coping effectiveness in challenging situations through adaptive CERS.

#### **Keywords**

Emotion Regulation; Coping Strategies; SVF-78; Cognitive Emotion Regulation Strategies; CERQ

#### ***ABSTRAKT***

Regulácia emócií a zvládanie záťažových situácií sú veľmi podobné, no zároveň odlišné koncepty (Gross, 2009). Emocionálna regulácia (ER) sa primárne zameriava na manažovanie prítomných emócií, zatiaľ čo zvládanie zahŕňa širšie stratégie, ktoré sa zameriavajú najmä na zvládanie stresu. V prierezovej štúdii sme skúmali vzťahy medzi kognitívnymi stratégiami (KS) ER (CERQ, Garnefski et al., 2001) a stratégiami zvládania (SVF 78, Janke & Erdmann, 2003) na slovenskej vzorke ( $N = 97$ ;  $M_{vek} = 38,3$ ;  $SD_{vek} = 10,9$ ). Adaptívne KSER v globále pozitívne korelovali s takmer všetkými pozitívnymi stratégiami zvládania okrem odmietania viny, náhradného uspokojenia a potrebou sociálnej podpory a negatívne korelovali so

sebaobviňovaním a rezignáciou. Menej adaptívne KSER v globále nekorelovali s pozitívnymi, ale pozitívne korelovali so všetkými negatívnymi stratégiami zvládania. Výsledky lineárnej regresie naznačili, že v globále adaptívne aj menej adaptívne KSER významne predikovali negatívne stratégie zvládania. Adaptívne KSER tiež významne predikovali pozitívne stratégie zvládania. Zistenia našej štúdie naznačujú možnosti zvyšovania efektivity pri zvládaní náročných situácií prostredníctvom adaptívnych KSER.

### **Kľúčové slová**

emocionálna regulácia; stratégie zvládania; SVF-78, kognitívne stratégie emocionálnej regulácie; CERQ

### **Grantová podpora**

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## ***INTRODUCTION***

Emotion regulation and stress coping are similar yet distinct concepts (Gross, 2009). Emotion regulation encompasses complex processes that cover how people perceive, express, and manage emotions. Gross (2009) also emphasizes that emotion regulation involves not only psychological but also physiological responses (e.g., changes in pulse or breathing). This perspective separates cognitive strategies from behavioral responses, such as seeking social support or other visible expressions of emotion regulation.

In line with this differentiation, Garnefski et al. (2001) developed a more specific theory of emotion regulation focused on cognitive emotion regulation strategies (CERS). CERS refer to the thought processes individuals use to manage negative emotions after challenging events. These strategies involve deliberate thoughts that help reduce the intensity and duration of emotions and prevent individuals from becoming overwhelmed. Cognitive emotion regulation operates on both conscious and unconscious levels, including actions like reappraising events or refocusing attention (Garnefski et al., 2001).

While emotion regulation, in general, primarily focuses on managing present and various emotions, coping encompasses broader strategies targeting stress management (Trudel-Fitzgerald et al., 2023). Yet, the concept of stress coping introduced by Lazarus and Folkman (1984) provides another framework for understanding cognitive strategies in emotion regulation. Coping, in their view, is defined as a set of cognitive *and behavioral* efforts an individual makes to respond to stressful situations that are perceived as threatening. Therefore, coping includes both cognitive and behavioral aspects.

In line with the presented theory, Janke and Erdmann (2003) later developed the SVF (Stress Verarbeitungs Fragebogen) -78 Questionnaire, which categorizes 13 coping strategies into positive (downplaying, guilt denial, diversion, substitutional satisfaction, situation control, reaction control and positive self-instruction), negative (flight tendency, rumination,

resignation, and self-blame), and two uncategorized and less used strategies (need for social support, active avoidance). The concept of stress coping by Janke and Erdmann (2003) focuses on reducing or ending a stressful situation through psychological processes, allowing individuals to regain a state of psychosomatic balance.

Despite theoretical differences in the concepts of stress-coping and cognitive emotion regulation strategies, they both share various similarities (Trudel-Fitzgerald et al., 2023). However, up-to-date research on this topic is rather scarce. As a result, the goal of the current study is to explore the relationships among aggregated adaptive and less adaptive CERS and stress-coping strategies in the Slovak sample. Due to the mentioned similarities, we expect that adaptive CERS will mainly positively correlate with positive stress-coping strategies and less adaptive CERS will positively correlate with negative stress-coping strategies. Findings of the current study contribute to the development of more effective methods in psychotherapy and counseling, where the goal is to strengthen positive adaptive mechanisms and reduce the psychological burden from prolonged stress.

## ***METHODS***

### **Participants**

Data collection was conducted in April 2023. We collected data from 97 adult participants (54.6% women) using convenience and snowball sampling methods. The inclusion criteria required participants to be at least 18 years old. The age ranged from 19 to 63 years, with the average age being 38.3 years ( $SD = 10.9$ ). Data were collected through a mix of in-person and online questionnaire administration to achieve a gender-balanced sample.

### **Design and Procedure**

We opted for a cross-sectional study with a correlational design. The collected data were part of a larger study covering a broader spectrum of emotion regulation. For the purposes of this study, we focused specifically on the relationships between cognitive emotion regulation strategies and stress-coping strategies. Participants were informed about the terms and conditions of the research through an informed consent form at the beginning of the questionnaire. Data collection was anonymous and voluntary, and participants could withdraw at any time.

### **Materials**

*Cognitive Emotion Regulation Questionnaire* (CERQ) was developed by Garnefski et al. (2001) and consists of nine subscales, each containing four items that assess various cognitive emotion regulation strategies. These strategies include positive refocusing, refocus on planning, positive reappraisal, putting into perspective, acceptance, self-blame, rumination, catastrophizing, and blaming others. Participants are instructed to respond on a 5-point Likert-type scale from almost never (1) to almost always (5). The final score for each subscale is calculated separately by summing the individual responses with a minimum of four points and a maximum of 20 points. A higher score in all cases indicates more frequent use of the corresponding cognitive strategy for emotion regulation.

For the purpose of the current study, we worked only with aggregated adaptive and less adaptive strategies (e.g., Domaradzka & Fajkowska, 2018; Pálfi et al., 2024). Adaptive strategies contain

positive refocusing ( $\alpha = 0.90$ ), refocus on planning ( $\alpha = 0.90$ ), positive reappraisal ( $\alpha = 0.87$ ), putting into perspective ( $\alpha = 0.90$ ), and acceptance ( $\alpha = 0.55$ ). However, we excluded the acceptance subscale from further analyses due to its low internal consistency. Less adaptive strategies are self-blame ( $\alpha = 0.67$ ), rumination ( $\alpha = 0.70$ ), catastrophizing ( $\alpha = 0.90$ ), and blaming others ( $\alpha = 0.78$ ). For both, the aggregated score is calculated by summing scores from all related subscales. The internal consistency of the aggregated subscales was satisfactory (Table 1).

*Stress Coping Style Questionnaire* (Stressverarbeitungsfragebogen-78; SVF-78) developed by Janke and Erdmann (2003) is a shortened version of SVF-120 (Janke & Erdmann, 1997). The questionnaire contains 78 items evenly distributed into 13 subscales – downplaying, guilt denial, diversion, substitutional satisfaction, situation control, reaction control, positive self-instruction, need for social support, active avoidance, flight tendency, rumination, resignation, and self-blame. Participants can respond on a five-point Likert-type scale (0 = not at all – 4 = very likely). The subscale score is the sum of all related items (6). The coping styles can also be divided into positive and negative (Table 1). Higher scores indicate higher use of the coping styles. The internal consistency of the used subscales measured by Cronbach's alpha is listed in Table 1.

## Data analysis

We used MS Excel and the statistical software JAMOVI for data wrangling and further statistical analyses. First, we conducted basic descriptive analyses of the examined variables. Then, we continued with Spearman's correlations due to the non-normal distribution of the data and continued with general linear regression analyses.

## RESULTS

Descriptive analysis showed that participants used the preferred adaptive CERS rather than the less adaptive CERS (Table 1). Of the stress-coping strategies, the most dominant was active avoidance, which does not belong to positive or negative stress-coping strategies. In the positive stress-coping, preferred strategies were situation control, reaction control, and positive self-instruction. Positive strategies of lower preference were substitutional satisfaction, downplaying, and guilt denial. The most preferred negative stress-coping strategy was the flight tendency, and the least preferred was resignation. Since most examined variables had non-normal distribution, we continued with Spearman's correlation analysis (Table 1).

Adaptive CERS had strong positive correlations with positive stress-coping strategies situation control, reaction control, positive self-instruction, and diversion. A moderate correlation was found with downplaying. We did not observe significant correlations between adaptive CERS, guilt denial, and substitutional satisfaction. A significant strong positive correlation was found between active avoidance and adaptive CERS, but not with the need for social support. Finally, adaptive CERS had significant negative correlations with negative stress-coping strategies except for the flight tendency strategy.

Less adaptive CERS strategies had mostly negative but very weak and insignificant relationships with positive stress-coping strategies, the need for social support, and active avoidance. On the other hand, as expected, significant positive correlations were observed between less adaptive CERS and negative stress-coping strategies.

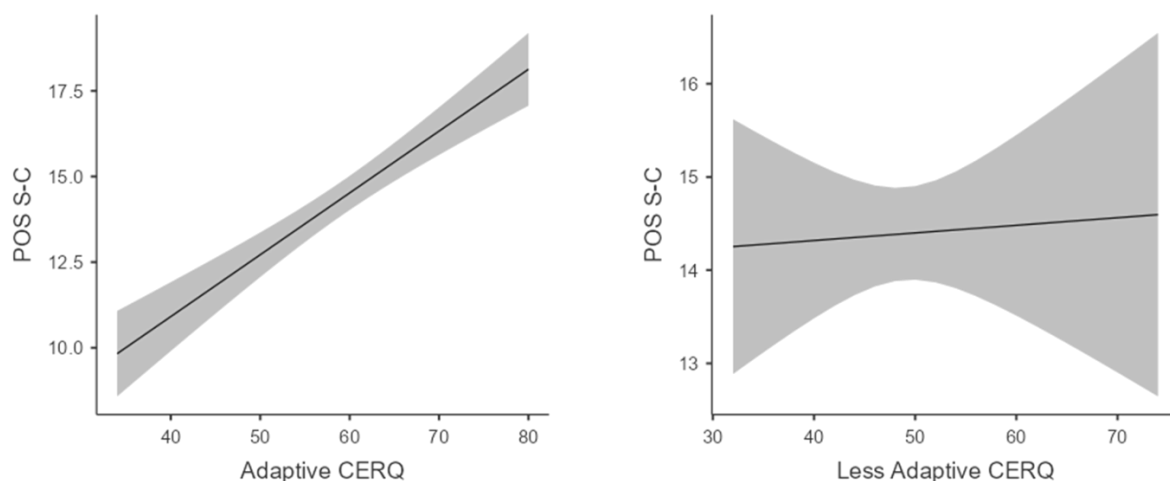
**Table 1.** Descriptive statistics and correlations for CERS and stress-coping strategies

	Variable	<i>M</i>	<i>SD</i>	<i>Mdn</i>	<i>C</i> 's $\alpha$	Adaptive CERS	Less adaptive CERS
<i>CERS</i>	Adaptive	59.3	11	58	.93	-	-
	Less adaptive	48.9	6.63	48	.69	-.09	-
<i>Positive stress-coping strategies</i>	Downplaying	12.9	4.46	13	.88	.34**	-.15
	Guilt denial	13.1	3.1	13	.67	.14	.05
	Diversion	14.2	4	14	.79	.55**	-.14
	Substitutional satisfaction	12.8	4.72	13	.84	.05	-.04
	Situation control	16.4	4.92	15	.90	.73**	-.08
	Reaction control	16.2	4.7	15	.85	.68**	-.11
	Positive self-instruction	15.2	3.69	15	.62	.56**	-.09
	Need for social support	15.3	4.16	15	.86	.11	.15
<i>Negative stress-coping strategies</i>	Active avoidance	17.2	4.95	17	.91	.73**	.00
	Flight tendency	13.5	4.18	13	.79	-.06	.37**
	Rumination	12.6	5.54	13	.93	-.21*	.46**
	Resignation	11	5.81	12	.91	-.50**	.50**
	Self-blame	11.8	4.54	13	.83	-.36**	.58**

Note. \*  $p < .05$ , \*\*  $p < .001$ , *C*'s  $\alpha$  = Cronbach's alpha

In the last step, we looked at the predictive power of adaptive and less adaptive CERS strategies in global positive and global negative stress-coping strategies. The first model in which we used adaptive and less adaptive CERS to predict positive stress-coping strategies was significant ( $F(2,96) = 31.3$ ;  $p < .001$ ;  $R^2 = .40$ ). Adaptive CERS ( $b = 0.18$ ;  $t = 7.91$ ;  $p < .001$ ) but not less adaptive CERS ( $b = 0.01$ ;  $t = 0.22$ ;  $p = .83$ ) predicted positive stress-coping strategies (Figure 1). The model explained 40% of the variance in positive stress-coping strategies.

**Figure 1.** Adaptive and less adaptive CERS in predicting positive stress-coping strategies

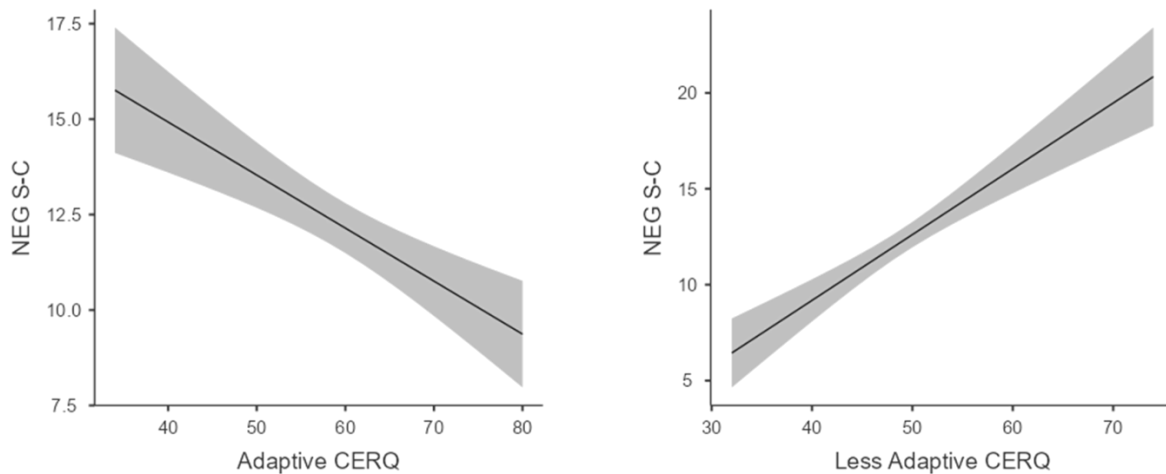


Note. POS S-C = positive stress-coping strategies, grey area = 95% confidence intervals, Adaptive CERQ = aggregated adaptive CERS, Less Adaptive CERQ = less adaptive CERS,  $N = 97$ .

We also used adaptive and less adaptive CERS to predict negative stress-coping strategies. The model was significant and explained 43.1% of the variance in negative stress-coping ( $F(2,96)$ )

= 31.3;  $p < .001$ ;  $R^2 = .431$ ). In this case, both adaptive ( $b = -0.14$ ;  $t = -4.63$ ;  $p < .001$ ) and less adaptive ( $b = 0.34$ ;  $t = 6.88$ ;  $p < .001$ ) CERS were significant predictors of negative stress-coping strategies.

**Figure 2.** Adaptive and less adaptive CERS in predicting negative stress-coping strategies



Note. NEG S-C = negative stress-coping strategies, grey area = 95% confidence intervals, Adaptive CERQ = aggregated adaptive CERS, Less Adaptive CERQ = less adaptive CERS,  $N = 97$ .

## ***DISCUSSION***

Previous research indicates that improving emotional regulation (i.e., frequent use of adaptive CERS and lower use of less adaptive CERS) relates to better mental health and more effective stress management (Aldao et al., 2010; Garnefski et al., 2001). On the other hand, according to the mentioned authors, higher use of less adaptive CERS relates to higher levels of stress and incidence of psychopathology.

Our results converged with the previous findings and showed that adaptive CERS positively correlated with most positive stress-coping strategies. Situation control, reaction control, and positive self-instruction, which share moderately strong to strong positive correlations with adaptive CERS, are typical for a goal-oriented and proactive mindset toward stress. Moreover, these strategies focus on enhancing personal control and cognitive reframing, which is linked to better psychological outcomes and resilience under stress (Compass et al., 2001). However, adaptive CERS also had a strong correlation with active avoidance, which is considered a passive strategy, and its goal is to minimize the impact of a stressor.

Next, we observed that adaptive CERS negatively correlated with negative stress-coping strategies - resignation, rumination, and self-blame. Less adaptive CERS did not have significant relationships with positive stress-coping strategies, but had significant positive correlations with negative stress-coping strategies. Furthermore, the predictive role of adaptive and less adaptive strategies in stress-coping was supported by linear regression. Adaptive CERS were a significant predictor of positive and negative stress-coping strategies. Less adaptive strategies significantly predicted only negative stress-coping strategies that align with previous findings (e.g., Aldao et al., 2010; Garnefski & Kraaij, 2006). Less adaptive CERS are not very proactive and tend to increase the focus on negative emotions. Therefore, this could explain why they did not predict positive stress-coping strategies.

Finally, despite statistically significant results, our sample was not representative. Moreover, the *Stress Coping Style Questionnaire* seems to have various limitations in the theoretical background related to various inconsistencies. A subscale acceptance in *CERQ* is also rather ambiguous, which is confirmed by low internal consistency not only in our study (McKinnon et al., 2020). Therefore, further research should focus on reconsidering the items or reconceptualization of the subscales in both constructs – CERS and stress-coping strategies.

### **Conflicts of interest statement**

The authors state that there is no conflict of interest.

### **Data availability**

The data supporting the findings of this study are available from the authors upon request.

### **Ethics approval**

Ethical review and approval were not required for the study on human participants in accordance with the local legislation and institutional requirements. All participants were informed about the terms, conditions, and procedures of the study in the Informed Consent at the beginning of the survey.

### **CRedit authorship contribution statement**

**Miroslava Galasová:** Methodology, Validation, Formal analysis, Data Curation, Writing - Original Draft, Writing - Review & Editing, Visualization. **Zuzana Heinzová:** Conceptualization, Methodology, Validation, Investigation, Resources, Data Curation, Supervision, Project administration, Funding acquisition.

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