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PSYCHOLOGICAL WELL-BEING OF ADOLESCENTS:
MATERNAL REARING BEHAVIORS, BASIC PERSONALITY
TRAITS AND EMOTION REGULATION PROCESSES

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TRAITS AND EMOTION REGULATION PROCESSES

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I hereby declare that all information in this document has been obtained and presented in accordance with academic rules and ethical conduct. I also declare that, as required by these rules and conduct, I have fully cited and referenced all material and results that are not original to this work.

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ABSTRACT

PSYCHOLOGICAL WELL-BEING OF ADOLESCENTS: MATERNAL REARING BEHAVIORS, BASIC PERSONALITY TRAITS AND EMOTION REGULATION PROCESSES

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Parents remain to be effective in adolescents' emotional development. However, emotion socialization research is fundamentally based on studies conducted in infancy through middle childhood, but late childhood and adolescence have been largely ignored. Therefore, the current study aimed to make contribution to the current literature investigating factors associated with adolescents' emotion regulation difficulties. As the first part of the study psychometric properties of the Difficulties in Emotion Regulation Scale (DERS) were examined among Turkish adolescent sample. A total of 312 high school students (161 females and 141 males) whose ages ranged between 14 and 17 years participated in the study and findings indicated strong evidence for the utility of the DERS as a measure of emotion regulation difficulties in adolescents.

The main study consists of three different purposes. First, discrepancies between mothers' and adolescents' reports on adolescents' emotion regulation difficulties were examined. Second, factors associated with adolescents' emotion regulation difficulties such as mothers' emotion regulation, psychopathology, and personality traits, maternal rearing behaviors, and adolescents' personality traits were explored. Lastly, mediating roles of emotion regulation difficulties on the

relationship between adolescents' perception of their mothers' maternal rearing behaviors and their psychological problems were examined. Participants of this research were 595 first-grade high school students aged between 14 and 16 years, and 365 mothers from eight different high schools in Ankara. Data was collected from both adolescents and their mothers through questionnaire packets. Adolescents' questionnaire set consisted of scales measuring emotion regulation difficulties (DERS), positive and negative affect scale (PANAS), maternal rearing behaviors (EMBU), basic personality traits (Big Five), and adolescents' externalizing (SDQ) and internalizing symptoms (CDI). Similarly, mothers' questionnaire set consisted of scales measuring emotion regulation difficulties (DERS), children's emotion regulation (DERS), Brief Symptom Inventory (BSI), maternal rearing behaviors (EMBU), and basic personality traits (Big-Five). The results indicated that adolescents, both boys and girls, reported higher levels of difficulties in emotion regulation for themselves as compared to reports of mothers for their children. As expected, adolescents' basic personality traits were significantly associated with their emotion regulation difficulties even after controlling the effects of socio-demographic variables, mothers' emotion regulation, psychological symptoms and their maternal rearing behaviors. Finally, mediation analyses indicated that the link between perceived maternal rearing behaviors and adolescents' psychological problems occurs through emotion regulation difficulties of adolescents. Findings were discussed within the relevant literature.

Keywords: Parenting Style, Adolescence, Difficulties in Emotion Regulation

ÖZ

ERGENLERİN PSİKOLOJİK SAĞLIĞI, ÇOCUK YETİŞTİRME DAVRANIŞLARI, TEMEL KİŞİLİK ÖZELLİKLERİ VE DUYGU DÜZENLEME SÜREÇLERİ

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Ebeveynlerin, çocuklarının duygu gelişimleri üzerindeki etkileri ergenlik döneminde de devam etmektedir. Buna rağmen, bu konuda yapılan çalışmalar bebeklik ve çocukluk dönemini kapsamakta, ergenlik dönemi ise genel olarak göz ardı edilmektedir (Katz ve ark., 2012; Morris ve ark., 2007). Bu nedenle, çalışmada, ergenlerin duygu düzenlemede yaşadıkları zorluklar ve nedenleri incelenerek mevcut literatüre katkı sağlanması amaçlanmaktadır. Çalışmanın ilk aşaması olarak Türk ergen örneklemini için Duygu Düzenlemede Güçlükler Ölçeği (DERS)'nin psikometrik özellikleri incelenmiştir. Araştırmaya, lise 1. sınıf öğrencisi olan 14-17 yaş grubu 312 ergen katılmış ve bulgular DERS ölçeğinin ergenlerin kullanımı için uygun olduğunu göstermiştir.

Araştırmanın ana kısmı üç temel hedeften oluşmaktadır. İlk olarak ergenlerin duygu düzenlemeleri konusunda ergen ve anne beyanları arasındaki farka bakılmıştır. İkinci olarak ergenlerin duygu düzenlemeleri ile ilişkili faktörler araştırılmıştır. Bu faktörler annenin duygu düzenleme becerileri, psikolojik sorunları, kişilik özellikleri, çocuk yetiştirme davranışları ve ergenlerin kişilik özellikleri olarak belirlenmiştir. Son olarak, algılanan çocuk yetiştirme davranışları ile ergenlerin psikolojik sorunları arasındaki ilişkide, duygu düzenlemede yaşanan güçlüklerin

arabulucu etkisi araştırılmıştır. Araştırmada, lise 1. sınıf öğrencisi olan 14-16 yaş grubu 595 ergen ile 365 anne yer almıştır. Ergen anketinde demografik özelliklere ilişkin sorular, annelerden algılanan çocuk yetiştirme davranışları, duygu düzenleme becerileri, problemleri davranışlar, temel kişilik özellikleri, pozitif ve negatif duygu özelliklerini değerlendiren ölçümler yer almaktadır. Annelerin doldurduğu ebeveyn anketinde; demografik özelliklere ilişkin sorular, çocuk yetiştirme davranışları, kısa semptom envanteri, kendi duygu düzenleme ve çocuğun duygu düzenlemesini değerlendiren ölçümler ve temel kişilik özelliklerini değerlendiren ölçümler bulunmaktadır. Araştırma bulguları ergenlerin annelerine kıyasla daha çok zorluk beyan ettiklerini göstermiştir. İkinci olarak beklenildiği gibi demografik ölçümler, annenin duygu düzenleme güçlükleri ve çocuk yetiştirme davranışları kontrol edildiğinde bile ergenlerin temel kişilik özellikleri yaşadıkları duygu düzenleme güçlükleri ile ilişkili bulunmuştur. Son olarak, ergenlerin algıladıkları çocuk yetiştirme davranışlarının duygu düzenlemelerini olumsuz etkilediği ve dolayısı ile psikolojik sorunlara neden olduğu bulunmuştur. Bulgular literatür temelinde tartışılmıştır.

Anahtar Kelimeler: Ebeveynlik Stilleri, Ergenlik Dönemi, Duygu Düzenlemede Yaşanan Güçlükler

Eternal Sunshine of my Spotless Mind...

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CHAPTER I

INTRODUCTION

“Certain aspects of cognition allow us to calculate the distance between the chair and the door. Emotion allows us to evaluate steadily and quickly whether it is in our interest to stay in the chair and to act instantly if we need to escape through the door. Emotion regulation helps us to stay in the chair even when we feel compelled to escape”

Cole, Martin, and Dennis, 2004

1.1 General Introduction

Research on parental emotion socialization has focused primarily on infancy through middle childhood and little is known about adolescence. Morris, Silk, Steinberg, Myers, and Robinson (2007) reviewed research published since 1998, focusing on the role of family context on the socialization of children’s and adolescents’ emotion regulation, and concluded that there has been little research on the impact of parenting styles on adolescents’ emotion regulation and studies examining links between parenting styles and emotion regulation have been greatly needed. Moreover, studies indicate that emotion socialization practices of parents have detrimental effects on psychological adjustment of adolescents. Adolescents who remain overly dependent on their parents for assistance in regulating emotions may be at risk for developing internalizing problems; however, adolescents who refuse emotional guidance from their parents may be at risk for developing externalizing problems (Zeman, Cassano, Perry-Parrish, & Stegall, 2006).

Beginning to establish emotional and behavioral autonomy makes adolescents experience more conflictual and emotionally distant relations with parents (Steinberg

& Morris, 2001). Furthermore, because of adolescents' increased independence, parents are less likely to know the details of their children's emotional lives, unless their children feel comfortable approaching the parents and discussing emotional issues with them. Parents who are accepting of their own emotions may create an environment in which adolescents feel comfortable to approach them as a source to cope with negative emotions (Gottman, Katz, & Hooven, 1996, 1997). Especially, mothers are better in establishing a more emotionally supportive relationship with their children, and in doing so, buffer them from negative outcomes during adolescence period (Denham, Renwick, & Holt, 1991; Parke, Cassidy, Burks, Carson, & Boyum, 1992). Furthermore, the role of parents' own psychopathology on adolescents' emotion regulation should be taken into consideration. However, studies examining the impact of parental psychopathology on the socialization of emotion regulation mostly conducted with infants and children (Silk, Shaw, Skuban, Oland, & Kovacs, 2006). It is possible that adolescents are becoming more emotionally independent from their parents thereby being less influenced from their parents' psychopathology.

This dissertation consists of three parts. The first part covers review of literature about emotion regulation. The definition of emotion regulation starts with what the emotion is, so literature review part starts with the definition of emotion. The definitions of emotion regulation and emotion regulation strategies follow it. Although adolescence is the focus of this dissertation, development of emotion regulation from infancy through adolescence was considered to be required to see the whole picture. Factors affecting emotion regulation of adolescents were divided into two types. The former was called as the familial factors such as parenting styles, parents' psychopathology and emotion regulation, the latter was called as the individual factors as adolescents' personality traits.

The second part covers the first study, which was conducted in order to examine the utility of difficulties in emotion regulation scale (DERS) in the assessment of emotion regulation difficulties in Turkish adolescents. For this aim, factor structure and psychometric properties of Difficulties in Emotion Regulation

Scale (DERS) have been examined. Furthermore, the first study also has examined factor structure and psychometric properties of the Strength and Difficulties Questionnaire (SDQ).

The last part covers the main study of the dissertation which roughly aims to test a mediating model. According to this model, mothers' characteristics like possible psychopathologies, emotion regulation difficulties, personality traits play critical role on their maternal rearing behaviors, thus on their children's emotion regulation difficulties. Emotion regulation difficulties, then lead to adolescents' development of internalizing and externalizing problems

1.2 Review of Literature

1.2.1 Emotion

Researchers have conceptualized emotion differently over time, thus it is difficult to use a single definition of emotion. Cornelius (2000) outlines various theoretical approaches (i.e., Darwinian perspective, Jamesian perspective, cognitive perspective, social constructivist perspective) that have been influential in emotion literature and he explains several areas of overlaps and differences in the explanation of emotion among those approaches.

According to Darwin's (1890) theory, emotions evolved as humans progressed and served primarily as survival functions. That is, experience of an emotion is necessary in order to modify behavior and adapt to the world for survival. For instance, if one encounters a bear in the woods, hopefully the experience of fear will produce a response of flight from the situation in order to increase the chance of survival. Thus, developing awareness and understanding of emotions as they occur was likely to be seen as a useful adaptation according to Darwin. If an individual was unable to correctly identify fear as fear, he or she would be less likely to take action with the "fight or flight" response. The fact that basic emotions are evidenced by facial expressions across all cultures, although the release of emotions, consequences, and display rules may vary from culture to culture, supports Darwin's theory (as cited in Cornelius, 2000).

William James (1884, 1890) offered an alternative theory of emotion and emphasized the importance of perceptions of bodily reactions following some sort of stimulus. According to him, emotion is the perception of an event which is experienced by our body. That is, if one sees the bear in the woods, the body may become sympathetically aroused (e.g., increasing heart rate) in preparation for escape. One may then feel that physiological experience and interpret it as "fear." Thus, how we perceive our body responding physically to some stimulus in the environment is the emotion. James argued that developing awareness and understanding of emotions were likely to be considered adaptive, if one were to

identify the underlying reasons for different types of physiological responses in order to adequately assess the environment (as cited in Cornelius, 2000).

According to cognitive perspective, thoughts and emotions are inseparable. In other words, all emotions are seen within this perspective as being dependent on what Arnold (1960) called *appraisal*, which is the process of judging events in the environment as good or bad for us. Therefore, the appraisal of the situation results in the experience of an emotion, which prepares an individual to act in one's environment (as cited in Cornelius, 2000).

Social constructivist perspective, on the other hand, emphasizes culture, which plays a central role in the organization of emotions at a variety of levels. That is, the content of the appraisals that generate emotions are provided by culture. The process of appraisal may require a biological adaptation; however, the content of our appraisals is based on culture. Thus, we observe cultural and personal differences on the kinds of things that make people angry. Culture, in the form of social rules that provide what might be called "scripts" for emotion, also organizes emotions behaviorally. Culture determines how we get angry or fearful. That is why; the particulars of anger and fear look different in some cultures (as cited in Cornelius, 2000).

In spite of the fact that various theories of emotion have different perspectives on definition of emotion, they often involve the functionality of emotions. It is difficult to simply define emotion, but using research integrating multiple theories to explain different aspects of emotions may help to explain how emotion currently defined in the literature. Cole, Martin, and Dennis (2004), for instance, define emotions as biologically prepared capabilities that are required for survival. Furthermore, Campos, Campos, and Barrett (1989) emphasize the interpersonal and transactional importance of emotion and define it as "processes of establishing, maintaining, or disrupting the relations between the person and the internal or external environment" (p.395).

Lang (1968) proposed that humans respond to demanding stimuli in three systems or sets of processes; the neurophysiologic, the motor, and the cognitive. The

importance of emotions in organizing behavioral, motor, and physiological responses, in promoting decision making, in enhancing memory for important events, and in negotiating interpersonal interactions are emphasized by contemporary emotion theories as well (Gross & Thompson, 2007).

Emotional communication and coordination of social interactions may be enabled by expressive characteristics of emotion. Individuals increase, decrease or maintain a particular emotion in order to regulate emotion. Emotions can include both positive and negative affect. In addition, emotions may serve to organize response systems that might contribute to the coherence among domains of subjective experience, behavior, and peripheral physiology (Kring & Sloan, 2010).

According to modal model of emotion (Gross & Thompson, 2007), a prototypical emotional response has several features, one of which is that no matter what the emotion, it begins with a psychologically relevant situation caused by either internal or external factors. A second feature of emotion is attention. Whether external or internal, situations must attract the attention of the individual in order for emotional response to occur. A third feature of emotion is appraisal. Once they draw the attention, situations are appraised for judgment of the situation's familiarity, valence, and goal relevance among other things. A fourth feature of emotion is the response in which the appraisal sets in motion. A fifth feature of emotion is its malleability. That is, once initiated; emotional responses do not necessarily follow a fixed and inevitable course. Emotions can interfere with what we are doing and force themselves upon our awareness.

Depending on the extent to which emotional arousal is monitored, evaluated or controlled by the individual, emotions support or undermine social communication and interaction, personality processes, cognitive processes, and goal-achievement from early ages (Thompson, 1991). Emotions do not always serve adaptive functioning. This means that, they may be problematic when they are of the wrong type, and too intense, or when they occur in an inappropriate context and last too long. At such moment an individual may try to influence, or alter his unfolding emotional responses (Kring & Sloan, 2010). In other words, emotion regulation

processes function to initiate, modulate or maintain emotional arousal, experience, cognitions, and behaviors (Eisenberg & Fabes, 1992).

1.2.2 Emotion Regulation

Contemporary research on emotion regulation has inspired from the study of psychological defenses (Freud, 1926, 1959), psychological stress and coping (Lazarus, 1966), attachment theory (Bowlby, 1969), and emotion theory (Frijda, 1986) (as cited in Gross & Thompson, 2007). Emotion regulation first appeared as a distinct construct in the developmental literature (Campos et al., 1989; Thompson, 1991), and subsequently in the adult literature (Izard, 1990; Gross & Levenson, 1993). A full discussion of the variety of ways that emotion regulation defined in adult literature is beyond the scope of this review.

The fact that emotions have been conceptualized differently over time by various theorists and researchers varies definition of emotion regulation and makes this definition sometimes contradictory, as well. It is claimed that definition of emotion regulation is not clear, with at least three distinct meanings. Accordingly, it might imply that emotions are regulated by some external regulator (regulation of emotion). It might also imply that emotions regulate some external constructs (regulation by emotions) or emotion might be a qualitative descriptor of regulation, implying that some regulation is non emotional and some is emotional. Actually, the term of emotion regulation has been used in all of these ways (Dodge & Garber, 1991).

In one of the early conceptualizations of emotion regulation, Dodge (1989) described emotion regulation as “the process by which activation in one response domain serves to alter, titrate, or modulate activation in another response domain” (p. 340). This conceptualization includes behavioral, experiential, and physiological response domains. Generally, intrinsic processes are the focus of researchers in the adult literature (Gross, 1998b). On the contrary, extrinsic processes are more emphasized by researchers in the developmental literature, perhaps because extrinsic processes are so salient in infancy and early childhood (Cole, Michel, & Teti, 1994).

Thompson (1991) highlighted several characteristics of emotion regulation processes. One of them is seen as a significant component of emotional development since management of emotions is increasingly self-regulated as children get older. Another characteristic of emotion regulation is that the meaning and significance of emotional arousal is being channeled in adaptive ways in certain context. Yet, another one is that it provides a point of view for the growth of individual differences in personality and social functioning. That is to say, it reflects individual's style of engagement with the social and nonsocial world. Still another characteristic is emotional self-management. Accordingly, effective cognitive performance, inhibition or substitution of long-term goals for immediate incentives mostly depends on attention and problem solving strategies thereby emotional self-management. Finally, emotion regulation is important since it is related to the study of child clinical disorders and their etiology and treatment. According to Thompson (1994) "emotion regulation consists of the extrinsic and intrinsic processes responsible for monitoring, evaluating, and modifying emotional reactions, especially their intensive and temporal features, to accomplish one's goals" (pp.27- 28).

According to Gross (1998a), individuals have influences on which emotions they have, when they have them, and how they experience and express these emotions, According to Thompson (1990) emotion regulatory processes may be automatic or controlled, conscious or unconscious, and may have their effects on one or more points in the emotion generative process. He also claims that emotion regulation involves changes in emotional tone and in emotional dynamics in that the former refers to the specific emotion (happy, sad, etc.) that characterizes an individual's mood and the latter refers to the intensity, range, liability, latency, rise time, recovery, and persistence of emotion. In this framework, emotion regulation might influence the specific emotion experienced (anger vs. disgust) or emotion might be regulated through the temporal and intensive features of emotion or it might limit or extend the duration of emotion (Thompson, 1990).

Although Gross's definition locates emotion regulation within the self, other definitions have placed greater emphasis on the extrinsic factors, which also serve

emotion regulatory functions, particularly, other people, (Thompson, 1994). This is especially the characteristics of developmental psychology researchers who point out that external influences on emotion regulation are particularly salient to child development, wherein caregivers teach their children strategies for self-control of emotion (Fox & Calkins, 2003). According to Zeman et al., (2006), a child's ability to identify, understand, and integrate emotional information while simultaneously managing his or her behavior in accordance with his or her personal goals is essential for emotion regulation. The regulation of emotion involves the management and organization of diverse systems and components which include internal systems, behavioral components, and external components. The ability of children to regulate an emotion depends on their previous interactions with the social environment as well as the developmental status of them.

Cole et al. (2004) also explicitly acknowledges both internal and external influences on emotion regulation. In their broad definition, emotion regulation is defined as changes associated with activated emotions. This model describes two types of regulatory processes. Firstly, emotion as regulating refers to changes that are a result of the activated emotion. Ensuring that the emotion and change are linked is crucial to the definition of emotion regulation. Secondly, emotion as regulated refers to changes in the valence, intensity, or time course of emotion within the self or between people. In short, emotion has a regulatory influence on other processes, such as focusing attention and communicating with others. At the same time, emotion is also regulated in that the experience and expression of emotion can be modulated to meet situational demands. For example, one may attenuate intense anger in expression to avoid damaging a relationship (Cole et al., 1994).

The demands of a situation, responding flexibly and adaptively to those demands are important requirements of emotion regulation. That is, individual's subjective assessments of danger and abilities are considered within emotion regulation process. It is proposed that the ability to reaction flexibly and adaptively to environmental demands are related to how those demands are appraised (Smith, Haynes, Lazarus, & Pope, 1993). In other words, not only significance of events but

also appraisals that the individual has to those events is inevitable features of emotion regulation process (Campos et al., 1989). Furthermore, the goals of individual in a given situation should also be taken into consideration in defining regulation process. However, on one hand this definition does not require outcomes that match external criteria based on general expectations; on the other hand it requires attainment of the individual's goals and values (Cole et al., 1994).

Eisenberg and Spinrad (2004) define emotion-related self-regulation as the process in which initiating, inhibiting, avoiding, maintaining, or modulating the occurrence, intensity, form, or duration of internal feeling states are included. Furthermore, in accomplishing affect-related biological or social adaptation or achieving individual goals, emotion-related physiological and attentional processes, motivational states, and behavioral concomitants of emotion are also important. Working definition of emotion regulation distinguishes between regulation of self and others, and includes the modification of experience, behavior, and physiology. Although goals may not always be achieved, the motivation is a necessary component of the regulatory process (Eisenberg, Hofer, & Vaughan, 2007).

Social scientists studying emotion regulation have focused on at least four distinct areas of possible regulation. The first area is the experience of emotion which includes the subjective aspects of the emotion. Subjective experiences associated with emotion regulation typically are assessed via self-reports of emotion or emotional reactions (Eisenberg, Fabes, Schaller, Carlo, & Miller, 1991). The second area is physiological concomitants of emotional arousal. Kagan (1982) listed emotional reactivity which can be physiologically observed in several specific areas such as heart rate, diastolic blood pressure, pupillary dilation, neuroendocrinological measures, and vasoconstriction of the arteriovenous anastomoses under the surface of the skin. The next area is the observable behavioral indices of emotion such as facial expressions, gestures, or blushing. Emotion regulation occurs when individuals are able to alter or adapt observable behavioral indicators of emotion such as facial expressions and gestures. It is important to distinguish between control and

regulation, which generally refers to the attunement of emotional experience to everyday events (Walden & Smith, 1997).

Regulation of the expression of emotion can take one of two general forms. The first is the ability to mask the expression of unacceptable emotions (Saarni, 1984). The second form of regulating expression is to display appropriate expressions that may serve as signals or forms of social communication (Malatesta & Haviland, 1985). Moreover, regulation is not just a matter of stopping expression, but also involves the capacity to use emotional expression to communicate with and influence others (Walden & Smith, 1997). The fourth area in which social scientists studying emotion regulation have focused is outcome behaviors that are assumed to be at least partly mediated by emotion (Walden & Smith, 1997). Dodge (1989) proposes that objective behaviors refer to observing the outcome of regulation or the way in which one coordinates reactions to an emotionally arousing situation. One of the most common ways of assessing outcome behaviors of emotion regulation is to examine coping behaviors in response to an emotionally arousing event or situation. Regulation includes appraisals of one's resources for coping with an encounter, which could be in the form of either emotion focused or problem focused coping (Lazarus & Folkman, 1984).

1.2.3 Emotion Regulation Strategies

Kennedy-Moore and Watson (1999) propose a five-step model of how one processes and regulates emotional experiences and expressions. Furthermore, they describe disruptions at different points of this process leading to different consequences for psychological well-being of individuals. According to that model, covert emotional experiences are translated into overt emotional expression through internal cognitive-evaluative steps driven by affective experience. Primary components of this model are emotional arousal which is the initial response, experience which is the subjective felt sense, and expression which is behavioral component of emotion. Secondary component is emotional reflection which includes thoughts of the primary components like monitoring arousal, experience, and expression; making sense of them; and evaluating them. This occurs throughout the

cognitive-evaluative steps of the model. According to this model, the first step includes preconscious reaction to an emotional stimulus. For instance, an individual may automatically appraise a situation and react with some arousal. The intensity of this arousal may change from person to person. As a consequence, individuals with a high threshold for distress may not experience negative emotion as those with a low threshold thereby not engaging in the process outlined the model, since there is no affect to regulate. Individuals become aware of their distress with the second step. However, if emotional experiences are taken away from awareness, it is not possible to process and regulate emotion adaptively.

Gross (1998b) suggests that suppression may effectively reduce behavioral expression of negative emotion but not the experience of it. In the third step, cognitive process of emotional experience begins to occur and helps to label and interpret the affective response. Although some individuals may clearly know that they are feeling bad or are able to label it as bad, they have difficulty in labeling and differentiating their emotional experiences as feeling hurt, humiliated and afraid. As a consequence, not being able to label and differentiate emotional experiences may interrupt one's ability to regulate affect to an optimal or desired state (Mayer & Salovey, 1997). On the contrary, understanding and differentiating emotional experiences in a more complete manner allows one to figure out more effective ways of coping. The ones who achieve the previous step can easily move onto the fourth step which is the acceptance of emotional response. However, disruption at this step occurs when individuals develop negative attitudes toward emotion. That is, when there is an inconsistency between acceptance of an emotion and one's personal values and beliefs, it is possible to reject the emotion or to have negative beliefs about emotional response. The last step is evaluation of emotional response in the perceived social context. However, disruption involves perceived lack of opportunity to express due to the social context.

Gross (1998a) has proposed a temporal model of emotion regulation in which strategies are distinguished in terms of when they have their primary impact on the emotion-generative process: either before the response (antecedent focused) or after

the response (response focused). Antecedent-focused strategies are referred to as “reappraisal” or changing the situation or the meaning of a situation in order to increase positive or decrease negative emotional experience. It occurs before an emotion has been elicited and before the behavioral and physical emotion response tendencies have become fully activated. For example, a person with a borderline personality disorder may avoid an intimate relationship, so that she does not have to endure possible rejection and feel abandoned (antecedent focused). Thompson and Calkins (1996) suggest that adaptive emotion regulation involves monitoring and evaluating emotional experience in addition to modifying it, highlighting the importance of the awareness and understanding of emotions.

By contrast, response-focused strategies, which are also called as “suppression”, refer to actively trying to inhibit emotional reactions and thoughts after the emotion has already occurred. For example, a person with borderline personality disorder is feeling abandoned because her partner is away on a business trip, she may cut herself in attempt to relieve or distract herself from the painful feelings. However, the use of suppression to alter emotional expression or response may not actually change internal experience of emotion but may result in other detrimental effects such as increases in sympathetic arousal (Hagemann, Levenson, & Gross, 2006), impeded memory for recall and recognition of emotional details (Richards & Gross, 2000), a reduction of rapport and relationship formation or increase in pain (Quartana & Burns, 2007). Cole et al (1994) emphasize the importance of accepting and valuing emotional responses. Lack of emotional acceptance is maladaptive and associated with greater difficulties in emotion regulation (Hayes, Strosahl, & Wilson, 1999).

Furthermore, as stated previously, the demands of the situation and goals of the individual when evaluating emotion regulation should be taken into consideration because emotion regulation can only be understood and evaluated within a specific context. Therefore, in the absence of this information, knowledge of the specific emotion regulation strategies used by an individual may provide little information about the individual’s ability to regulate his or her emotions effectively (Cole et al.,

1994; Thompson, 1991). Researchers have also suggested that adaptive emotion regulation involves modulation of the experience of emotions rather than elimination of certain emotions. This modulation of arousal is thought to be reducing the urgency associated with the emotion so that the individual is able to control his or her behavior. These conceptualizations of emotion regulation emphasize the ability to inhibit inappropriate or impulsive behaviors, and behave in accordance with desired goals, when experiencing negative emotions (Linehan, 1993).

1.2.4 Development of Emotion Regulation

Emotion regulation is a core developmental achievement with significant personal consequences since emotion regulation is associated with personal adjustment, social competence, and even cognitive functioning (Thompson & Goodman, 2010). Thompson's (1994) definition of emotion regulation suggests that emotion is managed through the extrinsic influence of other people as well as the person's own efforts. This analysis is developmentally important because emotions are primarily managed by caregivers early in life, and emotional repertoire and the tolerance of a child are shaped by these experiences of extrinsic emotion regulation. In addition, another core feature of Thompson's (1994) definition of emotion regulation is that emotion regulation is guided by the regulator's goals in a specific emotion-eliciting context. This analysis is also developmentally very critical because misunderstanding children's goals for emotion management can cause adults to perceive them as emotionally dysregulated in situations where children are functioning quite well. Finally, Thompson's (1994) definition of emotion regulation emphasizes the importance of emotional self-monitoring and cognitive appraisals of one's emotional experience for emotion regulation. This analysis is also developmentally very important because the capacity of a child to appraise emotions changes considerably from infancy through adolescence, and this has a significant influence on the growth of emotional self-regulation (Thompson & Lagattuta, 2006).

Shortly, understanding the goals for managing emotion, contextual influences, the effects of other people on emotion regulation, and cognitive

appraisals and self-monitoring are important for developmental analyses because these features change significantly from infancy through the course of the life.

1.2.4.1 Infancy

Infants are capable of a limited repertoire of self-soothing behaviors like sucking and other self-stimulating behaviors, visual fixation, and the regulation of attention. Rothbart, Ziaie, and O'Boyle (1992) discussed that approach / avoidance of stimuli, orienting attention, physical self-comforting, and self-stimulation are among strategies of emotion regulation used by infants. Especially, physical self-soothing behaviors such as thumb-sucking are the earliest regulatory behaviors in an infant's repertoire. In addition, the control of visual attention is commonly used by some 2 to 3 month old infants (Tronick, 1989). Moreover, it is shown that clear developmental trends in infant regulatory strategies are associated with motor development. For example, nonmobile infants (6-months old) engaged in gaze aversion, whereas more mobile 12-months old infants engaged in behavioral avoidance (Mangelsdorf, Shapiro, & Marzolf, 1995).

However, in the case of high arousal and persistence of elicitors, infants rely on caregivers' assistance in order to regulate emotions (Karraker & Lake, 1991). Thompson (1991) points out that parents use different strategies such as direct intervention strategies, selective reinforcement, modeling and so on. These strategies have life-long consequences on infants' emotion regulation abilities because they immediately affect child's arousal. In addition, they contribute to the socialization of emotional experience considering socio-cultural beliefs about the suitability of different emotions and their expression and intensity that constitute the emotion culture (Gordon, 1989). Implementation of these practices continues in age-appropriate ways in order to contribute the child's emotional self-control and to increasingly socialize emotion and its expression into the emotion culture. Especially, the growth of language skills during the toddler and preschool years contribute to the child's growing capacities for emotional self-regulation (Thompson, 1991).

1.2.4.2 Preschool Childhood

Although emotion regulation strategies mostly used by infants consist of caregivers' initiation or active participation in regulation, many strategies used by older children often can be described as more intrapersonal than interpersonal. In other words, with development a shift occurs from more other-initiated, social / environmental strategies of emotion regulation to more self-initiated individual strategies (Walden & Smith, 1997), and children try to cope autonomously with emotional demands of their life (Cole et al., 1994).

During the preschool years, comprehension of the associations between emotions and situations, between emotions and the subjectivity of emotional experience, and between emotions and mistaken beliefs indicate the growth of self-awareness and the development of self-image (see Thompson & Lagattuta, 2006, for a review). Consequently, young children become aware of the emotions to be managed by fleeing, removing, restricting their perceptions, and ignoring emotionally arousing events. Moreover, those children become aware of the value of self-comforting and seeking the assistance of caregivers for managing their feelings (Thompson, 1990). Therefore, it is possible to infer that the conceptual achievements in emotion understanding of early childhood contribute to complexity to emotional experience and enhance emotion regulation. During this stage, children begin to use display rules, which are culturally defined rules guiding a person's decision to change emotional behavior in accord with the demands of the social context. This specific form of emotion regulation helps children to separate emotional experience from the facial, vocal, and behavioral expression that is displayed (Zeman et al., 2006). For example, display of anger, disgust, and contempt are associated with achieving one's goals in peer negotiations (Camras, 1982).

In addition, the growth of language in this period makes discourse about emotions possible for children in which children can receive verbal messages from adults related to the circumstances which require emotion regulation, the benefits of regulated emotions, and the strategies by which emotion may be regulated (Thompson, 1991). That is, these messages shape the child's understanding of

emotion; their awareness of the reasons for parents' efforts to direct the regulation of emotion and its expression in certain situations (Saarni, 1990). With the growth of language, children are themselves acquiring a conceptual network of emotion terms, concepts, and ideas, and thus emotional self-regulation begins to develop (Thompson, 1991).

The growth of young children's conceptual understanding of emotion also provides further opportunities for parents and other caregivers to contribute to emotion regulation (Thompson & Meyer, 2007). That is, in every day circumstances, parents assist in emotion regulation by suggesting specific strategies that might be helpful (i.e., cognitive reframing, problem-focused coping, and attention shifting). These strategies enhance young children's developing self-regulatory capacities (Miller & Sperry, 1987). Encouragement of young children, especially in the context of a warm parent-child relationship, contributes to young children's developing beliefs in the manageability of their feelings and knowledge of what they can do.

1.2.4.3 Middle Childhood

Middle childhood is the period in which the growth of self-understanding begins to emerge. It provides children with insight into their own emotive processes and thus enables them to act more competently and confidently in commonly occurring situations. In addition, an appreciation of the emotional self-regulatory strategies enables children to enlist their emotions in more productive and useful ways in their ongoing interactions with the social and nonsocial world. Thompson (1991) named an understanding of how emotion functions and is managed within oneself as a *theory of personal emotion*.

The fact that the repertoire of strategies for emotional self-regulation expands significantly in size and complexity during middle childhood coincides with several other developmental achievements during these years. For example, acquisition of psychologically-oriented conceptions of self and other (Damon & Hart, 1982), cognitive achievements in the appearance / reality distinction (Flavell, Flavell, & Green, 1983), representational flexibility in applying multiple perspectives to a

single event (Fischer, 1980), and the growth in social knowledge and role-taking skills enable sophisticated representation of emotional experience more possible. Developmental achievements within this period increase children's understanding of emotional display rules, the multiple dimensions of emotional experience and the simultaneity of different emotions, and the consequences of one's emotional expressions for social partners (Thompson, 1991). In this way, children are able to hide real feelings when exposed to unwanted situations unwanted present. Similarly, children are aware that emotional expressions to others can be different from internal emotional experience and they can manage emotion by changing the reactions of others to themselves (Thompson, 1991).

Taken together, these achievements reflect the growth of emotional autonomy as well as the management of emotional experience because children depend less on the external regulators of emotion, and they can maintain satisfying emotional well-being more independently (Thompson, 1991). However, social regulation still plays a large and critical role, as it does in adult relationships (Coyne & Downey, 1991).

1.2.4.4 Adolescence

Adolescence is a period in which adolescents face new challenges like physical and hormonal changes (Spear, 2000), identity formation and development and maintenance of romantic relationships (Grotevant, 1998). Therefore, they experience intense and fluctuating moods (Arnett, 1999; Larson & Lampman-Petratis, 1989). Individuals' ability to regulate their emotions increases from middle childhood into adolescence and emotion regulation decisions become more differentiated as a function of motivation, emotion type, and social-contextual factors (Zeman & Garber, 1996). Adolescents are constructing a network of self-referent beliefs that are psychologically more complex, differentiated, and integrated than those that existed in earlier years. With cognitive advances that allow for better organization of thought and increased awareness of emotion (Steinberg, 2005), it becomes possible for adolescents to place value on the acceptability of emotion and its expression, and develop strategies for managing emotion (Hunter et al., 2011). In addition, the theory of personal emotion is shaped by other elements of the system

and provides an important contribution to emerging self-understanding (Thompson, 1991).

Although adolescence is an opportune time to explore processes and correlates of emotion regulation, research on emotion socialization of parents has focused primarily on infancy through middle childhood and our knowledge about this concept with regard to adolescence is limited (Hunter et al., 2011). It is known that changes in the social context lead to more reliance on peers as agents in the emotion regulation process and less reliance on parents (Bariola, Gullone, & Hughes, 2011). Moreover, as children get older they look for more emotional and behavioral autonomy so that they experience more conflictual and emotionally distant relations with parents (Steinberg & Morris, 2001). Since adolescents experience certain emotions like hopelessness and romantic love / loss for the first time due to cognitive advances in functioning (Steinberg & Silk, 2002), parental support and guidance are still influential in successfully navigating these highly emotionally evocative developmental tasks. However, because of increased level of independence in adolescence, adolescents must feel comfortable to approach their parents and to discuss emotional issues with them in order their parents to know the details of their children's emotional lives and parents who are accepting of their own emotions may create an environment in which adolescents feel comfortable to approach them as a source to cope with emotion (Gottman et al., 1996, 1997).

In summary, adolescence is a very important time period to explore emotion regulation process and parental role on this process also should be taken into consideration.

1.2.5 Factors Associated with Children's Emotion Regulation

1.2.5.1 Familial Factors

Studies indicate that parents' emotional responses to their children's emotions affect children's subsequent awareness and modulate emotional arousal (e.g., Eisenberg, Cumberland, & Spinrad, 1998; Schultz, Izard, Ackerman, & Youngstrom, 2001). In general, emotionally expressive environments accepting of children's

emotions promote the development of emotional knowledge (Denham, Zoller, & Couchoud, 1994; Dunn & Brown, 1994).

Morris et al. (2007) proposed a model in which they argue that three features of family context influences the development of emotion regulation (see Figure 1.1). Accordingly, observations occurring within the family context, specific parenting practices and behaviors related to the socialization of emotion, and emotional climate of the family, as reflected in the quality of the attachment relationship, style of parenting, family expressiveness and emotional quality of the marital relationship, significantly affect children's regulation of emotional process.

Children learn which emotions are acceptable and expected to display in the family environment, and how to manage the experience of those emotions through modeling their parents (Denham, Mitchell-Copeland, Strandberg, Auerbach & Blair, 1997). In addition, the overall amount of emotionality in the family shapes emotions of children. According to Saarni, Mumme, and Campos (1998) catching of emotion in the family environment begin to emerge in early infancy and continue to develop. Accordingly, if parents show high level of anger toward children in frustrating situations, children are less likely to observe and learn affective reactions. However, it is difficult to separate observational learning effects from specific emotion socialization process and the emotional climate of the family.

According to Gottman et al. (1996, 1997), emotion-related parenting practices and certain beliefs related to emotions are associated with children's emotion regulation. The term meta-emotion philosophy corresponds to people's organized set of beliefs and feelings related to both their own emotions and that of their children. It is divided into two categories. The former is emotion-coaching philosophy, in which expression of emotions is promoted, parents are aware of their own emotions, and they are willing and competent to help their children with their emotion thereby being associated with children's emotional well-being as well as their enduring emotional styles; the latter is derogatory philosophy in which children's emotions are ignored, denied, and dismissed. That is, parents with this philosophy find their

children's negative emotions noxious as well as potentially harmful to the child and attempt to extinguish them as quickly as possible.

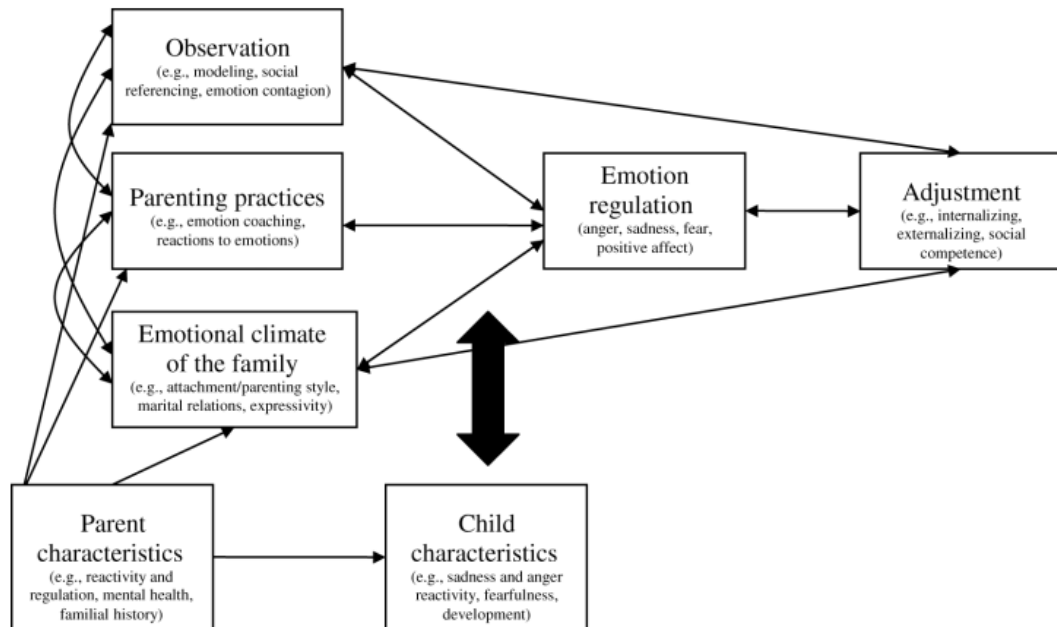


Figure 1.1 *Tripartite Model of the Impact of the Family on Children's Emotion Regulation and Adjustment*

According to Roberts and Strayer (1987) suppression of children's negative emotions by parents leads children to store these experiences in memory and draw on them when similar situations occur. Moreover, it was claimed that controlling of children's emotion by parents deprives their children of opportunities to learn and utilize appropriate emotional competence in their social interactions. However, parental tolerance to the expression of negative emotions and giving assistance to their children with the resolution of emotional upset is related to children construct a repertoire of strategies for dealing with those difficulties effectively (McDowell & Parke, 2000).

Furthermore, specific reactions of parents toward negative or positive emotions of children influence emotion regulation of children. For instance, punitive or negative reactions of parents may increase children's emotional arousal and teach them to avoid instead of understanding and appropriately expressing negative

emotions (Eisenberg et al., 1998). In other words, children learn to use avoidant coping strategies if they have parents minimizing their emotions or displaying negative or dismissing responses towards them (Eisenberg, Fabes, Carlo, & Karbon, 1992). On the contrary, positive responses or problem-focused reactions of parents toward children's emotion are related to the development of constructive coping strategies. The study conducted to examine the relation between attachment classification and maternal control over preschoolers' emotional expression indicates that children exposed to greater maternal control are less likely to express their feelings and display anger compared to those exposed to optimal level of control (Berlin & Cassidy, 2003). In addition to parental reactions toward emotional display of children, parents may intentionally teach emotion regulation strategies to their children. Morris et al. (2011) analyzed the effects of parents' assistance in cognitively reframing the situation when children were presented with a disappointing prize. It was found that the situation was no longer considered as negative and the attempts of parents at redirecting attention away from the prize was related to lower levels of expressed sadness and anger.

The emotional climate, reflected in relationship qualities and in the amount of positive or negative emotion displayed toward members of the family, has inevitable effects on emotion regulation of children (Darling & Steinberg, 1993). Similarly, Halberstadt and Eaton (2003) argued that emotional climate of family life affect early socialization of emotion regulation, thus, emotionally positive home environment fosters the development of more constructive emotion regulatory capacities in children than one characterized by hostility and anger. Cummings and Davies (1996) asserted that negative or coercive family environment leads children to be highly emotionally reactive compared to those having more positive, predictable, and consistent family atmosphere in which children are more likely to feel being accepted and nurtured, and feel free to express emotions. In other words, emotional climate of family environment contributes to emotion regulation of children as long as it is predictable and stable, clear and mature expectations of parents, the degree of positive emotions expressed in the family (Morris, et al., 2002). Eisenberg et al. (1998) revealed that children develop more constructive

emotion regulatory capacities when parents respond in an accepting and supporting way.

1.2.5.1.1 Maternal Rearing Behaviors

One way of examining emotional climate of family environment is to consider parenting style which includes parental attitudes and behaviors toward children. That is, in order for children to be able to practice and master their own regulation, parents should provide appropriate level of relatedness and autonomy to their children in emotional situations (Southam-Gerow & Kendall, 2002). Studies indicate that parents who exhibit controlling and over-protective behaviors when their children display negative emotions actually cause their children to develop poor emotion regulation strategies (Bell & Calkins, 2000; Fox & Calkins, 2003). In contrast, those encouraging, verbally guiding, and supporting when their children display negative emotions promote their children to develop adaptive emotion regulation strategies like problem solving and distraction (Calkins & Johnson, 1998).

Parental expressivity is also considered as an important component of parenting style or parental rearing behaviors. Accordingly, while responding parents are more nurturing and child-centered, demanding parents enforce consistent and inflexible rules for their children to obey. Studies indicate that parental responsiveness, like acceptance, support, and sympathy are positively associated with the development of effective emotion regulation strategies in children (Eisenberg et al., 1991). On the contrary, studies reveal that maladaptive parenting like hostility, absence of positive affect, harsh discipline, psychological control, and lack of sensitivity leads deficiencies in children's emotion regulation (Calkin, Smith, Gill, & Johnson, 1998; Morris et al., 2002; Shipman & Zeman, 1999). Furthermore, punitive and unsupportive responsiveness of parents are related to increased emotional arousal and avoidant behavior rather than understanding and appropriately expressing negative emotions (Berlin & Cassidy, 2003).

Morris et al (2007) reviewed research published since 1998, focusing on the role of family context on the socialization of children's and adolescent's emotion

regulation. Overall findings indicated that there is little research on the impact of parenting styles on adolescents' emotion regulation. As a result, studies examining links between parental rearing behaviors and emotion regulation are greatly needed.

In the present study, only maternal rearing behaviors were considered since mothers are more likely to be involved in the development of children's ability to cope or manage their emotional expression and experience (Fivush, Brotman, Buckner, & Goodman, 2000). Furthermore, McDowell, Kim, O'Neil, and Parke (2002) found that maternal variables had stronger relations with child emotion regulation than did paternal variables. These two findings (Fivush et al., 2000; McDowell et al., 2002) suggest that mothers' roles in their children's emotion regulation development are more significant than are fathers. Moreover, Pleck (1997) reviewed research findings between 1980 and 1990 examining maternal versus paternal involvement in child development and concluded that mothers were much more accessible and engaged more with their children when compared to fathers. This difference was greater especially during adolescence than early childhood. The authors argued that fathers may make unique contribution to his child's emotional socialization during infancy through early childhood when physical play takes much more place in those ages (Lamb, 2004; Parke, 1994) (as cited in Bariola et al., 2011).

1.2.5.1.2 Mother's Emotion Regulation

Parents own beliefs concerning emotions, their skills to control their own emotions, their relationships with their own parents and attachment status with them affect observation of children, parenting practices, and emotional climate of the family (Gottman, et al., 1997). Zeman et al. (2006) argued that providing comfort, nurturance, and warmth and acceptance to children during emotional episodes are the main tasks of many parents. However, when confronted with their children's negative emotionality, how parents cope with their own emotional arousal has a determinant role on the effects of implementing effective contingencies. In other words, parents with competent regulation skills may be more likely to provide warmth, support, and guidance to their child. On the contrary, parents who are unable to manage frustration may react more impulsively and harshly, thus increasing the

level of anxiety experienced by the child in the present or during similar situations in the future. Recently, Atay (2009) examined the importance of maternal awareness in maternal emotion socialization practices and 3-6 year old Turkish children's emotional and social competence. It was found that mothers who have low emotional awareness of their own emotions use more non-supportive strategies and was more likely to evaluate them negatively. Moreover, children of those mothers were more easily dysregulated by the intense negative emotions. Furthermore, Aydın (2010) made structured interview with mothers of 3-6 year old Turkish children. Using hypothetical vignettes depicted through pictures, she demonstrated the importance of mothers' own emotion management styles on mothers' emotion socialization practices.

Research on mother-child interaction indicate spontaneous and mutual contingency between partners and reciprocal regulation of dyadic emotional communication (e.g., Cohn & Tronic, 1988; Fogel, 1993; Stern, 1985). Accordingly, mother's emotions regulate the child and are regulated by the child. The study conducted by Field (1994) indicated that mothers read their children's emotional signals, provide appropriate stimulation, modulate levels of their arousal, and reciprocate and reinforce their reactions in order to regulate infant's emotional states. Correspondingly, infants receive their mothers' initiations and stimulation by approaching, and withdrawing from stimulation, and responding contingently to maternal emotion in order to regulate their mother's emotions. Thus, the quality of emotional exchange is considered as an important precursor of the developing ability of a child to regulate his / her own emotions (Cole et al., 2004). Moreover, mutual regulation of emotion is not only observed in infancy but also in preschool childhood (e.g., Cole, Teti, & Zahn-Waxler, 2003; Denham, 1993). Briefly, mothers and children responded emotionally to each other in predictable, systematic, and temporarily contingent ways.

According to review of current literature (Bariola et al., 2011) few studies examined direct associations between child's emotion regulation and their mothers' emotion regulation, especially in adolescence. Thompson (1994) argued that constant exposure of child to his or her mother's style of emotion regulation may lead the

child to imitate mothers' way of managing their emotions and using same strategies when confronted with emotionally eliciting situations. Similarly Cole et al (1994) proposed that children develop similar strategies as their parents through internalization.

1.2.5.1.3 Mother's Psychopathology

Parents with psychopathology are more likely to have emotion dysregulation that promote those patterns in their children (Reeves, Werry, Elkind, & Zametkin, 1987). However, studies examining emotion regulation among clinically diagnosed parents and their children are very scarce and these studies have been conducted on the families of depressed mothers. It is suggested that depressed mothers experience their own deficits in emotion regulation, thereby disturbing emotion regulation of their children (Morris et al., 2007). For example, Tronick (1989) claimed that depressive mothers are not able to respond to their babies in an expected way thus leading infants' emotion pattern begin to change. In addition, studies conducted by Silk et al. (2006) indicated that children of depressed mothers, especially daughters, show early impairments in cognitive and behavioral domains of emotion regulation.

It is seen that studies examining the impact of maternal psychopathology on the socialization of emotion regulation mostly conducted with infants and children. However, studies examining the associations between adolescent's emotion regulation and maternal psychopathology are needed. It is possible that adolescents are becoming more emotionally independent from their mothers, thereby being less influenced from their mothers' psychopathology.

1.2.5.2 Personality Traits

Rapidly increasing interest has been seen in the five factor model since the past decade. Goldberg (1981) noted the "robustness" of the model and stating that "it should be possible to argue the case that any model for structuring individual differences will have to encompass-at some level-something like these "big five" dimensions" (p.159). Moreover, as Digman (1990) cited, Goldberg (1981) suggested

that the five major dimensions of the rating field could provide a framework for many theoretical organizations of personality concepts, including the views of Cattell (1957), Norman (1963), Eysenck (1970), Guilford (1975), Osgood et al (1975), and Wiggins (1980).

Dimensions of individual differences in tendencies to reveal consistent patterns of thoughts, feelings, and actions refer to the personality traits. According to McCrae and Costa (2003) traits are defined as degrees of variation along dimensions that are hierarchically organized and emerged from native language together with the lexical hypothesis in which every culture produces its own trait descriptive adjectives to communicate individual differences. The five-factor taxonomy of personality traits -Big Five- was determined after a great amount of research conducted to establish its validity and reliability. These factors are stated as Extraversion, Agreeableness, Neuroticism, Openness to Experience, and Conscientiousness.

Extraversion has emerged as one of the fundamental dimensions of the personality (Digman, 1997). Core feature of extraversion is thought to be the disposition to engage in social behavior. Moreover, it is well established that extroverts feel higher levels of positive affect than introverts (Lucas & Baird, 2004; Watson & Clark, 1992). Likewise, agreeableness is concerned with how individuals differ in their orientations toward interpersonal relations. People high in agreeableness are well liked and popular with their peers, in part because they project positivity onto others and make excuses for others' shortcomings (Graziano & Tobin, 2002). Person high in agreeableness expect others to be pleasant and likeable, and appear to elicit such behavior from their partners (Graziano & Tobin, 2002). On the contrary, neuroticism, a fundamental trait of general psychology, refers to an enduring tendency or disposition to experience negative emotional states. Individuals with high neuroticism are more likely than the average person to experience anxiety, anger, guilt, and depression. They respond poorly to environmental stress, are likely to interpret ordinary situations as threatening, and can experience minor frustrations as hopelessly overwhelming (Widiger, 2009). Neuroticism is recognized as one of the more reliably identified and fundamental domains of personality functioning and

structure (McCrae & Costa, 2003). Openness to experience affects social perceptions and the formation of social attitudes, the choice of friends and spouses, political activity, and cultural innovations (McCrae, 1996). Highly open people are considered more imaginative, sensitive to art and beauty, emotionally differentiated, behaviorally flexible, intellectually curious, and liberal in values. On the other hand, closed people are down-to-earth, uninterested in art, shallow in affect, set in their ways, lacking curiosity, and traditional in values (McCrae & Sutin, 2009). Lastly, conscientiousness is defined as individual differences in the propensity to follow socially prescribed norms for impulse control, to be goal directed, to plan, and to be able to delay gratification and to follow norms and rules (John & Srivastava, 1999). Moreover, conscientiousness is associated with multiple important life outcomes, including success at work, marital satisfaction and stability, health, and longevity. Conscientious people behave in ways that facilitate achievement, social interaction, and health.

Personality traits have generally been insufficiently studied in relation to emotion regulation. Ciarrachi, Chan, and Caputi (2000) showed that extraversion was related to understanding and regulation of emotions. Moreover, the findings of Mann, Wise, Trinidad, Kohanski (1994, 1995) indicated that extraversion, openness to experience, and agreeableness, are negatively related to a specific deficiency in the ability to regulate emotions called alexithymia, in which individuals, for instance, refuse to recognize the existence of their emotions as part of their emotion regulation strategy. On the contrary, neuroticism has been found to relate to mood swings (Soldz & Vaillant, 1999), and ineffective emotion regulation skills in problem solving-situations (Elliott, Herrick, MacNair, & Karkins, 1994). Moreover, volatility and emotion dysregulation probably should be understood as facets of neuroticism. Persons who are emotionally volatile, unstable or dysregulated will characterize themselves as being higher in levels of anger, anxiousness, and depressiveness than average person (Widiger, 2009). When examining the experience, expression, and regulation of emotion, psychologists historically have focused on links to extraversion and neuroticism. However, recent empirical work indicates that agreeableness is also connected to emotional process, particularly in interpersonal

situations (Tobin, Graziano, Vanman, & Tassinary, 2000). That is, persons high in agreeableness report greater ease in seeing the world through others' eyes and feeling the suffering of others. Due to their motivation to maintain good relations with others, persons high in agreeableness are probably more willing or better able to regulate the inevitable frustrations that come from interacting with others.

The literature has long emphasized the seeming importance of the family, especially the behavior of parents toward children in their personality development (Digman, 1990). Studies revealed that parenting styles are affected by certain personality traits. For instance, Myers Brewin, and Winter (1999) have reported that people who are low in anxiety and high in defensiveness are more likely to rate their interactions with their parents more positively. Lichtenstein et al. (2003) have found that maternal warmth toward children can be predicted by high optimism, humor, and self-directedness and low indirect aggression. Personality factors could indicate early and persistent risk for the development of psychopathology (Krueger, Caspi, Moffitt, Silva, & McGee, 1996; Markon, Krueger, & Watson, 2005). Spinath and O'Connor (2003) have reported that parental over-protectiveness was associated with low openness whereas parental rejection was associated with neuroticism. Substantial amount of studies have been published on the effects of early environments (i.e., parental separation, perceived rearing, child abuse) on personality development (Kitamura & Fujihara, 2003). However, the influence of the personality of parents on children's personality development has rarely been studied and was concluded that personality traits were transmitted directly from parents to their children (Kitamura et al., 2009).

The relations between five factor model and psychological distress measures was investigated and it was found that high levels of neuroticism is consistently associated with negative affectivity (McFatter, 1994; Weinstock & Whisman, 2006), proneness to worry (Tamir, 2005), and emotion focused coping strategies, promoting avoidance and wishful thinking (Bouchard, 2003). On the contrary, extraversion was found to be related with positive affectivity (Côté & Moskowitz, 1998; Lucas & Baird, 2004; Robinson, Solberg, Vargas & Tamir, 2005). In other words, extrovert

individuals are found to appraise agreeable social interactions more positively than introverts (Côté & Moskowitz, 1998). Studies indicated that extraversion predicts effective functioning and well-being across a wide variety of domains (Ozer & Benet-Martinez, 2006) from cognitive performance and social endeavors (Eaton & Funder, 2003) to socioeconomic status (Roberts, Kuncal, Shiner, Caspi, & Goldberg, 2007). That is, extraversion predicts risk and resilience for different forms of psychopathology (Trull & Sher, 1994; Widiger, 2005). Furthermore, studies indicate that conscientiousness was closely related to acquisition of strategies to cope with frustration coming from objects and tasks (Jensen-Campbell et al., 2002). Similarly, it was indicated that agreeableness is associated with a variety of interpersonal strategies since the quality of social interactions is more important than self-centered goals for highly agreeable individuals (Wilkowski, Robinson & Meier, 2006). Two Meta analyses have shown that conscientiousness is correlated with positive affect, negative affect, happiness, and life satisfaction (DeNeve & Cooper, 1998; Heller, Watson, & Ilies, 2004). Finally, although previous research found almost no relations between openness to experience and psychological well being, recent studies emphasized the role of openness to experience in terms of engaging in problem focused coping strategies (Bouchard, 2003).

1.2.6 Discrepancies between Adolescent and Mother Reports of Adolescent's Emotion Regulation

It is common to gather information from multiple informants such as the child and his or her parents as well as other informants as appropriate in assessing children's behavioral and emotional problems (Kendall & Flannery-Schroeder, 1995). This multi-informant approach provides information about the child from different perspectives and across different situations, which cannot be gathered from one informant alone (Hughes & Gullone, 2010). However, multi-informant approach may result in discrepancies among informant reports thus the meaning of such discrepancies and how discrepant reports should be integrated must be investigated (Hughes & Gullone, 2010). When doing so, it is important to keep in mind that discrepancies between informants do not necessarily imply a distortion, but may

reflect subjective and partial truths about an ambiguous reality (Berg-Nielsen, Vika, & Dahl, 2003).

Studies typically report agreement as the correlation between informant reports, indicating similarities in rank orders of scores provided by informants. On the contrary, discrepancies between informants focus on the mean differences in informants' reports (Hughes & Gullone, 2010). Achenbach, McConaughy, and Howell (1987) conducted a comprehensive meta-analysis of cross-informant correlations of child and adolescent behavioral and emotional problems and concluded that although agreement between parents was generally high ($r = .59$), agreement between parents and children was low ($r = .25$). Furthermore, Eiser and Morse (2001) reviewed studies describing agreement between child and parent across various domains of measurement and found greater agreement for observable functioning such as completing physical tasks but considerably less agreement for non-observable events such as those related to emotional or social functioning. Subsequent studies have confirmed these patterns of informant discrepancies regarding child and adolescent internalizing symptoms (e.g., Berg-Nielsen et al., 2003; De Los Reyes, & Kazdin, 2004; Foley et al., 2004; Seiffge-Krenke, & Kollmar, 1998). On the contrary, studies examining parent and child agreement on externalizing symptoms suggest that the highest levels of agreement occur when parents and children are asked about concrete observable behaviors (Eiser & Morse, 2001; Hawley & Weisz, 2003; Kolko & Kazdin, 1993).

Discrepancies between parent and child reports might be explained by several factors such as limitations in children's cognitive and expressive language skills, parent's awareness of the child's symptoms, and parent's own psychological states (Berg-Nielsen et al., 2003; Grills & Ollendick, 2002). Children's developmental status plays a critical role in their ability to respond to self-report measures in a valid and reliable way. The ability to be self-aware and monitor one's emotions depends on the development of sophisticated cognitive abilities (Zeman, Klimes-Dougan, Cassano, & Adrian, 2007). Previously conducted studies indicated that children younger than six years lack self-monitoring (Ollendick & Hersen, 1993), thus parents

provide more valid and objective representations of younger children's behavior than children's self-report, particularly assessing externalizing types of behavior (Morris, Robinson, & Eisenberg, 2006).

Moreover, children's ability to recognize multiple emotions to be experienced simultaneously or concurrently does not fully develop well until middle childhood (Harter & Whitesell, 1989). However, middle childhood-age children and adolescents are expected to be effective and reliable reporters of their emotional experience given their increasing emotional, encoding skills, expanding emotion vocabulary, and developing emotional awareness skills (Zeman et al., 2007). In addition, since it is not possible to observe the internal feeling states of others (Eiser & Morse, 2001) directly asking children about their own thoughts and feelings about how they manage their emotions might give more accurate insights into children's feeling states (Bowie, 2010). Previous studies indicated that adolescents reported more behavioral and emotional problems than their parents (Sourander, Helstela, & Helenius, 1999; Verhulst & Van der Ende, 1992) and this difference was significantly higher for girls than for boys in internalizing symptoms. It was concluded that problems that can be hidden from the parents' view are particularly likely not to be recognized by the parents, and more so for girls than for boys (Sourander et al., 1999). As children grow older, parents can be less aware of how their children feel and behave. Moreover, situational factors such as mental state and the level of stress may also influence parents' perception of their children's problems (Berg-Nielsen et al., 2003; Treutler & Epkins, 2003).

Despite adolescence is a time when self reports are likely to be increasingly sought, more heavily weighted, and often relied upon as the sole source of information, understanding informant discrepancies during this period is important (Hughes & Gullone, 2010). Adolescents report more problems than parents do (Sourander et al., 1999; Verhulst & Van der Ende, 1992). At this point, it is most likely that many adolescents in need of psychiatric assessment do not receive appropriate assistance because their problems remain unnoticed by adults (Sourander et al., 1999). Moreover, Zeman et al. (2007) concluded that obtaining information

from multiple informants about adolescents' emotions and investigating the ways in which each informant adds information about adolescents' emotional functioning are needed.

1.2.7 Emotion Dysregulation and Psychopathology

Emotion regulation does not mean stopping distress. It includes various types of adjustments organizing human functioning and promoting the adaptation of the individual to life conditions. Moreover, it does not only mean the reduction of the intensity or frequency of states. It requires the capacity to generate and sustain emotions so as to carry out an activity and to communicate and to impress others. Therefore, well-adjusted individuals are expected to be emotionally well regulated, attenuating and curtailing the intensity and duration of emotions as needed, and amplifying and extending emotion states when necessary. In other words, not only the ability to attenuate strong emotion but also capacity for spontaneity and immediacy are necessary for regulation of emotion. On the contrary, emotion dysregulation refers to difficulty in modulating emotional experience and expression with regard to contextual demands and difficulty in controlling the effects of emotional arousal on the organization and quality of thoughts, actions, and interactions (Cole et al., 1994).

Cicchetti, Ganiban, and Barnett (1991) argued that acquisition of the ability to regulate emotions and related behaviors are regarded as milestones in development. However, certain conditions may lead to patterns of emotion regulation to jeopardize or impair functioning, and such patterns may support or become symptoms of psychopathology. A range of emotion symptoms interfering with various developmental tasks are associated with psychopathology. Adaptive emotion regulation turns into dysregulating qualities and such patterns become symptoms of psychopathology (Cole et al., 1994). For example, as it claimed in development of emotion regulation section that infants are largely dependent on caregivers to regulate environments and their experiences; therefore, emotion dysregulation in infancy and toddlerhood mostly emerges in the context of dysfunctional family environment. In other words, a breakdown in dyadic co-regulation of emotion in

early childhood results in emotion dysregulation in the infant. For instance, parents' own psychopathology may interfere functional parenting, thus leading infants to have serious mental health consequences like depression (Cole & Kalow, 1988; Spitz, 1965), nonorganic failure to thrive, rumination disorder, and reactive attachment disorders of infancy (Mayes, 1992) (as cited in Cole et al., 1994). In addition, children who have been sexually maltreated often display internalizing and externalizing difficulties, symptoms of posttraumatic stress disorders, and interpersonal problems with peers (Shipman, Zeman, Fitzgerald, & Swisher, 2003).

Moreover, the prevalence of emotional difficulties in the conceptualization and differentiation of mental health problems is given by a review of diagnostic criteria in the DSM-III-R classification system. That is, inappropriateness of affect, chronic worry or tension, blunting or avoidance of emotions, constriction of affect, unpredictable fluctuations between emotionlessness and rage, elation, or dejection, the predominance of one emotion and the relative absence of another, and sustained negative emotions are common examples of emotion characteristics associated with clinical disorders (Cole et al., 1994). Specifically, the role of emotion regulation deficits in a range of clinical disorders, including substance abuse (Hayes, Wilson, Gifford, Follette, & Strosahl, 1996), generalized anxiety disorder (Mennin, Heimberg, Turk, & Fresco, 2002), and complex posttraumatic stress disorder (Cloitre, 1998), and borderline personality disorder (Linehan, 1993) was supported by both empirical and theoretical literature.

Clinical models of psychopathology and therapeutic change focus on the problematic aspects of emotion, implicitly or explicitly, and it is assumed that adjustment and treatment success mostly depend on awareness and flexible control of emotion states (Safran & Greenberg, 1991). That is, many therapies aim to understand emotion patterns and their historical roots, to learn to recognize emotions, to express them appropriately, and to experience problematic emotion patterns in order to modify them. For example, traditional psychoanalytic view proposes that individual differences in emotion regulation shape personality and psychopathology. Early childhood emotions such as anxiety, despair, and disappointment are regulated

by the individual. If these regulatory attempts are not flexible or do not change over time, they constrain personality and produce symptoms (Cole et al., 1994).

Furthermore, cognitive-behavioral clinical perspective emphasizes the role that patterns of action and thought play in regulating emotion. Learned behaviors, attribution styles, belief systems, and self-statements contribute to the development and maintenance of maladaptive emotional symptoms. Treatment emphasizes the reduction of negative emotion states (Greenberg & Safran, 1987).

Although clinical conceptualization of emotion regulation is very important, definitions of emotion dysregulation tend to be relatively few and rather diverse. According to Dodge and Garber (1991), emotion dysregulation refers to interference in the processing of information and events. Moreover, Cicchetti et al. (1991) claims that emotion dysregulation is related to difficulties with the flexible integration of emotion with other processes. It also includes poor control over affective experience and expression (Kopp, 1989). More broadly, emotion dysregulation, which produce emotional, cognitive, or behavioral outcomes that are maladaptive for the individual in a particular situation, has been described as failures to meet the developmental tasks of emotional development (Dodge & Garber, 1991). It is proposed that there are many facets of dysregulation. Cole et al. (1994) attempt to limit it into two forms which are over- and under-regulation. Both over- and under-regulation of emotion can lead to problems (Malatesta & Wilson, 1988). For example, extreme under-regulation of guilt may lead to the experience of depression, whereas over-regulation of guilt may be associated with later experiences of paranoia or sociopathy (Walden & Smith, 1997). In addition, it is proposed that access to the full range of emotions is a characteristic of emotion regulation because emotions are adaptive in quality, preparing individuals to engage in actions quickly that support social and individual survival. Therefore, joy, anger, sadness, and social emotions such as guilt and pride are all necessary for optimal functioning (Barrett & Campos, 1987). However, when an emotion that is held as typical and appropriate to a particular situation is inaccessible, it is a signal that some basic, adaptive function is blocked. A pattern of inability to access a typical emotion in a pertinent situation is regarded as emotion dysregulation (Cole et al. (1994). Moreover, the inability to access certain emotions

1.3 Goals and Hypotheses

1.3.1 Significance of the Study

The main study was built on Morris et al. (2007)'s proposed tripartite model explaining the mechanism through which family context impacts emotional development of children and adolescents (see Figure 1.2). In that review, the authors pointed out the lack of consensus on how to measure and operationalize emotion regulation. Therefore, the Difficulties in Emotion Regulation Scale (DERS), the measure for comprehensive assessment of emotion regulation difficulties (Gratz & Roemer, 2004), was used in the current study. The DERS was originally developed for adults but it is also applicable for adolescents because conceptualization of the DERS is based on theoretical literature of emotion regulation in youth (Cole et al., 1994). Thus, before conducting the main study, psychometric properties of the DERS have been examined for a Turkish adolescent sample.

Although parents continue to play an important role in adolescents' emotional development, emotion socialization research is fundamentally based on studies conducted in infancy through middle childhood but late childhood and adolescence have been largely ignored (Katz, Maliken, & Stettler, 2012; Morris et al., 2007). Studies investigating emotion regulation processes in adolescence and the impact of family context on adolescents' emotion regulation are greatly needed. Thus, current study aimed to make contribution to the current literature investigating factors associated with emotion regulation difficulties of adolescents.

Gathering information from multiple sources is very essential in order to interpret research findings precisely. In addition, understanding reasons of discrepancy obtained between different sources may contribute to develop successful intervention programs for children and adolescents. However, as indicated in the literature review section limited number of studies guide researchers about how to conceptualize and use discrepant information (Hourigan, Goodman, & Southam-Gerow, 2011). To address this gap in the literature, the present study investigated the discrepancy between mothers' and adolescents' reports on adolescents' emotion regulation difficulties.

The importance of parental coaching and guidance in children's better emotion regulation was emphasized in most studies conducted with preschool children (e.g., Cunningham, Kliewer, Garner, 2009; Gottman et al., 1996; Katz, Hunter, & Klowden, 2008; Katz & Windecker-Nelson, 2004; Lunkenheimer, Shields, & Cortina, 2007). However, as children get older the influence of coaching practices may decrease because adolescents spend less time with their parents and rely more on their peers for emotional support and guidance (Klimes-Dougan & Zeman, 2007). For example, when adolescents experience emotionally distressing events, they are less likely to disclose their emotions with parents so their parents may not be able to discuss and validate adolescents' feelings which in turn reduce parental contribution to adolescents' emotion regulation process. However, independent from the content, the emotional climates of the family in which parenting behaviors are expressed continue to play significant roles in adolescents' emotion regulation (Eisenberg et al., 1998, Morris et al., 2007). Thus, exploring parental rearing behaviors constitutes the general focus of the study.

1.3.2 Purposes of the Study

The DERS is a widely used and empirically supported measure of emotion regulation difficulties in adults. However, application of the DERS to adolescents is very recent issue. The purpose of the first study was to examine the utility of the DERS in the assessment of emotion regulation difficulties in Turkish adolescents. For this aim, factor structure and psychometric properties of the DERS have been examined.

Roughly, the purpose of the main study was to explore the interplay among maternal rearing behaviors, adolescents' emotion regulation, and their psychological problems. Before the main analyses, preliminary analyses were done, through which we found answers of how demographic variables such as gender, type of school, education levels of parents made distinction within the measures of the study. Using multiple informant approach, discrepancies between mothers' and adolescents' reports with regard to adolescents' emotion regulation difficulties were examined. In addition, factors associated with adolescents' emotion regulation difficulties as

mothers' emotion regulation, psychopathology and personality traits, parental rearing behaviors, and adolescents' personality traits were investigated. Finally mediating role of emotion regulation of adolescents between their perception of maternal rearing behaviors and their psychological problems was examined.

1.3.3 Research Hypotheses of the Study

The hypotheses of the present study are:

1. There will be a discrepancy between adolescents' reports of their own emotion regulation and mothers' reports on adolescents' emotion regulation.
2. Adolescents' personality traits will be associated with mothers' personality traits, as well as maternal rearing behaviors.
3. Adolescents' emotion regulation will be associated with mothers' emotion regulation, as well as maternal rearing behaviors. After controlling all these factors, personality traits of adolescents will be significantly associated with adolescents' emotion regulation.
4. Psychological distress of adolescents will be associated with mother characteristics, maternal rearing behaviors and adolescents' personality traits. After controlling all these factors, it will be significantly associated with adolescents' emotion regulation.
5. The relation between maternal rearing behaviors and psychological distress of adolescents will be mediated by emotion regulation difficulties of adolescent.

Apart from these research hypotheses, how demographic variables such as gender, type of school, education levels of parents made distinction within the measures of the study will be examined

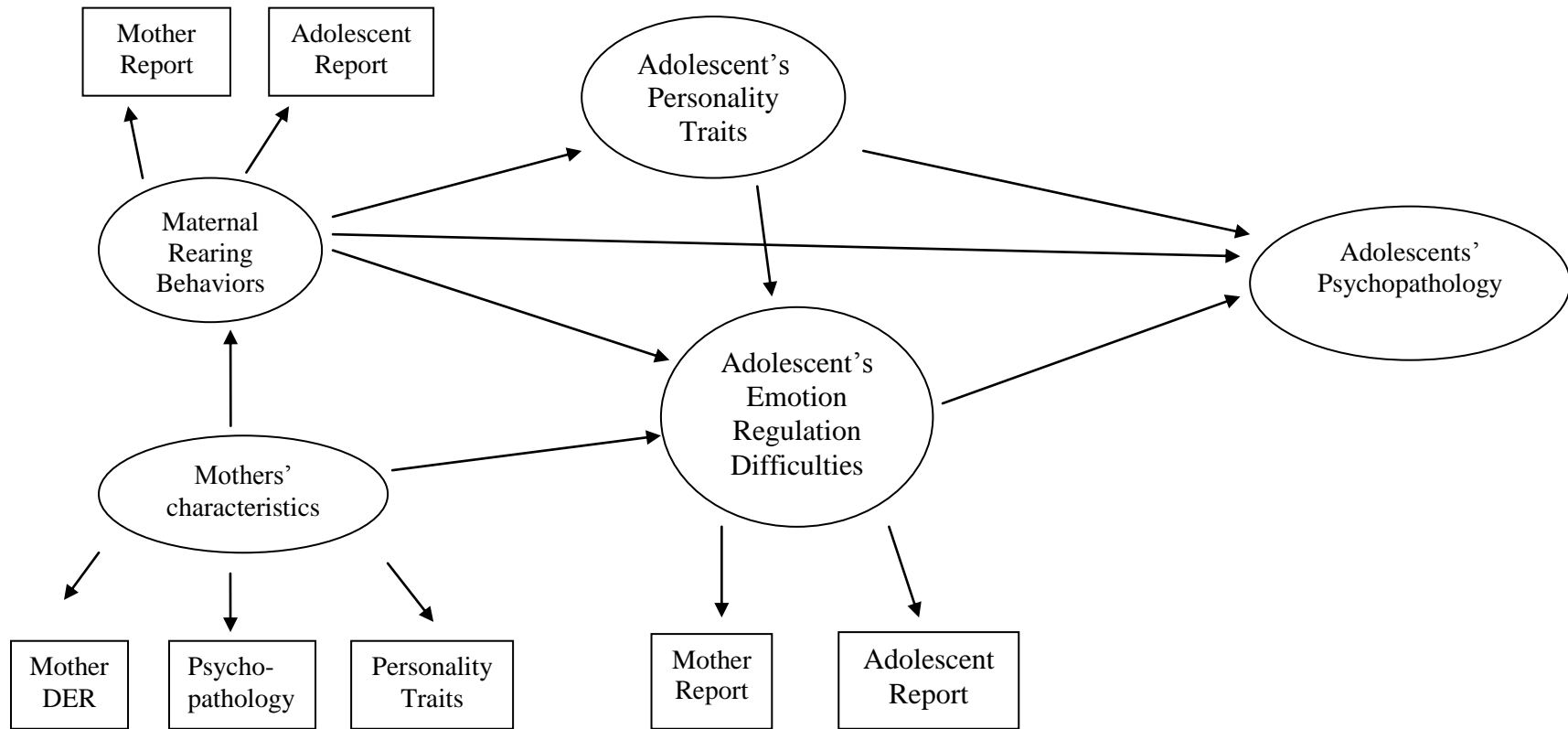


Figure 1. 2 *Proposed Model for The Impact of The Maternal Rearing Behaviors on Adolescents' Emotion Regulation*

CHAPTER II

STUDY 1:

PSYCHOMETRIC PROPERTIES OF THE DIFFICULTIES IN EMOTION REGULATION SCALE (DERS) IN A TUSKISH ADOLESCENT SAMPLE

2.1 Introduction

Although a growing body of research focuses on emotion regulation among children and adults, few studies have investigated emotion regulation and emotion regulation difficulties among adolescents (Gross, 1998b; Zeman et al., 2006). However, those limited number of studies provide preliminary evidence for the importance of specific aspects of emotion regulation and related constructs to adolescent development (Silk, Steinberg, & Morris, 2003). One likely reason for the relative lack of research in this area may be the limited number of available measures of emotion regulation for adolescents (Zeman, et al., 2006). Difficulties in Emotion Regulation Scale (DERS) is one of the measures for comprehensive assessment of emotion regulation difficulties (Gratz & Roemer, 2004), which is originally developed for use of adults. Moreover, suggesting its potential utility for adolescents, the DERS is based on a conceptual definition of emotion regulation influenced most directly by theoretical literature on emotion regulation in youth (Cole et al., 1994). Therefore, Neumann, Lier, Gratz, and Koot (2010) explored the utility of the DERS in assessing adolescents' emotion regulation. Confirmatory factor analysis suggested a similar factor structure in the adolescent sample as demonstrated previously among adults. In addition, the DERS factors were meaningfully related to adolescents' externalizing and internalizing problems. Results suggested that scores on the DERS show promising internal consistency and validity in a community sample of adolescents. Therefore, the purpose of the present study was to examine whether a widely used and empirically supported measure of emotion regulation difficulties in

adults also being used in the assessment of emotion regulation difficulties in Turkish adolescents. To this end, factor structure and psychometric properties of the DERS were examined in a Turkish adolescent sample. The second aim of the first study was also to examine factor structure and psychometric properties of the Strength and Difficulties Questionnaire (SDQ) because of the reasons explained in the method section.

2.1.1 Difficulties in Emotion Regulation

Emotion regulation literature indicates that adaptive emotion regulation requires flexible, context-sensitive, modulation of emotion so as to meet longer term personal goals (Barrett, Gross, Christensen, Benvenuto, 2001). It is also argued that choosing and implementing regulation strategies are necessary for adaptive emotion regulation (Kring & Sloan, 2010). Such regulation often involves several steps. The first is pausing which involves not immediately reacting to the external situation or to one's internal primary emotional response, but rather pausing for a moment and giving oneself some breathing room. Mindful awareness is expected to reduce the urgency of emotion so that one can selectively control one's behavior. The second is noticing which is to be aware of one's primary emotional response and to be able to identify what emotion one is having (Thompson, 2004). The third is deciding how controllable the emotion and the situation are. That is to say, one needs to determine how controllable the situation causing the emotion is and how controllable one's internal reaction to the situation is. The fourth is acting in line with long-term goals and values regarding the given situation as well as the ability to determine what responses are ultimately in line with those goals.

On the basis of the above conceptual and empirical work, Gratz and Roemer (2004) conceptualize emotion regulation strategies as involving (a) awareness, and understanding of emotions, (b) acceptance of emotions, (c) ability to control impulsive behaviors and behave in accordance with desired goals when experiencing negative emotions, (d) and ability to use situationally appropriate emotion regulation strategies flexibly to modulate emotional responses as desired in order to meet individual goals and situational demands. Relative absence of any or all of these

abilities would indicate the presence of difficulties in emotion regulation, or emotion dysregulation.

Gratz and Roemer (2004) developed the Difficulties in Emotion Regulation scale (DERS), items of which focus mainly on the regulation of negative emotional states. Several studies were conducted in order to support the utility of the DERS among adults and found that scores on this measure have good test-retest reliability over a period of 4 to 8 weeks in a sample of college students and high internal consistency within clinical (Fox, Axelrod, Paliwal, Sleeper, & Sinha, 2007; Gratz, Tull, Baruch, Bornovalova, & Lejuez, 2008) and nonclinical populations (Gratz & Roemer, 2004; Johnson et al., 2008). Furthermore, research using this measure with adults concluded that the DERS has been linked to the clinically relevant phenomena in both clinical and non-clinical samples. In other words, scores on the DERS showed statistically significant relations with deliberate self-harm (Gratz & Roemer, 2008), intimate partner abuse perpetration among men (Gratz, Paulson, Jakupcak, & Tull, 2009), and cocaine dependence (Fox et al., 2007). Additionally, scores on the DERS have been found to be heightened among individuals with borderline personality disorders (Gratz, Rosenthal, Tull, Jequez, & Gunderson, 2006), probable post traumatic stress disorder (Tull, Barrett, McMillan, & Roemer, 2007), and panic attacks (Tull & Roemer, 2007). Studies also indicate that the DERS has statistically significant associations with a number of constructs including negative affect (Johnson, et al., 2008; Vujanovic, Zvolensky, & Bernstein, 2008), depression and anxiety symptom severity (Roemer et al., 2009; Vujanovic, et al., 2008), and experiential avoidance (Gratz & Roemer, 2004; Tull & Gratz, 2008; Tull & Roemer, 2007).

2.2 Method

2.2.1 Participants

Three hundred and twelve first-grade high school students from four different high schools located in Ankara were contacted. Mean age of the student sample was 15.04 years ($SD = 0.46$). Of the participants, 164 were girls (52.6%) and 148 were boys (47.4%). Out of these participants, 71 (22.8%) were from Ayrancı High School, 68 (21.8%) were from Kılıçaslan High School, 86 (27.6%) were from Esenevler Anatolian High School, 87 (27.9%) were from Dr. Binnaz Ege-Dr. Rıdvan Ege Anatolian High School. Data were collected from 139 (44.9%) first-grade regular high school students (45%) and 173 (55.1%) first-grade Anatolian high school students.

With respect to the education levels of the mothers, 3 (1%) were illiterate, 46 (14.7%) were primary school, 28 (9%) were secondary school, 104 (33.3%) were high school, 117 (37.5%) were university graduates, and 9 (2.9%) were post-graduates. Regarding fathers' education levels, 1 (0.3%) was illiterate, 19 (6.1%) were primary school, 19 (6.1%) were secondary school, 90 (28.8%) were high school, 146 (46.8%) were university graduates and 32 (10.3%) were post-graduates.

Among all participants, 43 (13.8%) had no sibling, 186 (59.6%) had one sibling, 64 (20.5%) had two siblings, 10 (3.2%) had three siblings, 1 (0.3) had four siblings (see Table 2.1 for socio-demographic characteristics of the sample).

In order to obtain test re-test data, a subset of participants were randomly selected from three schools. The re-test data with 85 participants consisted of 52 (61.2%) females and 33 (38.8%) males. Similar to the main sample, the mean age of the retest sample was 15.01 ($SD = 0.39$). Among the re-test participants, from which re-test data were collected, 28 (32.9%) were from Kılıçaslan High School, 21 (24.7%) were from Esenevler Anatolian High School, 36 (42.4%) were from Dr. Binnaz Ege-Dr. Rıdvan Ege Anatolian High School.

Table 2. 1 Demographic Characteristics of the Sample

Demographic Variable	Frequency/ Mean	Percentage/ Standard Deviation
<u>Gender</u>		
Female	164	52.6 %
Male	148	47.4 %
Age (Years)	15.04	0.46
<u>Schools</u>		
Esenevler A. High School	86	27.6%
Dr. Binnaz Ege A. High School	87	27.9%
Kılıçaslan High School	68	21.8%
Ayrancı High School	71	22.8%
<u>Mother's level of education</u>		
Illiterate	3	1%
Primary School	46	14.7%
Secondary School	28	9%
High School	104	33.3%
University	117	37.5%
Postgraduate	9	2.9%
<u>Father's level of education</u>		
Illiterate	1	0.3%
Primary School	19	6.1%
Secondary School	19	6.1%
High School	90	28.8%
University	146	46.8%
Postgraduate	32	10.3%
<u>Number of siblings</u>		
0	43	13.8%
1	186	59.6%
2	64	20.5%
3	10	3.2%
4	1	0.3%

2.2.2 Measures

2.2.2.1 Demographic information

The first part of the questionnaire was composed of questions about demographic information which was given to adolescents. This form was prepared in order to get information concerning age, gender, hometown, current residence, number of siblings, parents' education, occupation, and marital status of parents (married / divorced / deceased).

2.2.2.2 Strengths and Difficulties Questionnaire (SDQ)

Adolescents completed the 25-item Strengths and Difficulties Questionnaire (Goodman, 1997). The SDQ was originally created from modifying the Rutter Parent Questionnaire (Goodman, 1997) by including extra items on children's strengths. Twelve of the items cover strengths and twelve of the items tap children's problem behaviors. The item "Gets along better with adults than with other children" is considered neutral. Each of the 25 items rated from 0 (not true) to 2 (certainly true). The original questionnaire consists of five subscales, each one consisting of five items: hyperactivity, emotional symptoms, conduct problems, peer problems, and prosocial behaviors. The scores for hyperactivity, emotional symptoms, conduct problems, peer problems are summed to generate a Total Difficulties score. However, the score for the prosocial subscale was not incorporated into the difficulties score because absence of prosocial behaviors is seen as conceptually different from the presence of psychological difficulties. The SDQ has been found to be a valid measure of adjustment in different samples and informants (e.g., mother, teacher, and child) with good psychometric quality (Goodman, Meltzer, & Bailey, 1998) The SDQ subscales were also found to be highly correlated with the Achenbach Child Behavior Checklist (Goodman, & Scott, 1999).

Turkish translation of the SDQ was conducted by Güvenir, Özbek, Baykara, Onurgüder, & Kazak-Berument and adaptation studies of the parent version was conducted by Güvenir, Özbek, Baykara, Sentürk, & İncekas (2004). Reliability of the SDQ was evaluated by examining the Cronbach's alpha values. The Cronbach's

alpha coefficients for Emotional Symptoms, Conduct Problems, Hyperactivity-Inattention, Peer Problems, and Prosocial Behavior subscales and the Total Difficulties score were .73, .65, .80, .37, .73, and .84, respectively (Güvenir et al., 2004). For assessing the convergent validity, like in all other cultural adaptation studies, the Child Behavior Checklist for Ages 4-18 (CBCL; Achenbach, 1991, 1993) was used. The correlation for the Emotional Symptoms subscale of the SDQ and Internalizing Problems subscale of the CBCL was found to be $r = .80, p < .001$; and for the Conduct Problems subscales of the SDQ and the Externalizing Problems subscale of the CBCL was found to be $r = .72, p < .001$. The correlation coefficients for the Hyperactivity-Inattention subscale of the SDQ and Attention Problems subscale of the CBCL was $.71, p < .001$; for the Peer Problems subscale of the SDQ and Social Problems subscale of the CBCL was $.46, p < .001$ (Güvenir et al., 2004). In addition, the Total Difficulties score of the SDQ and the Total Problem score of the CBCL were found to be highly correlated, $r = .80, p < .001$.

Eremsoy (2007) computed the Cronbach's alpha coefficients for the parent and teacher forms in order to check the internal consistency of the five subscales and the Total Difficulties score. The Cronbach's alpha coefficients of the parent-form were lower than the Cronbach's alpha coefficients found in Turkish adaptation study by Güvenir et al. (2004). In addition, Peer Problems subscale had a very low internal consistency on both parent and teacher forms. Therefore, Eremsoy (2007) examined factor structure of the SDQ. Principal components analysis of the items resulted in four subscales that were named as Conduct Problems and Hyperactivity, Prosocial Behavior, Emotional Symptoms, and Inattention Problems, explaining 49.38 % of the total variance.

In the present study, the Cronbach's alpha coefficients were computed for the adolescent form in order to check the internal consistency of the five subscales and the Total Difficulties score. However, in the present study the Cronbach's alpha coefficients of the adolescent form were lower than the Cronbach's alpha coefficients found in Turkish adaptation study by Guvenir et al. (2004). In addition to that, internal consistency analyses with four factors found in Eremsoy (2007) study did

not give statistically meaningful alpha values. Therefore, psychometric properties of the SDQ for adolescent Turkish sample were examined.

2.2.2.3 Difficulties in Emotion Regulation (DERS)

Adolescents completed DERS, which has been developed by Gratz & Roemer (2004). DERS includes 6 subscales, namely (1) lack of awareness of emotional responses (AWARENESS), (2) lack of clarity of emotional responses (CLARITY), (3) non-acceptance of emotional responses (NONACCEPTANCE), (4) limited access to effective strategies (STRATEGIES), (5) difficulties in controlling impulses when experiencing negative affect (IMPULSE), and (6) difficulties in engaging goal directed behavior when experiencing negative affect (GOALS). The scale is composed of 36 items which are rated on a Likert type scale, from 1 (almost never) to 5 (almost always). As a reliability score, Cronbach's alpha was found as .93 for total scale implying high internal consistency, and alpha coefficients were ranging from .80 to .89 for each subscale implying adequate internal consistency. Test-retest reliability was found as .88 ($p < .01$, $N = 21$). Correlation of the DERS with different clinically related constructs have been shown differential pattern of associations among different subscales of DERS indicating clinical relevance of the scale (Gratz & Roemer, 2004).

DERS was translated and adapted into Turkish by Rugancı and Gençöz (2010). Factor structure of the scale was examined with a sample of 338 university students, and identical factor structure with the original scale was obtained with the exclusion of a single item. That is, Rugancı and Gençöz (2010) found that item 10, had loading of -.49 under the strategy factor and .27 under the awareness factor, which was its original factor. The content of this item in the Turkish version of the DERS seemed to be more related to acceptance of the emotion rather than awareness, and any semantic association between this item and strategy factor could not be formulated. Moreover, this item decreased the alpha coefficients, from .75 to .70 when included into the awareness factor, and, similarly, from .89 to .85 when included in the strategy factor. Furthermore, this item had almost no correlation ($r = .06$) with the total scale. On the basis of these findings, this item (item 10) has been

excluded from the Turkish version of the DERS. Cronbach's alpha was .94 for the total scale which was similar to the internal consistency of the original version of the scale. Similarly, the subscales of the DERS revealed considerably high internal consistency with alpha coefficients which were as follows: .82 for clarity, .90 for goals, .90 for impulse, .83 for the non-acceptance, .89 for strategy, and .75 for awareness subscales. Test-retest reliability of the total DERS was .83 ($p < .01$, $N = 59$), which was slightly lower than the original version. The test-retest reliability coefficients of the subscales were .85 for strategy, .72 for awareness, .69 for clarity, .68 for impulse, .72 for goals, .60 for non-acceptance actors. The examination of concurrent validity revealed strong correlations, although awareness factor of DERS had relatively weaker correlations with measures of psychological distress. Concerning the criterion validity, all measures of DERS could significantly differentiate "high psychological distress" participants from those of "low psychological distress" participants; however, for the awareness subscale the effect size was small.

Psychometric properties of the scale with an adolescent Turkish sample have not been examined before. Therefore, the present study aimed to examine psychometric properties of the DERS in a Turkish adolescent sample

2.2.2.4 Positive and Negative Affect Schedule (PANAS)

Adolescents were given Positive and Negative Affect Schedule (PANAS) which has been developed by Watson, Clark, and Tellegen (1988), and includes 20 items rated from 1 "very slightly or not at all" to 5 "extremely", on a 5-point likert type scale. The PANAS assesses positive affect (PA; the extent to which a person is attentive, alert, excited, enthusiastic, inspired, proud, determined, strong and active) and negative affect (NA; the extent to which a person is distressed, upset, hostile, irritable, scared, afraid, ashamed, guilty, nervous and jittery). Scores for the PA and NA subscales can range from 10 to 50. Watson et al., (1988) have extensively demonstrated the scales' validity and reported coefficient alphas in the range of .86 to .90 for PA, and .84 to .87 for NA.

Psychometric properties for the Turkish form of the scale were studied by Gençöz (2000). Internal consistency coefficients were found to be .83 for the positive affect subscale and .86 for the negative affect subscale; and test-retest reliability coefficients were found to be .40 and .54 respectively for positive and negative affect. Furthermore, criterion-related validity of Turkish version of this scale indicated negative correlation of Positive Affect Scale with Beck Depression Inventory and with Beck Anxiety Inventory; positive correlation of Negative Affect Scale with Beck Depression Inventory and with Beck Anxiety Inventory.

In the current study, internal consistency coefficients were found to be .81 and .84 for the positive and negative affect subscales, respectively.

2.2.2.5 Emotion Regulation Questionnaire (ERQ)

Adolescents completed the Emotion Regulation Questionnaire (ERQ; Gross & John, 2003), which assesses individual differences in the habitual use of two common emotion regulation strategies: cognitive reappraisal (ERQ-R) and expressive suppression (ERQ-S). The ERQ comprises 10 items (6 for the reappraisal scale and 4 for the suppression scale) that are rated on a 7-point scale so that a high score indicates frequent use of reappraisal/suppression. As a reliability score, Cronbach's alpha was .80 for the reappraisal and .73 for the suppression. Correlation of the ERQ with different clinically related constructs have been shown differential pattern of associations with reappraisal and suppression subscales of ERQ indicating clinical relevance of the scale (Gross & John, 2003).

ERQ was translated and adapted into Turkish by Ozgule (2011). Factor structure of the scale was examined with a sample of 445 adolescents, aged between 13-17 years, and identical factor structure with the original scale was obtained. Internal consistency coefficients were found to be .78 for the reappraisal subscale and .64 for the suppression subscale.

In the current study, internal consistency coefficients were found to be .79 for the reappraisal subscale and .63 for the suppression subscale.

2.2.3 Procedure

Permission was given by the Ministry of National Education for the receipt of questionnaire packets by the participants (see Appendix A, permission letter). Students were informed regarding the general focus of the study through in-class presentation (see Appendix B, informed consent for adolescents), and were asked to obtain their mothers' permission by means of a letter that included a brief explanation of the study and requested permission for their adolescent's participation (see Appendix C, permission of parents). After their mothers' permission had been obtained, adolescents were administered the scales described above in their classrooms. Adolescents completed questionnaires in a counter-balanced order in one class session (see Appendix D, batter of questionnaires for adolescents). Eighty-five participants were re-administered the DERS questionnaire in order to analyze the test–retest reliability of the scale. The time interval between first and the second administration ranged from 3 to 4 weeks.

2.3 Results

2.3.1 Psychometric Properties of the SDQ and the DERS for Turkish Adolescents Sample

2.3.1.1 Psychometric Properties of the SDQ for Turkish Adolescent Sample

As for the psychometric characteristic of the SDQ, initially its factor structure was analyzed (i.e., construct validity) which was followed by reliability studies.

2.3.1.1.1 Factor Structure of the SDQ

In order to examine the factor structure of the SDQ, factor analysis using a principle component factor analysis with varimax rotation was used as in the original version of the scale. As a result of the factor analysis, seven factors have been emerged with eigenvalues above 1. Based on the scree-plot and item distribution, a four-factor structure was preferred, and these factors totally accounted for 39.76 % of the total variance. These four factors separately accounted for 13.43 %, 11.33 %, 7.85 %, and 7.15 % of the total variance, respectively. Furthermore, two main inclusion criteria were established for the items to be considered under a particular factor: (1) having an item loading of .30 or higher, (2) if an item loading was .30 or higher on more than one factor (i.e., items with cross-loading), the item's content was examined, and considering the theoretical congruence the factor under which the item would be accepted was decided.

As can be seen from Table 2.2, out of the explained total variance, 13.43 % was explained by the first factor. All of the five items (8, 13, 24, 3, 16) from the first factor (Emotional Symptoms subscale), one item (item 6) from the fourth factor (Peer Problems subscale), and one item (item 5) from the second factor (Conduct Problems subscale) of the original form were loaded on the first factor in the present study. Thus, the first factor was named as "Emotional Symptoms" as the first factor of the original form. The second factor in the present study, consisting of 7 items, explained 11.33 % of the total variance. All of the five items (4, 9, 1, 20, 17) were from the fifth factor (Prosocial Behavior subscale), one item (item 21) from the third factor (Hyperactivity-Inattention subscale), and one item (item 14) from the fourth

factor (Peer Problems subscale) of the original of the original form. Thus, the second factor was named as “Prosocial Behavior” similar to the fifth factor of the original form. The third factor explained 7.85 % of the total variance. Three of the items (12, 22, 18) loaded on this factor were the items of the second factor (Conduct Problems subscale) of the original form. Additionally, two items (19, 23) from the fourth factor (Peer Problems subscale) and one item (item 25) from the third factor (Hyperactivity-Inattention subscale) of the original form were loaded on the third factor in the present study. Thus, third factor with six items was named as “Conduct Problems”. Finally, three items (2, 10, 15) from the third factor (Hyperactivity-Inattention subscale) and one item (item 7) from the second factor (Conduct Problems subscale) of the original form were loaded on the fourth factor, which explained 7.15 % of the total variance. This fourth factor with four items was named as “Inattention Problems” in the present study. Item 7 was negatively loaded; therefore, it has been reversed.

Furthermore, one item (item 11) was loaded on none of the factors with a loading value less than .30. This item was not included in any of the factors. Besides seven items in Prosocial Behavior subscale, this item was excluded when calculating the Total difficulties score.

Table 2. 2 *Factor Structure of the SDQ*

Factors explained	% variance	Factor 1	Factor 2	Factor 3	Factor 4
Factor 1					
(Emotional Symptoms)					
13.43 %					
24. I have many fears, I am easily scared.		.72	.08	-.03	-.00
3. I get a lot of headaches, stomach-aches or sickness.		.69	-.05	-.02	.01
13. I am often unhappy, depressed or tearful.		.67	.02	.27	.01
8. I worry a lot.		.65	.17	.04	-.03
16. I am nervous in new situations. I easily lose confidence.		.57	-.19	.10	-.13
5. I get very angry and often lose my temper.		.55	-.27	.16	.19
6. I would rather be alone than with people of my age.		.48	-.05	.31	-.26
Factor 2					
(Prosocial Behavior)					
11.33 %					
1. I try to be nice to other people. I care about their feelings.		.02	.76	.02	.07
9. I am helpful if someone is hurt, upset or feeling ill.		.10	.63	.04	.25
20. I often offer to help others (parents, teachers, children).		.13	.62	-.09	.07
17. I am kind to younger children.		-.12	.53	-.12	-.21
21. I think before doing something		-.17	.53	.30	-.20
4. I usually share with others, for example CD's, games, food.		-.08	.43	-.05	.22
14. Other people my age generally like me.		-.23	.35	-.31	.11
Factor 3					
(Conduct Problems)					
7.85 %					
18. I am often accused of lying or cheating.		.24	-.13	.68	.17
19. Other children or young people pick on me or bully me.		.21	.09	.61	.07
22. I take things that are not mine from home, school or elsewhere.		-.03	-.13	.59	-.09
23. I get along better with adults than with people my own age.		-.03	.12	.41	.04
12. I fight a lot. I can make other people do what I want.		.20	-.26	.35	.23
Factor 4					
(Inattention Problems)					
7.15 %					
2. I am restless; I cannot stay still for long.		.00	.17	-.04	.58
10. I am constantly fidgeting or squirming.		.11	.12	.14	.57
7. I usually do as I am told.		.14	.15	.04	-.57
15. I am easily distracted; I find it difficult to concentrate.		.46	-.31	.03	.49
25. I finish the work I'm doing. My attention is good.		-.33	.41	.20	-.30

2.3.1.1.2 Internal Consistency of the SDQ Subscales

In order to check the internal consistency of the SDQ with a four-factor solution obtained in the current study, Cronbach's alpha coefficients were computed. The Turkish version of the SDQ was found to have a Cronbach's alpha coefficient of .73, which was considerably good and but lower than the internal consistency of the original version of the scale. The subscales of the SDQ revealed considerably low internal consistency with alpha coefficients ranging from .47 to .75. The Cronbach's alpha values of SDQ subscales are presented in Table 2.3.

Table 2. 3 *Cronbach's alpha Values for SDQ Subscales and Total difficulties*

	# of items	Cronbach's alpha Coefficients
Emotional Symptoms	7	.75
Prosocial Behavior	7	.61
Conduct Problems	5	.51
Hyperactivity/ Inattention Problems	5	.47
Total difficulties	17	.73

2.3.1.1.3 Test-Retest Reliability

Test-retest correlation coefficients for an interval of three or four weeks were obtained for a subset of the sample. As summarized in Table 2.4, the test-retest correlation coefficients of the four subscales and the total difficulties score of SDQ were at significant levels.

Table 2. 4 *Test-retest reliability of SDQ Subscales and Total Difficulties*

	Test-retest Correlations for Adolescents $N = 85$
Emotional Symptoms	.73*
Prosocial Behavior	.68*
Conduct Problems	.47*
Inattention Problems	.62*
Total Difficulties	.66*

* $p < .001$

2.3.2 Psychometric Properties of Difficulties in Emotion Regulation Scale (DERS) for Turkish Adolescents

As for the psychometric characteristics of DERS, initially its factor structure was analyzed (i.e., construct validity) which was followed by reliability and other validity studies (i.e., concurrent validity and criterion validity).

2.3.2.1 Factor Structure of the DERS

In order to examine the factor structure of the DERS, factor analysis using principle axis factoring method of extraction with promax oblique rotation was used as in the original version of the scale (Gratz & Roemer, 2004). Before the factor analysis, reverse items of the DERS were recoded. As a result of the factor analysis, eight factors have been emerged with eigenvalues above 1. Communality values of items revealed that item 4 with a communality of .03 and item 10 with a communality of .14 has low communalities. Therefore, these two items were removed from further analyses. Based on the scree-plot and item distribution, a five-factor structure was preferred, and these factors totally accounted for 50.62 % of the total variance. These five factors separately accounted for 31.32 %, 7.93 %, 5.33 %, 3.45 %, and 2.59 % of the total variance, respectively. Furthermore, two main inclusion criteria were established for the items to be considered under a particular factor: (1) having an item loading of .30 or higher, (2) if an item loading was .30 or higher on more than one factor (i.e., items with cross-loading) the item's content was examined, and considering the theoretical congruence the factor under which the item would be accepted was decided. As can be seen from Table 2.5, four of 34 items were cross-loaded on more than one factor. Item 20 was loaded on both factor three with a factor loading of .39 and factor four with a factor loading of .38. This item was kept under factor four considering the content of the item and its original factor loading. Moreover, with the addition of item 20 to the factor four, the alpha coefficient of this factor did not change (.87); and as for the factor three, by the exclusion of this item, alpha coefficient of this factor increased from .87 to .89. Thus, these findings also supported the decision of keeping item 20 under factor four. Similarly, item 9 had cross loadings on both factor four with a factor loading of .34 and factor five with a factor loading of .29. Considering the content of the item and

its original factor loading, this item was decided to be kept under factor five even though it had a loading under .30 under this factor. Moreover, with the addition of item 9 to the factor five, the alpha coefficient of this factor increased from .73 to .75; and as for the factor four, by the exclusion of this item, alpha coefficient of this factor increased from .85 to .87. Thus, these findings also supported the decision of keeping item 9 under factor 5. Furthermore, although item 5 was loaded on factor one with a factor loading of .39, it was kept under factor five with a factor loading of .26 even though it had a loading under .30 under this factor given the content of the item and its original factor loading. Moreover, with the addition of item 5 to the factor five, the alpha coefficient of this factor increased from .73 to .75; and as for the factor one, by the exclusion of this item, alpha coefficient of this factor did not change (.89). Thus, these findings also supported the decision of keeping item 5 under factor five. Lastly, item 34 had a loading of .28 on factor three, had a loading of -.28 on factor four even after reversion, and had a loading of .32 on factor five. In fact, content of the item seemed related to “understanding of emotions”. However, item 34 decreased the alpha coefficient from .78 to .75 when included into factor five. Therefore, item 34 was excluded from the DERS considering the results of the reliability analysis as well.

Out of the explained total variance, 31.32 % was explained by the first factor. Eight items (31, 28, 35, 36, 15, 16, 22, 30) were classified under this factor as in the original study and named as limited access to emotion regulation strategies (STRATEGIES). In addition to these items, item 23, which was loaded under factor 2 in original study, and item 3, which was loaded under factor 3 in original study, was also highly loaded on this first factor, thereby being kept under the first factor. The second factor in the present study, consisting five items, explained 7.93 % of the total variance. All of the items (25, 21, 29, 12, 11) were loaded on the same factor as in the original study and named as non-acceptance of emotional responses (NONACCEPTANCE). The third factor includes five items, explained 5.33 % of the total variance. All of the items (24, 14, 19, 27, 32) were loaded on the same factor as in the original study and named as impulse control difficulties (IMPULSE). The fourth factor consists of five items, explained 3.45 % of the total variance. All of the

items (18, 26, 13, 33, 20) were loaded on the same factor as in the original study and named as difficulties engaging in goal directed behavior (GOALS). Finally, the last factor explained 2.59 % of the total variance. Nine items (8, 6, 2, 7, 17, 34, 1, 5, 9) were classified under the last factor, which is the combination of lack of emotional awareness (AWARENESS) and lack of emotional clarity (CLARITY) factors of original scale, therefore named as lack of understanding of emotions. There may be no difference between being aware of emotional responses and having a clear understanding of the nature of these responses in adolescent sample as it occurs in adult sample.

Table 2. 5 *Factor Structure of the DERS*

Factors explained	% variance	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5
Factor 1 (STRATEGIES)	31.32 %					
31. When I am upset, I believe that wallowing in it is all I can do.		.82	-.04	.02	-.17	-.12
35. When I am upset, it takes me along time to feel better.		.76	-.03	.05	-.02	-.11
28. When I am upset, I believe that there is nothing I can do to make myself feel better.		.71	.06	.12	-.11	-.07
36. When I am upset, my emotions feel overwhelming.		.70	-.07	.11	.08	-.15
15. When I am upset, I believe that I will remain that way for a long time.		.64	.04	-.06	.12	.01
23. When I am upset, I feel like I am weak.		.62	.14	-.11	.06	-.03
16. When I am upset, I believe that I will end up feeling very depressed.		.61	-.00	.11	.06	-.05
30. When I am upset, I start to feel very bad about myself.		.60	.17	-.09	.07	-.01
22. When I am upset, I know that I can find a way to eventually feel better.*		.53	-.17	.23	-.22	.26
3. I experience my emotions as overwhelming and out of control.		.42	-.03	.03	.16	.06
Factor 2 (NON-ACCEPTANCE)	7.93 %					
25. When I am upset, I feel guilty for feeling that way.		.08	.84	.02	-.06	.03
21. When I am upset, I feel ashamed with myself for feeling that way.		.15	.77	.01	-.11	.04
12. When I am upset, I become embarrassed for feeling that way.		-.04	.72	.06	-.05	.12
29. When I am upset, I become irritated with myself for feeling that way.		.01	.70	-.01	.15	-.02
11. When I am upset, I become angry with myself for feeling that way.		-.17	.46	-.01	.27	-.02
Factor 3 (IMPULSE)	5.33 %					
24. When I am upset, I feel like I can remain in control of my behaviors.*		-.06	-.07	.65	.13	.09
14. When I am upset, I become out of control.		-.03	.14	.63	.13	.10
19. When I am upset, I feel out of control.		.16	.13	.61	.08	.00
32. When I am upset, I lose control over my behaviors.		.27	.06	.58	.01	.03
27. When I am upset, I have difficulty controlling my behavior.		.13	.15	.58	.13	.04

Table 2.5 *Factor Structure of the DERS, (continued)*

Factors explained	%variance	Factor 1	Factor 2	Factor 3	Factor 4	Factor 5
Factor 4 (GOAL)						
	3.45 %					
20. When I am upset, I can still get things done.*		.03	-.24	.39	.38	-.01
18. When I am upset, I have difficulty focusing on other things.		-.04	.01	.19	.76	-.09
13. When I am upset, I have difficulty getting work done.		-.17	.13	.26	.69	-.04
26. When I am upset, I have difficulty concentrating.		.03	.03	.20	.66	-.08
33. When I am upset, I have difficulty thinking about anything else.		.17	-.04	.27	.49	-.11
Factor 5 (UNDERSTANDING)						
	2.59 %					
9. I am confused about how I feel.		.30	.08	-.25	.34	.29
8. I care about what I am feeling.*		-.01	.11	.07	-.14	.74
6. I'm attentive to my feelings.*		-.06	.04	.05	-.03	.70
2. I pay attention to how I feel.*		-.14	.12	.09	-.03	.69
7. I know exactly how I am feeling.*		.15	-.13	-.04	.26	.57
1. I'm clear about my feelings.*		.16	-.13	-.12	.31	.48
17. When I am upset, I believe that my feelings are valid and important.*		-.21	.04	.06	-.12	.48
5. I have difficulty making sense out of my feelings.		.39	-.01	-.08	.22	.26

*reverse item

2.3.2.2 Reliability Analysis for the DERS

The reliability of the DERS was assessed by three methods.

2.3.2.2.1 Internal Consistency

In order to check the internal consistency of the DERS with the five-factor solution obtained in the current study, Cronbach's alpha coefficients were computed. The Turkish version of the DERS was found to have a Cronbach's alpha coefficient of .93, which was considerably good and similar to the internal consistency of the original version of the scale. The subscales of the DERS revealed considerably high internal consistency with alpha coefficients ranging from .78 to .89. The Cronbach's alpha values of DERS and its subscales are presented in Table 2.6.

Table 2. 6 *Cronbach's alpha Values for DERS Total and Subscales*

	# of items	Cronbach's alpha Coefficients
Goal	5	.87
Impulse	5	.89
Non-acceptance	5	.82
Strategies	10	.89
Understanding	8	.78
Total	33	.93

2.3.2.2.2 Test-Retest Reliability

Test-retest correlation coefficients for an interval of three to four weeks were obtained for a subset of the sample ($N = 85$). As summarized in Table 2.7, the test-retest correlation coefficients of the five subscales (ranging from $r_s = .58$ to $.79$) and the total score of DERS ($r = .77$) were at significant levels, and indicate strong test-retest reliability.

Table 2. 7 *Test-retest Reliability of DERS Total and Subscales*

<i>Test-retest Reliability for Adolescent (N = 85)</i>	
Goal	.78*
Impulse	.64*
Non-acceptance	.66*
Strategies	.79*
Understanding	.58*
Total	.77*

* $p < .001$

2.3.2.2.3 Concurrent Validity of the DERS

In order to examine the concurrent validity of the DERS and its subscales, correlation between DERS total, its subscales and Positive Affect and Negative Affect, subscales of ERQ, and also subscales of SDQ were computed.

2.3.2.2.3.1 Correlations with PANAS

Consistent with expectation, there were negative correlations between total DERS and Positive Affect ($r = -.30, p < .001$) and between the subscales of the DERS and Positive Affect ranging from $r = -.18 (p < .01)$; to $r = -.38 (p < .001)$; except for the NONACCEPTANCE subscale which exhibited no significant correlation ($r = .04, p > .05$). On the contrary, there were positive correlations between total DERS and Negative Affect ($r = .52, p < .001$) and between the subscales of the DERS and Negative Affect ranging from $r = .22$ to $r = .52 (ps < .001)$. The results of the correlation analysis are presented in Table 2.8.

Table 2. 8 *Pearson Correlations between DERS Total, its subscales, and PANAS*

	DERS Total	Strategy	Impulse	Non-acceptance	Understanding	Goal
PA	-.30**	-.29**	-.18*	.04	-.38**	-.22**
NA	.52**	.52**	.42**	.22**	.30**	.40**

Note. PA = Positive Affect, NA = Negative Affect.

* $p < .01$, ** $p < .001$

2.3.2.2.3.2 Correlations with ERQ

Consistent with expectation, there were negative correlations between total DERS and reappraisal subscale of ERQ ($r = -.27, p < .001$) and between the subscales of the DERS and reappraisal ranging from $r = -.14 (p < .05)$; to $r = -.29 (p < .001)$; except for the Non-acceptance subscale which exhibited no significant correlation ($r = .03, p > .05$). On the contrary, there was positive correlation between non-acceptance subscale of DERS and suppression subscale of ERQ ($r = .15, p < .01$). The results of the correlation analysis are presented in Table 2.9.

Table 2.9 Pearson Correlations between DERS Total, its subscales, and ERQ Subscales; Reappraisal and Suppression

	DERS Total	Strategy	Impulse	Non-acceptance	Understanding	Goal
R	-.27***	-.29***	-.26***	.03	-.26***	-.14*
S	.07	.05	.05	.15**	-.04	.07

Note. R: Reappraisal, S: Suppression

* $p < .05$, ** $p < .01$, *** $p < .001$

2.3.2.2.3.3 Correlations with SDQ

Total DERS score exhibited positive correlations with SDQ total difficulties score ($r = .54, p < .001$), emotional symptom ($r = .57, p < .001$), and inattention problems ($r = .30, p < .001$) subscales of the SDQ, and it had negative correlation with prosocial behavior ($r = -.17, p < .001$) subscale of the SDQ; for conduct problems subscale of the SDQ there was no significant correlation ($r = .09, p > .05$). In addition to that, the result of correlation analysis revealed that emotional symptom subscale of SDQ seemed to exhibit the highest positive correlations with subscales of DERS, ranging from $r = .21$ to $r = .62 (ps < .001)$. On the other hand, conduct problems subscale of SDQ seemed to exhibit no significant correlations with subscales of DERS; except for the IMPULSE subscale of DERS ($r = .13, p < .05$). The results of the correlation analysis are presented in Table 2.10.

Table 2. 10 Pearson Correlations between DERS Total, its subscales, and SDQ Total Difficulties and Its Subscales

Variables	SDQ Total difficulties	Emotional symptoms	Prosocial Behaviors	Conduct Problems	Inattention Problems
DERS Total	.52***	.57***	-.24***	.14*	.25***
Strategy	.54***	.62***	-.14*	.13*	.22***
Impulse	.40***	.40***	-.22***	.17**	.20***
Nonacceptance	.24***	.21***	-.03	.15**	.13*
Understanding	.28***	.35***	-.34***	.03	.18**
Goal	.42***	.45***	-.15**	.06	.24***

* $p < .05$, ** $p < .01$, *** $p < .001$

2.3.2.2.4 Criterion Validity of the DERS

Possible gender differences were analyzed before the criterion validity analysis. The t -test result revealed that there was a significant difference between male and female adolescent on the total DERS scores ($t [306] = 2.11, p < .05$). As can be seen in Table 2.11, for the subscales of the DERS, MANOVA results indicated significant main effect of gender (Multivariate $F [5, 302] = 6.22, p < .001$, Wilks' $\Lambda = 0.91, \eta^2 = .09$). To study which of the DERS subscales were responsible for the significant differences between males and females; univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as significant. This analysis indicated significant gender difference only for strategies ($F [1, 306] = 7.63, p < .01, \eta^2 = .02$) and goal subscales ($F [1, 306] = 10.05, p < .01, \eta^2 = .03$). Results indicated that female adolescents ($M = 2.27$) reported significantly more difficulties in getting access to emotion regulation strategies as compared to males ($M = 2.02$). In addition to that, female adolescents ($M = 3.19$) reported significantly more difficulties engaging in goal directed behaviors when distressed as compared to males ($M = 2.85$).

Table 2. 11 MANOVA Results for Gender in terms of DERS Subscales

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
DERS	6.48**	5, 292	0.46	.10		
Strategies		1, 296			6.94*	.02
Impulse		1, 296			0.02	.00
Nonacceptance		1, 296			1.75	.01
Understanding		1, 296			6.51	.02
Goal		1, 296			9.81*	.03

* $p < .01$, ** $p < .001$

The criterion validity of the DERS was examined through two separate One-Way MANOVAs. For these analyses, perceptions of high, medium, and low emotion regulation difficulty level of adolescents were identified according to the scores obtained from DERS Total. Three difficulty levels were determined in order to see group differences. Scores below the 33th percentile (i.e., average scores below 1.97) were defined as “low emotion regulation difficulty” and scores between 33th and 66th percentile (i.e., scores between 1.97 and 2.48) were defined as “medium emotion regulation difficulty”, and above 66th percentile (i.e., scores above 2.48) were defined as “high emotion regulation difficulty”. The mean DERS Total score was 1.66 ($SD = 0.22$) for the “low emotion regulation difficulty group” and there were 102 participants in that group; the mean DERS Total score was 2.22 ($SD = 0.13$) for the “medium emotion regulation difficulty group” and there were 100 participants in that group; and the mean DERS Total score was 2.98 ($SD = 0.38$) for the “high emotion regulation difficulty group” and there were 106 participants in that group. First, overall differences among low, medium, and high responses on DERS Total in terms of Positive Affect and Negative Affect were examined. As can be seen in Table 2.12, MANOVA results revealed a significant group difference (Multivariate $F [4, 606] = 22.98$, $p < .001$, Wilks' $\Lambda = 0.75$, $\eta^2 = .13$).

To study which of the affect styles were responsible for the significant differences among three groups; univariate analyses with Bonferroni correction were performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as significant. These analyses indicated significant group differences for

both positive affect ($F [2, 304] = 9.86, p < .001, \eta^2 = .06$) and negative affect ($F [2, 304] = 45.10, p < .001, \eta^2 = .23$). Pair-wise comparisons conducted with Tukey indicated that, adolescents with low DERS Total score ($M = 3.88$) were significantly higher on positive affect as compared to those with medium ($M = 3.58$) and high DERS total scores ($M = 3.43$). However, there was no significant difference between adolescents getting medium DERS Total score and those getting high DERS Total score in terms of positive affect (as shown in Figure 2.1). On the contrary, it was found that adolescents with high DERS Total score ($M = 2.51$) were significantly higher on negative affect as compared to those with medium ($M = 2.04$) and low DERS Total score ($M = 1.63$). In addition to that, adolescent with medium DERS Total score were also significantly higher on negative affect than those with low DERS Total score (as shown in Figure 2.2).

Table 2. 12 MANOVA Results for low, medium, and high difficulty groups in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	22.98*	4, 608	0.75	.13		
PA		2, 304			9.86*	.06
NA		2, 304			45.10*	.23

Note. PA: Positive Affect, NA: Negative Affect

* $p < .001$

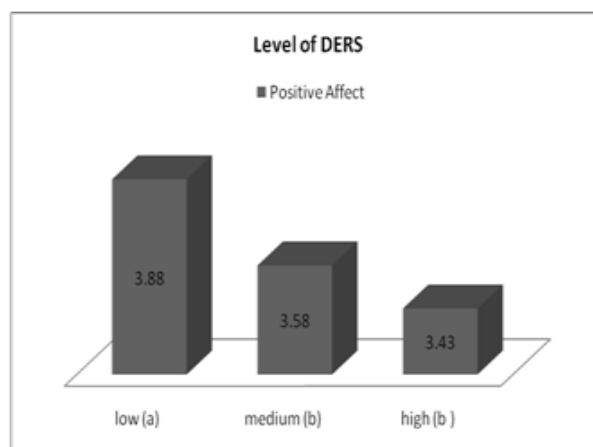


Figure 2. 1 Mean Scores of Emotion Regulation Difficulty groups based on DERS in Positive Affect

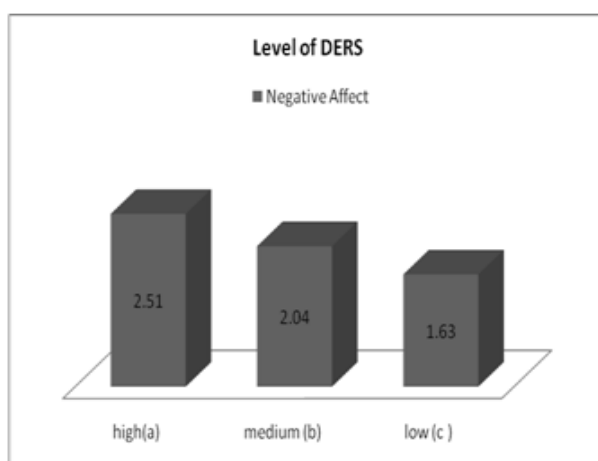


Figure 2. 2 Mean Scores of Emotion Regulation Difficulty groups based on DERS in Negative Affect

Similarly, overall differences among low, medium, and high responses on DERS-Total in terms of SDQ subscales were examined. As can be seen in Table 2.13, the MANOVA results revealed a significant group difference (Multivariate $F [8, 590] = 14.28, p < .001, Wilks' \Lambda = 0.70, \eta^2 = .16$). To study which of the SDQ subscales were responsible for the significant differences among three groups, Bonferroni corrected univariate F-tests were performed, thus for univariate analysis only the alpha scores lower than .0125 were accepted as significant. These analyses indicated significant group differences for emotional symptoms ($F [2, 298] = 53.41, p < .001, \eta^2 = .26$), for prosocial behaviors ($F [2, 298] = 6.09, p < .01, \eta^2 = .04$), and for inattention problems ($F [2, 298] = 6.03, p < .01, \eta^2 = .04$). Pair-wise comparisons conducted with Tukey indicated that, adolescents with high DERS Total score ($M = 0.83$) were significantly higher on emotional symptoms as compared to those with medium ($M = 0.51$) and low DERS Total score ($M = 0.29$). In addition to that, adolescent with medium DERS Total score were significantly higher on emotional symptoms than those with low DERS Total score (as shown in Figure 2.3). Similarly, adolescents with high DERS Total score ($M = 1.14$) were significantly higher on inattention problems as compared to those with medium ($M = 1.07$) and low DERS total score ($M = 0.93$). However, there was no significant difference between adolescents having medium DERS Total score and those having low DERS Total score in terms of inattention problems (as shown in Figure 2.4). On the contrary,

adolescents with high DERS Total score ($M = 1.45$) were significantly lower on prosocial behaviors as compared to those with medium ($M = 1.58$) and low DERS total score ($M = 1.61$). However, there was no significant difference between adolescents having medium DERS Total score and those having low DERS Total score in terms of prosocial behaviors (as shown in Figure 2.5).

Table 2. 13 MANOVA Results for low, medium, and high difficulty groups in terms of SDQ

	Multi. F	df	Wilks Λ	Multi. Eta ²	Univariate F	Univariate Eta ²
SDQ	14.28**	8, 590	0.70	.16		
Emotion		2, 298			53.41**	.26
Prosocial		2, 298			6.09*	.04
Conduct		2, 298			3.63	.02
Inattention		2, 298			6.03*	.04

* $p < .01$, ** $p < .001$

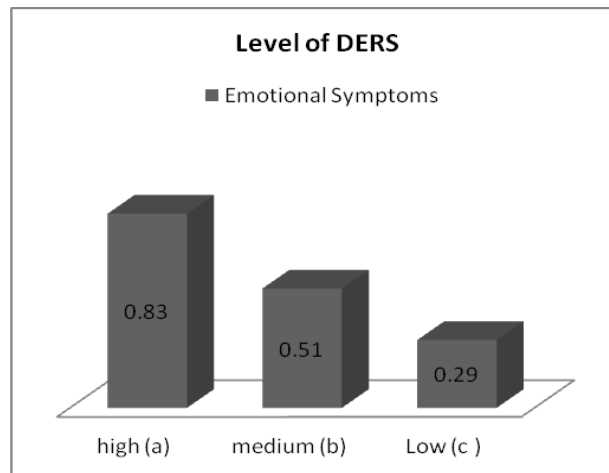


Figure 2. 3 Mean Scores of Emotion regulation Difficulty groups based on DERS in Emotional Symptoms

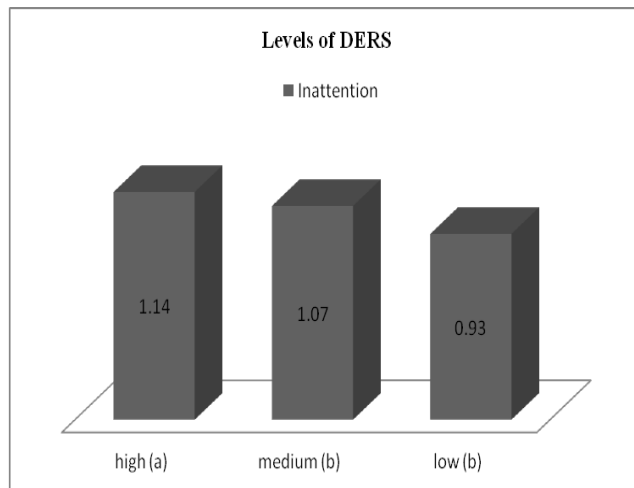


Figure 2. 4 Mean Scores of Emotion regulation Difficulty groups based on DERS in Inattention

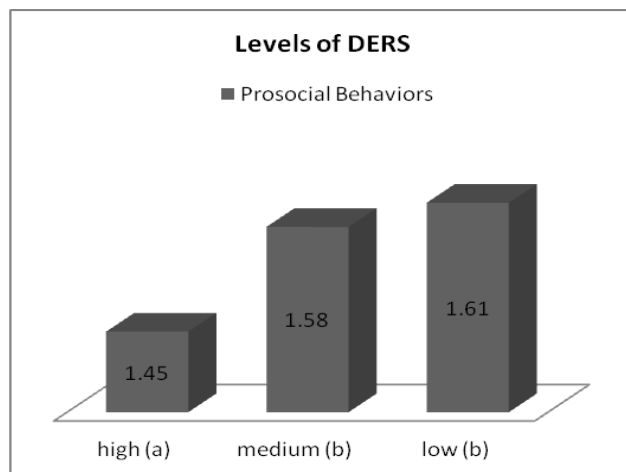


Figure 2. 5 Mean Scores of Emotion regulation Difficulty groups based on DERS in Prosocial Behaviors

Finally, overall differences among low, medium, and high responses on DERS Total in terms of Reappraisal and Suppression were examined. As can be seen in Table 2.14, MANOVA results revealed a significant group difference (Multivariate $F [4, 576] = 7.25, p < .001, Wilks' \Lambda = 0.91, \eta^2 = .05$). To study which of the emotion regulation style were responsible for the significant differences among three groups; univariate analyses with Bonferroni correction were performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as significant. These analyses indicated significant group differences only for both

reappraisal ($F [2, 289] = 9.48, p < .001, \eta^2 = .06$). Pair-wise comparisons conducted with Tukey indicated that, adolescents with low DERS Total score ($M = 4.28$) were significantly higher on reappraisal as compared to those with medium ($M = 3.85$) and high DERS total scores ($M = 3.72$). However, there was no significant difference between adolescents getting medium DERS Total score and those getting high DERS Total score in terms of positive affect (as shown in Figure 2.6).

Table 2. 14 MANOVA Results for low, medium, and high difficulty groups in terms of ERQ subscales; Reappraisal and Suppression

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
ERQ	7.25*	4, 576	0.91	.05		
R		2, 289			9.48*	.06
S		2, 289			1.29	.01

Note. ERQ: Emotion Regulation Questionnaire, R: Reappraisal, S: Suppression
* $p < .001$

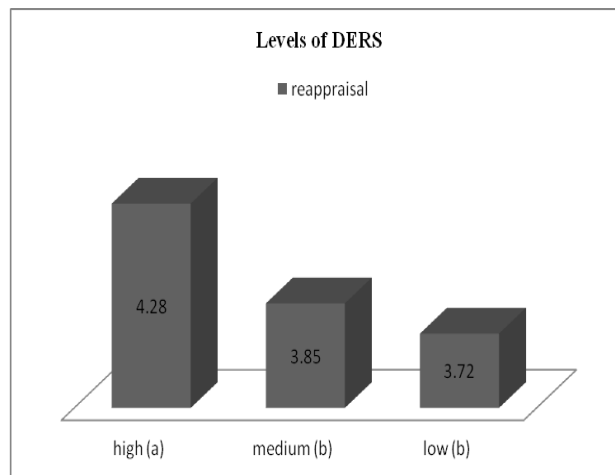


Figure 2. 6 Mean Scores of Emotion regulation Difficulty groups based on DERS in Reappraisal

2.4 Discussion

In the present study, the results provide preliminary evidence for the utility of the DERS as a measure of emotion regulation difficulties in adolescents. Internal consistency and test-retest reliability analyses indicated satisfactory results. As for the validity studies, both concurrent and criterion validity analyses revealed adequate outcomes. In order to examine the factor structure of the DERS, factor analysis using principle axis factoring method of extraction with promax oblique rotation was used as in the original version of the scale (Gratz & Roemer, 2004). Based on the scree-plot and item distribution, a five-factor structure was preferred, and these factors totally accounted for 50.62 % of the total variance. However, factor analyses with adult samples revealed a six factor solution accounting for 55.68 % of the variance in the original study (Gratz & Roemer, 2004) and accounting for 62.39 % of the variance in Turkish version of DERS (Rugancı & Gençöz, 2010). It is seen that items of four factors in the present study, namely; STRATEGIES, NONACCEPTANCE, IMPULSE, and GOALS are almost identical with those in both original study and Turkish version of the DERS. Only two items were found to have different patterns when compared to the original factor structure. Item 3, “I experience my emotions as overwhelming and out of control” and item 23 “when I am upset, I feel like I am weak” have been loaded under the strategy factor, indicating that overwhelming nature of emotion and one’s negative perception of himself/herself inhibits the ability to develop effective strategies. Therefore, these two factors were kept under the strategy factor. Except for these two items, items in previously explained four factors were found to have similar patterns when compared to original factor structure. However, for the last factor, factor analysis indicated that, in the present study, Turkish adolescents were not able to differentiate AWARENESS and CLARITY as in the studies conducted with adults. That is, result of factor analyses revealed that items of AWARENESS and CLARITY factors in adult studies were classified under the one factor in Turkish adolescent sample. One possible explanation for this result might be that clarifying emotions requires distinguishing emotions, which is a cognitive process, and adolescents may not be mature enough to differentiate awareness and clarity from each other. Actually, at the very beginning

Gratz and Roemer (2004) hypothesized that they would find four factors. However, they reached a six factor solution. A general “understanding of emotions” component was broken into “awareness” and “clarity” factors. Therefore, as Gratz and Roemer (2004) initially suggested, it is possible to say that adolescents are not mature enough to differentiate awareness and clarity from each other and they have general understanding of emotions. However, Neuman et al. (2010) conducted a study with adolescents and replicated factor structure of the DERS in adults by using a confirmatory factor analysis (CFA) in Mplus 4.21. Since the present study was conducted by using principle axis factoring method of extraction with promax oblique rotation in SPSS (as in the original study), the differences between two adolescent samples might be occurred due to different choice of analyses. In addition, this inconsistency between the previous studies and the present study might point out some cultural differences, which needs further investigation for more accurate interpretation or some problems related to the Turkish translation of the items. Furthermore, the other explanation might be that empirical studies consistently indicates the lack of association between awareness subscale of the DERS and some psychologically related constructs (Tull et al., 2007; Tull & Roemer, 2007). Therefore, it is possible to say that although the result of factor analyses with adult samples indicates awareness as a separate factor; this subscale does not have a discriminative power by itself as other subscales of the DERS do.

Regarding the reliability results, it is found that the DERS and its subscales were internally consistent in the Turkish adolescent sample and it confirms the original study (Gratz & Roemer, 2004). In addition to that, reliability values of factors and total DERS are higher than those found in the study conducted by Neuman et al. (2010) with adolescent sample. Moreover, the test retest reliability of the adolescent sample were conducted on a relatively larger sample (i.e., N=85) compared to adult samples in previous studies. It was revealed that test retest reliability of the DERS was good but slightly lower than the adult samples (Gratz & Roemer, 2004; Rugancı & Gençöz, 2010).

Considering the concurrent validity results, it was found that DERS is positively correlated with negative affect and subscales of SDQ which are emotional symptoms and inattention problems. On the contrary, DERS has negative correlation with positive affect and prosocial behavior subscale of SDQ. Studies indicate that emotion regulation difficulties are associated with both internalizing symptoms (Garnefski, Kraaij, & Etten, 2005) and conduct problems (Beauchaine, Gatzke-Kopp, Mead, 2007) among adolescents. Similarly, Neuman et al. (2010) concluded that DERS is strongly associated with internalizing and externalizing symptoms. Although it is not sufficient, these two measures, namely; PANAS and SDQ, were used as measures of internalizing and externalizing symptoms. Therefore, it is possible to say that findings of the present study are consistent with the results of previous studies (Garnefski et al., 2005; Neuman et al., 2010). In addition to that, the results of the present study indicated that only impulse and non-acceptance subscales of DERS were significantly correlated with conduct symptoms subscale of SDQ. Variability in the correlation of DERS's subscales with conduct symptoms subscale of SDQ is explained by Garnefski's suggestion that emotion regulation difficulties may play a greater role in adolescent internalizing problems than externalizing problems. However, still, since measures of present study for internalizing and externalizing symptoms are not sufficient, further investigation is needed for accurate interpretation.

Considering the gender effects, the results revealed that female adolescents reported significantly higher difficulties in getting access to emotion regulation strategies and engaging in goal directed behaviors when distressed as compared to male adolescents. Although Neumann et al. (2010) found gender differences in five subscales of the DERS, namely; strategy, goal, non-acceptance, awareness, and clarity, present study was able to confirm strategy and goal subscales of the DERS. One possible explanation for this finding might be the number of factors found in the present study. That is, Neumann et al (2010) found that while males have more difficulty in emotional awareness, females have more difficulty in emotional clarity subscales. However, in the present study, these two separate factors were combined in lack of emotional understanding factor. Moreover, findings that female

adolescents may have less access to effective strategies than male counterparts are consistent with findings that adolescent females score higher on measures of maladaptive coping than adolescent males (Hampel & Petermann, 2006).

As for the criterion validity results, it is found that the groups having low, medium and high emotional difficulty were successfully differentiated on the basis of positive affect, negative affect, and subscales of SDQ. In other words, compared to those having low emotional difficulty, adolescents having high emotional difficulty had significantly more negative affect, inattention problems, and emotional symptoms. Moreover, these adolescent had less positive affect. Therefore, in general, the results of the current study supported the psychometric characteristics of the DERS in a Turkish adolescent sample. The DERS which covers multiple dimensions of emotion regulation seems to be a promising instrument for identifying the emotion regulation features of some clinically relevant constructs.

CHAPTER III

MAIN STUDY:

FACTORS ASSOCIATED WITH ADOLESCENTS' EMOTION REGULATION PROCESS AND ITS CONTRIBUTION TO PSYCHOLOGICAL DISTRESS OF ADOLESENTS

3.1 Introduction

As stated in the literature review part, adolescence is a very important developmental period for the study of emotion regulation. Adolescents are expected to regulate their emotions adaptively without the assistance of adults who provide guidance in childhood (Steinberg & Avenevoli, 2000; Steinberg et al., 2006). Still, adolescents continue to look at their parents' affect and emotional cues in order to develop their emotion regulation abilities (Campos et al., 1989; Morris et al., 2007). Studies point out the relation between parents' psychological problems and children's emotion regulation difficulties. However, these studies are limited to parental depression. For instance, Garber, Braafladt, and Zeman (1991) administered sadness-eliciting vignettes to both depressed and non-depressed mothers and their 8-13 years old children and asked their emotion regulation strategies. Findings indicated that as compared to non-depressed mothers and children, depressed mothers and their children reported fewer and poorer quality of emotion regulation strategies. Thus, in the current study we examined general maternal psychopathology and its relation to adolescents' emotion regulation difficulties.

Exploring emotion regulation abilities of parents are very informative to learn about adolescents' emotion regulation abilities. When we look at the literature, we realized that previous studies have focused largely on parents' coaching behaviors and parents' reactions to children's emotional expression. However, limited studies

have examined the role of parents' own emotional regulation on children's emotion socialization, especially in late childhood and adolescence (Katz et al., 2012; Morris et al., 2007). As example, Bariola, Hughes, and Gullone (2012) examined the direct relation between mothers' and adolescents' emotion regulation strategy use and found that maternal and child suppression use but not cognitive reappraisal use was related. However, as the authors concluded, suppression and cognitive reappraisal are just two of the many possible strategies used to regulate emotions (John & Gross 2004). Thus, for a more comprehensive understanding of the relation that exists between mother and adolescent emotion regulation, the DERS, a multi-dimensional construct assessing different facets of emotion regulation (Gratz & Roemer, 2004), was used in the current study.

Information about children's emotional and behavioral problems generally gathered from children themselves and their parents (Kendall & Flannery-Schroeder, 1995). This multi-informant approach provides information about children from different perspectives and across different situations, which cannot be gathered from one informant alone (Hughes & Gullone, 2010). Therefore, the main study includes both mothers' reports and adolescents' own reports on adolescents' emotion regulation. Likewise, it consists of both mothers' own reports and adolescents' reports for maternal rearing behaviors. Through this way, it will be possible to evaluate the agreement and discrepancies between mother and adolescent's reports.

In the main study, before testing the main hypotheses, preliminary analyses were conducted to examine how demographic variables (i.e., type of school, gender, education levels of parents, income, and number of siblings) make distinction on the measures of the study. It is important to investigate the differences between adolescents going to Anatolian high school and those going to regular high school. Anatolian High Schools refers to public or state high schools in Turkey that admit their students based on the Nationwide High School Entrance score, which might be the indication of academic achievement at school and studies found a negative association between psychological distress measures and academic achievement at schools (e.g., Fergusson & Woodward, 2002; Forsterling & Binser, 2002; Reinherz,

Frost, & Pakiz, 1991; Shahar et al., 2006). Furthermore, going Anatolian High school might be positively associated with the resources available at home, the academic and achievement views of parents, and socio-economic status of the family. Therefore, type of school might be a risk factor for adolescents' psychological well-being. A lot of studies were conducted in order to examine the effects of gender, parental education levels, income and number of siblings and it was concluded that these demographic variables were significantly associated with adolescents' psychological adjustment (e.g., Kislitsyna, 2010). Therefore, similar to the previous studies, distinctions made by these demographic variables on measures of the main study were examined in a Turkish adolescent sample.

In summary, difficulties in emotion regulatory abilities are known to contribute to the development of internalizing and externalizing psychological disorders (Southam-Gerow & Kendall, 2002). Therefore, identifying factors that influence the development of emotion regulation may be integral to the prevention and treatment of psychopathology. In the current study factors associated with adolescents' emotion regulation were divided into two categories; familial factors and individual factors. Familial factors consist of mothers' own emotion regulation difficulties, their levels of psychopathology and personality traits, and maternal rearing behaviors towards their children. Moreover, individual factors include basic personality traits of adolescents.

3.2 Method

3.2.1 Participants

Five hundred and ninety five first-grade high school students from eight different high schools, four of which were regular high schools and four of which were Anatolian high schools, all located in Ankara and mothers of those students participated in this study. Mean age of the student sample was 15.19 (SD = 0.49) ranging from 14 to 17. Of the participants, 300 were females (50.4 %) and 295 were males (49.6 %). Three hundred and sixty five mothers of the student sample (61.34 %) returned the completed questionnaires. Mean age of mothers was 41.86 (SD = 5.02) ranging between 32 and 61.

Data were collected from 346 (58.2 %) first-grade high school students and 249 (41.8 %) first-grade Anatolian high school students. Out of these participants, 85 (14.4 %) were from Hacı Ömer Tarman Anatolian High School, 86 (14.3 %) were from Aydınlikevler Anatolian High School, 46 (7.7 %) were from Mehmet Emin Resulzade Anatolian High School, 32 (5.4 %) were from Reha Alemdaroğlu Anatolian High School, 96 (16.1 %) were from Kalaba High School, 91 (15.3 %) were from Fatih Sultan Mehmet High School, 88 (14.8 %) were from Ömer Seyfettin High School, and 71 (11.9 %) were from Pursaklar High School.

Adolescents reported that their fathers' level of education is higher than that of their mothers. Regarding fathers' education levels, 2 (0.3 %) were literate but did not complete primary education, 108 (18.3 %) were primary school, 85 (14.4 %) were secondary school, 164 (27.8 %) were high school, 46 (7.8 %) were a two year university graduates, 154 (26.1 %) were a four year university graduates, and 30 (5.1 %) were post-graduates. With respect to the education levels of the mothers, 6 (1 %) were literate but did not complete primary education, 180 (30.8 %) were primary school, 85 (14.5 %) were secondary school, 154 (26.3 %) were high school, 34 (5.8 %) were a two year university graduates, 118 (20.2 %) were a four year university graduates, and 8 (1.4 %) were post-graduates.

Adolescents rated their family income on a four point scale and 17 (3 %) participants reported lower income (500 TL and below), 210 (37.5 %) reported

slightly lower income (between 500 TL - 1500 TL), 222 (39.6 %) reported a moderate level of income (between 1500 TL - 3000 TL), and 111 (19.8 %) reported higher level of family income (3000 TL and above).

Among all participants, 71 (12 %) had no sibling, 280 (47.5 %) had one sibling, 178 (30.2 %) had two siblings, 44 (7.5 %) had three siblings, 17 (2.9 %) had more than three siblings. Table 3.1 illustrates the demographic information on both adolescents and their mothers.

Table 3.1 *Demographic Characteristics of the Sample*

Demographic Variable	Frequency/ Mean		Percentage/ Standard Deviation	
<u>Gender</u>	595			
Female	300		50.4 %	
Male	295		49.6 %	
Age (Years)	15.19		0.49	
	<u>Students</u>	<u>Mothers</u>	<u>Students</u>	<u>Mothers</u>
<u>Anatolian High Schools</u>	249	169	41.8 %	46.3 %
Hacı Ömer Tarman	85	49	14.4 %	13.4 %
Mehmet Emin Resulzade	46	29	7.7 %	7.9 %
Aydınlıkevler	86	62	14.3 %	17.0 %
Reha Alemdaroğlu	32	29	5.4 %	7.9 %
<u>Regular High Schools</u>	346	196	58.2 %	53.7 %
Ömer Seyfettin	88	38	14.8 %	10.4 %
Fatih Sultan Mehmet	91	62	15.3 %	17.0 %
Kalaba	96	53	16.1 %	14.5 %
Pursaklar	71	43	11.9 %	11.8 %
Mothers (participated)	365		61.34 %	
Age of Mothers	41.86		5.02	
<u>Mother's level of education</u>				
Literate	6		1 %	
Primary School	180		30.8 %	
Secondary School	85		14.5 %	
High School	154		26.3 %	
Two Year University	34		5.8 %	
University	118		20.2 %	
Postgraduate	8		1.4 %	

Table 3.1 *Demographic Characteristics of the Sample (continued)*

Demographic Variable	Frequency	Percentage
Father's level of education		
Literate	2	0.3 %
Primary School	108	18.3 %
Secondary School	85	14.4 %
High School	164	27.8 %
Two Year University	46	7.8 %
University	154	26.1 %
Post-graduate	30	5.1 %
Family Income		
500 TL below	17	3 %
500 TL-1500 TL	210	37.5 %
1500 TL-3000 TL	222	39.5 %
3000 TL above	111	19.8 %

3.2.2 Measures

The following measures were applied to the adolescents and their mothers. Adolescents completed demographic information, difficulties in emotion regulation scale, perceived parental rearing behavior questionnaire, strength and difficulties questionnaire, childhood depression inventory, basic personality traits inventory and positive and negative affect schedule. In addition to the detailed demographic information, mothers also filled out the questionnaire set including the difficulties in emotion regulation scale both for themselves and for their children, parental rearing behavior questionnaire, basic personality trait inventory, and brief symptom inventory for themselves.

3.2.2.1 Demographic information:

The first part of the questionnaire sets for adolescents and mothers were comprised of demographic questions. In adolescent questionnaire set, gender, school, class, birthday, number of sibling, and mother and father educational status were asked. Similarly, at the first part of the questionnaire set, mothers completed demographic questions about their age, educational status, family background, marital status, and family income.

3.2.2.2 Parental Rearing Behaviors Questionnaire (s-EMBU)

Both adolescents and their mothers were given a measure of parental rearing behavior questionnaire, the short form of *Egna Minnen Beträffande Uppfostran* (My Memories of Upbringing; EMBU; Arrindell et al., 1999). The original scale consists of three subscales (Rejection, Emotional Warmth, and Protection) with 7, 6, and 9 items respectively (plus 1 unscaled item), which were developed from the original 81-item version. The factorial and construct validity and reliability of this s-EMBU were examined among samples of 2442 students from Italy, Hungary, Guatemala, and Greece (Arrindell et al., 1999). The data were presented for the four national groups separately. The 22-item s-EMBU is recommended as a reliable functional equivalent to the 81-item early EMBU.

Sümer, Selçuk, and Günaydın (2006) modified s-EMBU for Turkish family context and developed a 29-item questionnaire. Items of emotional warmth (e.g., “I felt that warmth and tenderness existed between me and my parents”) and of rejection (e.g., “It happened that my parents gave me more corporal punishment than I deserved”) subscales of the original form were retained. However, new items were added to the overprotection subscale (e.g., “My parents did not allow me to move away from neighborhood while playing”). In addition to that, a new subscale called parental comparison (e.g., “My parents compared my school performance with my friends”) was created. Internal consistency coefficients of subscales were found to be satisfactory.

In the present study, mothers rated their own maternal rearing styles and adolescents rated perceived maternal rearing styles. Adolescent and mother forms included the same statements with different wording. Internal reliability coefficients for adolescents’ report of maternal rearing styles were found to be .85 for warmth, .78 for rejection, .74 for overprotection, and .82 for comparison subscales. On the other hand, for mothers’ report of these own maternal rearing style, internal reliability coefficients were found to be .79 for warmth, .75 for rejection .81 for overprotection, and .82 for comparison subscales.

3.2.2.3 Strengths and Difficulties Questionnaire (SDQ)

Detailed information about the Strengths and Difficulties Questionnaire (SDQ; Goodman, 1997) has been given in the method section of Study 1. In the current study, internal consistency coefficient was found to be .68 for the total difficulties.

3.2.2.4 Difficulties in Emotion Regulation (DERS)

Detailed information about the Difficulties in Emotion Regulation Scale (DERS; Gratz & Roemer, 2004) has been given in the method section of Study 1. In the current study, both adolescents and mothers were given DERS in order to assess their difficulties in emotion regulation. In addition to that, mothers were asked to rate their children's difficulties in emotion regulation. This form is called the perceived DERS in which the same statements were used with different wording (e.g., "my child is clear about his/her feelings", "my child takes into consideration what he/she feels").

In the current study, internal consistency coefficients were found to be .91 for the adolescent total DERS, .92 for the mother total DERS, and .93 for the perceived DERS.

3.2.2.5 Positive and Negative Affect Schedule (PANAS)

Detailed information about the Positive and Negative Affect Schedule (PANAS; Watson et al., 1988) has been given in the method section of Study 1. In the current study, internal consistency coefficients were found to be .81 and .83 for the positive and negative affect subscales, respectively.

3.2.2.6 Childhood Depression Inventory (CDI)

Adolescents were given Child Depression Inventory developed by Kovacs (1980/1981) to assess the depression levels of the children between ages 6 and 17. CDI is a 27 item self-report inventory assessing cognitive, motivational, affective, and somatic depression symptoms that occurred in the previous two weeks. Each item has 3 statements scored 0 through 2, as the scores get higher the level of depression symptoms

increase. Total scores vary between 0 and 54. For the healthy children between ages 8 and 14, the mean of the normative data was 9.1 with a standard deviation of 7. The alpha coefficient of the test was found as .86. The four-week test-retest reliability was .72.

CDI was adapted to Turkish population by Öy (1990). Three hundred and eighty children between 6 to 17 years-old participated for the reliability study. In the study, the one-week test-retest reliability coefficient was assessed to be .80. Fifty nine students participated in construct validity research. According to DSM-III diagnostic criteria, the correct diagnosis ratio of the CDI was found 84.75 %.

In the present study, the Cronbach alpha coefficient of the inventory was found to be .84.

3.2.2.7 Brief Symptom Inventory (BSI)

Mothers were given Brief Symptom Inventory developed by Derogatis (1992) It assesses different clinical symptoms and it is the short form of SCL-90 (Derogatis, 1977). The scale is a 53-item instrument, with a response range of 0 (not at all) to 4 (very much). It has nine subscales namely, somatization, obsessive-compulsive, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation, and psychoticism. Higher scores in subscales indicate the existence of higher levels of clinical symptoms. The reliability and validity studies of the BSI for Turkish samples were studied by Şahin and Durak (1994). In three different studies, Cronbach alpha coefficients were found to be between .95 and .96 for the Total scale and between .55 and .86 for the subscales (Sahin & Durak, 1994). Concurrent validity was examined by checking the correlations between the subscale scores and other related instruments and was found to be satisfactory. Results gathered from factor analysis indicated that the BSI had five subscales among Turkish samples. These were: anxiety, depression, negative self, somatization, and hostility (Sahin & Durak, 1994).

In the current study, the total scale score of the BSI was used to assess the severity of psychopathology of the mothers. For the total sample, the internal reliability of the BSI completed by the mothers as measured by Cronbach alpha was found to be .97.

3.2.2.8 Basic Personality Traits Inventory (BPTI)

Both adolescents and their mothers were given Basic Personality Traits Inventory (BPTI) developed by Gençöz and Öncül (2012) particularly for Turkish culture to measure the basic personality traits based on the five factor model of personality (McCrae & Costa, 2003; Peabody & Goldberg, 1989). They conducted a series of studies to develop BPTI. Firstly, 100 participants wrote the adjectives that they used to describe different people. 226 adjectives were determined among those written adjectives and List of Personality Traits was produced. Secondly, the List was administered to other 510 participants, who were asked to rate their own personality traits. After the data was examined with varimax rotated factor analysis, 45 items and 6 basic personality traits namely, , conscientiousness, agreeableness, neuroticism, and openness to experience, and negative valence, constituted the Basic Personality Traits Inventory. The item were rated from 1 (does not apply to me) to 5 (definitely applies to me). Lastly, BPTI were administered to 454 undergraduate students to test the psychometric properties. Internal consistency coefficient for each personality traits were found as follows: ; .89, Conscientiousness; .84, Agreeableness; .85, Neuroticism; .83, Openness to Experience; .80, and Negative Valence; .71. Test-retest reliability of 6 factors ranged from .71 to .84. For concurrent validity, correlation analyses between 6 factors of BPTI and various conceptually related questionnaires developed for Turkish culture was examined and found satisfactory validity.

In the present study, internal reliability coefficients for adolescents' basic personality traits found to be .76 for , .80 for conscientiousness, .82 for agreeableness, .81 for neuroticism, .76 for openness to experience, and .60 negative valence. Furthermore, internal reliability coefficients for mothers' basic personality traits found to be .82 for , .77 for conscientiousness, .82 for agreeableness, .81 for neuroticism, .68 for openness to experience, and .56 negative valence.

3.2.3 Procedure

Permission was given by the Ministry of National Education for the receipt of questionnaire packets by the participants (see Appendix A, permission letter).

Students were informed regarding the general focus of the study through in-class presentation (see Appendix E, informed consent for adolescents), and were asked to obtain their mothers' permission by means of a letter that included a brief explanation of the study and requested permission for their adolescent's participation (see Appendix F, permission of parents; see Appendix G, informed consent for mothers). After their mothers' permission had been obtained, adolescents were administered the scales described above in their classrooms (see Appendix H, battery of questionnaires for adolescents). Adolescents completed questionnaires in a counter-balanced order in one class session. After completing all of the questionnaires, adolescents were asked to take questionnaire packet to their mothers, and bring them back to their teacher within a one-week period (see Appendix I, battery of questionnaires for mothers). Mothers were asked not to disclose or discuss their responses with their child.

3.2.4 Statistical Analyses

In the current study, the variables were examined through SPSS programs. First, t-tests analyses were conducted in order to examine how demographic variables make distinction on the measures of the study. Second, two-way Analysis of Variance Analysis (ANOVA) and Multivariate Analysis of Variance Analysis (MANOVA) were run in order to observe possible gender and informant differences on adolescents' difficulties in emotion regulation and mothers' parental rearing behaviors (EMBU; namely, warmth, rejection, overprotection, and comparison) respectively. Third, Pearson correlation coefficient analyses were conducted in order to examine the relation among the study variables. Fourth, hierarchical multiple regression analyses were performed in three sets to reveal the associates of the (a) personality traits, (b) adolescents' emotion regulation difficulties, (c) psychological problems. Finally, separate mediation analyses were conducted in order to test whether adolescents' difficulties in emotion regulation mediate the relationship of perceived parental rearing behaviors (i.e., rejection, overprotection, and comparison) with psychological distress measures of depression, total difficulties, and negative affect.

3.3 Result

3.3.1 Data Cleaning

Before starting the analyses, adolescent and mother data were examined through SPSS programs for accuracy of data entry, missing values, fit between distributions, and the assumptions of multivariate analysis, including normality, linearity, homogeneity of variance and regression. Considering that the pattern of missing data was random, missing data were recoded as the case mean for each variable. Using Mahalanobis distance with $p < .001$, nine cases were identified as multivariate outliers, and thus were also deleted (Tabachnick & Fidell, 2007). As a result of data cleaning procedure, 595 cases for adolescent data and 365 cases for mother data were examined for the further analyses.

3.3.2 Descriptive Statistics

Means, standard deviations, minimum and maximum values for adolescent variables of Perceived Parental Rearing (EMBU) subscales, namely, Warmth, Rejection, Overprotection, and Comparison; Difficulties in Emotion Regulation Scale (DERS); Basic Personality Traits Questionnaire (BPTQ) subscales, namely, Extraversion, Conscientiousness, Agreeableness, Neuroticism, Openness to Experience, Negative Valence; Child Depression Inventory (CDI); Strength and Difficulties Questionnaire (SDQ); and Positive and Negative Affect Schedule (PANAS) are presented in Table 3.2.

Table 3. 2 *Descriptive Statistics for the Adolescent Variables of the Study*

	N	Mean	SD	Min.	Max.
EMBU					
Warmth	585	42.57	8.46	12	54
Rejection	532	18,21	7.57	8	43
Overprotection	582	26.38	7.39	7	42
Comparison	587	16.33	7.00	5	30
DERS	587	81.28	20.05	38	154
BPTQ					
Extraversion	582	30.65	5.40	14	40
Conscientiousness	585	30.25	5.88	8	40

Table 3. 2 *Descriptive Statistics for the Adolescent Variables (continued)*

	N	Mean	SD	Min.	Max.
Agreeableness	583	35.18	4.27	14	40
Neuroticism	585	22.88	7.20	9	44
Openness to Experience	585	23.66	4.17	6	30
Negative Valence	585	10.30	3.34	6	25
CDI	586	12.10	6.92	0	34
SDQ-Total Difficulties	590	27.48	4.47	18	43
PANAS					
Positive Affect	585	36.65	6.89	14	50
Negative Affect	585	20.15	7.07	10	48

Note. EMBU =Parental Rearing Behavior, DERS=Difficulties in Emotion Regulation Scale, BPTQ= Basic Personality Traits Questionnaire, CDI= Childhood Depression Inventory, SDQ =Strength and Difficulties Questionnaire, PANAS= Positive and Negative Affect Schedule.

Furthermore, means, standard deviations, minimum and maximum values for mother variables of Perceived Parental Rearing (EMBU) subscales, namely, Warmth, Rejection, Overprotection, and Comparison; Difficulties in Emotion Regulation Scale (DERS); Basic Personality Traits Questionnaire (BPTQ) subscales, namely, Extraversion, Conscientiousness, Agreeableness, Neuroticism, Openness to Experience, Negative Valence; and Brief Symptom Inventory (BSI) are presented in Table 3.3.

Table 3. 3 *Descriptive Statistics for the Mother Variables of the Study*

	N	Mean	SD	Min.	Max.
EMBU					
Warmth	358	42.19	5.61	13	48
Rejection	360	15.40	6.20	8	47
Over-protection	360	26.60	7.95	8	42
Comparison	358	13.98	6.48	5	30
DERS-mother	361	70.03	18.26	35	132
DERS-perceived	358	71.61	19.31	35	139
BPTQ					
Extraversion	351	31.82	6.26	14	40
Conscientiousness	350	34.65	4.38	19	40
Agreeableness	350	36.58	3.53	23	40
Neuroticism	351	20.94	7.08	9	44

Table 3. 3 *Descriptive Statistics for the Mother Variables (continued)*

	N	Mean	SD	Min.	Max.
Openness to Experience	351	23.27	3.87	11	30
Negative Valence	350	9.04	2.71	6	19
BSI	342	38.16	34.45	0	181

Note. EMBU =Parental Rearing Behavior, DERS=Difficulties in Emotion Regulation Scale, BPTQ= Basic Personality Traits Questionnaire, BSI= Brief Symptom Inventory.

3.3.3 Differences of Demographic Variables on the Measures of the Study

In order to examine how demographic variables make distinction on the measures of the present study, a series of t-test analyses and multivariate analyses were conducted. Firstly, using median split, demographic variables as independent variables were categorized into two groups in order to make these analyses. Information related to these categorizations and numbers of cases in each category (with their percentages) are given in Table 3.4.

Table 3. 4 *Categorization of Demographic Variables*

Variables	N	%
Type of School		
Regular High School	346	58.2
Anatolian High School	249	41.8
Gender		
Female	300	50.4
Male	295	49.6
Mother Education		
Graduate of secondary school or below (low)	271	46.3
Graduate of high school or above (high)	314	53.7
Father Education		
Graduate of high school or below (low)	359	61
Graduate of 2 year university or above (high)	230	39
Income		
1500 TL and below (low)	227	40.5
1500 TL and above (high)	333	59.5
Number of Sibling		
One or no sibling (few)	351	59.5
Two and more (more)	239	40.5

3.3.3.1 Independent t-test Analyses for Measures of the Study

Differences of demographic variables like type of school, gender of adolescents, mothers' education level, fathers' education level, family income, number of sibling in terms of adolescents' depression, total difficulties, and difficulties in emotion regulation and in terms of mothers' difficulties in emotion regulation and psychological symptoms were examined through a series of t-tests analyses and only statistically significant results were presented in the figures.

3.3.3.1.1 T-tests for Type of School

A series of t-tests were performed to see the type of school differences in terms of adolescents' depression, total difficulties, and difficulties in emotion regulation and in terms of mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated presence of differences in adolescents' depression ($t [584] = 5.48, p < .001$), total difficulties ($t [588] = 6.62, p < .001$), and difficulties in emotion regulation ($t [585] = 4.88, p < .001$). Similarly, results revealed significant differences in terms of mothers' difficulties in emotion regulation ($t [359] = 2.40, p < .02$) and psychological symptoms ($t [340] = 4.08, p < .001$).

According to these findings, adolescents from regular high school tend to have higher levels of depression ($M = 13.39$) compared to those from Anatolian high school ($M = 10.29$). Similarly, adolescents from regular high school tended to have higher level of total difficulties ($M = 28.48$) as compared to those from Anatolian high school ($M = 26.10$). Furthermore, adolescents from regular high school tended to have higher level of difficulties in emotion regulation ($M = 84.68$) as compared to those from Anatolian high school ($M = 76.66$) (as shown in Figure 3.1).

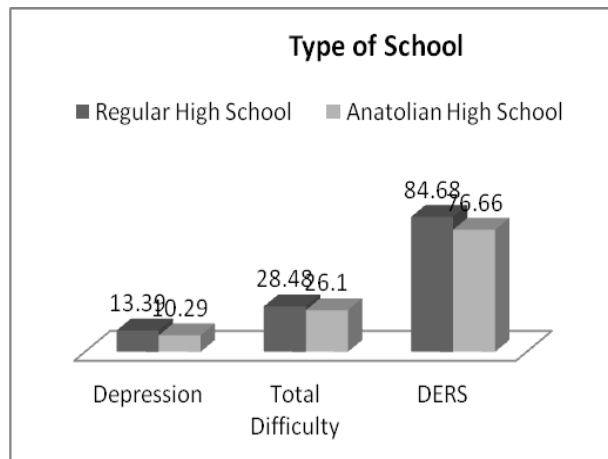


Figure 3. 1 Mean Scores of Measures for different Type of Schools

In addition to that, mothers of adolescents from regular high school tended to have higher level of difficulties in emotion regulation ($M = 72.16$) than mothers of those from Anatolian high school ($M = 67.58$). Similarly, mothers of adolescents from regular high school tend to report more psychological symptoms ($M = 45.26$) than mothers of those from Anatolian high school ($M = 30.37$) (as shown in Figure 3.2).

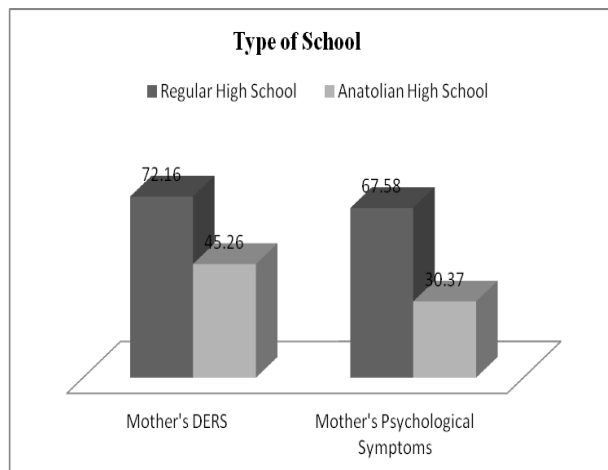


Figure 3. 2 Mean Scores of Measures for Type of School for Mothers

3.3.3.1.2 T-tests for Gender

A series of t-tests were performed to see gender differences in terms of adolescents' depression, total difficulties, and difficulties in emotion regulation, and in terms of mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated non-significant differences in depression ($t [584] = 0.03, p > .05$), total difficulties ($t [588] = 1.82, p > .05$), and difficulties in emotion regulation ($t [585] = 1.20, p > .05$). Similarly, results revealed non-significant difference in terms of mothers' difficulties in emotion regulation ($t [359] = -0.92, p > .05$). However, results revealed significant difference in terms of psychological symptoms ($t [340] = -2.15, p < .05$). That is, mothers of males tend to report more psychological symptoms ($M = 42.78$) than mothers of females ($M = 34.72$) (as shown in Figure 3.3).

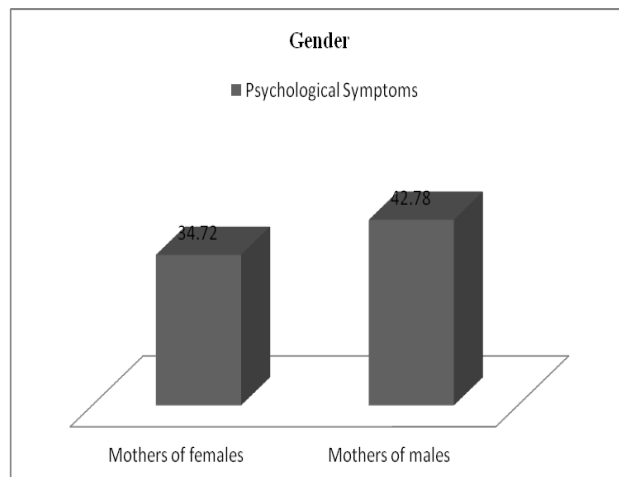


Figure 3. 3 Mean Scores of Psychological Problems of Mothers with respect to Gender

3.3.3.1.3 T-tests for Mother's Education

A series of t-tests were performed to see mother's education level differences in terms of adolescents' depression, total difficulties, and difficulties in emotion regulation, and in terms of mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated presence of differences in depression ($t [574] = 4.12, p < .001$), total difficulties ($t [578] = 3.00, p < .01$), and

difficulties in emotion regulation ($t [575] = 2.47, p < .05$). Similarly, results revealed significant differences in terms of mothers' difficulties in emotion regulation ($t [352] = 2.40, p < .02$) and psychological symptom ($t [333] = 4.85, p < .001$).

Adolescents whose mothers were graduates of secondary school or below ($M = 13.37$) tended to have higher levels of depression as compared to those whose mothers were graduates of high school or above ($M = 11.02$). Similarly, adolescents whose mothers are graduates of secondary school or below ($M = 28.07$) tended to have higher level of difficulties as compared to those whose mothers were graduates of high school or above ($M = 26.96$). Furthermore, adolescents whose mothers were graduate of secondary school or below tend to have higher level of difficulties in emotion regulation ($M = 83.56$) as compared to those whose mothers were graduates of high school or above ($M = 79.43$) (as shown in Figure 3.4).

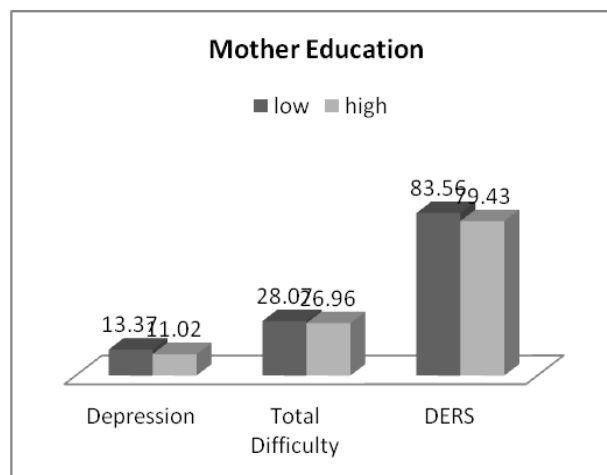


Figure 3. 4 Mean Scores of Adolescent Measures for different levels of Mother's Education

In addition to that, mothers who were graduates of secondary school or below tended to have higher level of difficulties in emotion regulation ($M = 72.38$) than those who were graduates of high school or above ($M = 67.58$). Similarly, mothers who were graduates of secondary school or below tended to report more psychological symptoms ($M = 46.76$) than those who were graduates of high school or above ($M = 29.27$) (as shown in Figure 3.5).

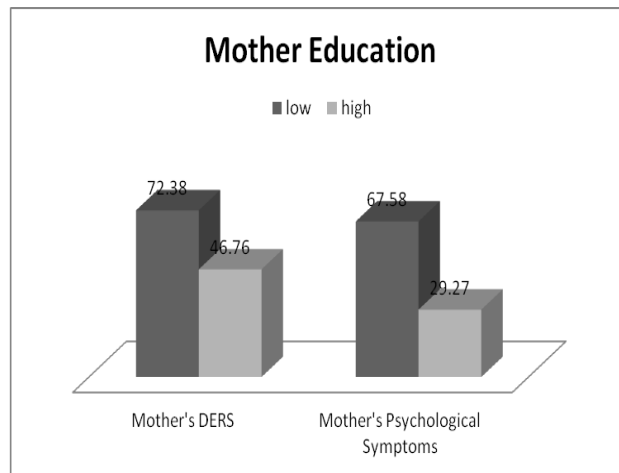


Figure 3. 5 Mean Scores of Mothers Measures for different levels of Mother's Education

3.3.3.1.4 T-tests for Father's Education

A series of t-tests were performed to see father's education level differences in terms of adolescents' depression, total difficulties, and difficulties in emotion regulation and in terms of mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated presence of differences on depression ($t [578] = 3.58, p < .001$), total difficulties ($t [582] = 4.14, p < .001$), and difficulties in emotion regulation ($t [579] = 3.47, p < .001$) scores. Similarly, results revealed significant differences in terms of mothers' psychological symptom ($t [336] = 4.88, p < .001$) but not in terms of mothers' difficulties in emotion regulation ($t [355] = 1.58, p > .05$).

Adolescents whose fathers were graduates of high school or below ($M = 12.89$) tended to have higher levels of depression as compared to those whose fathers were graduates of a two year university or above ($M = 10.80$). Similarly, adolescents whose fathers were graduates of high school or below ($M = 28.06$) tended to have higher level of difficulties as compared to those whose fathers were graduates of a two year university and above ($M = 26.51$). Furthermore, adolescents whose fathers were graduate of high school or below tended to have higher level of difficulties in emotion regulation ($M = 83.44$) as compared to those whose fathers were graduates of two a year university or above ($M = 77.59$) (as shown in Figure 3.6).

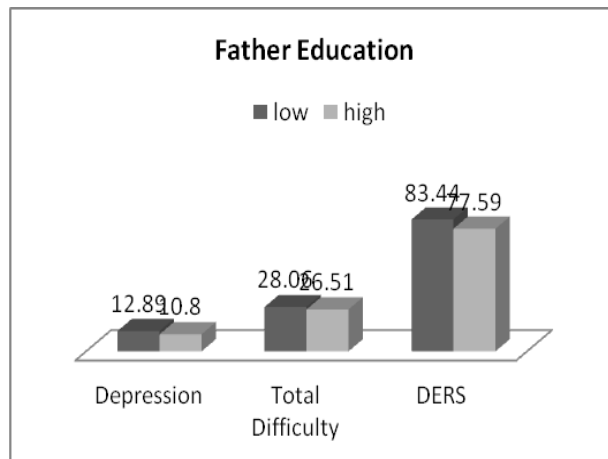


Figure 3. 6 Mean Scores of Adolescent Measures for different levels of Father's Education

In addition to that, mothers whose husbands were graduates of high school or below tended to report more psychological symptom ($M = 44.95$) than those whose husbands were graduates of a two year university or above ($M = 26.84$) (as shown in Figure 3.7).

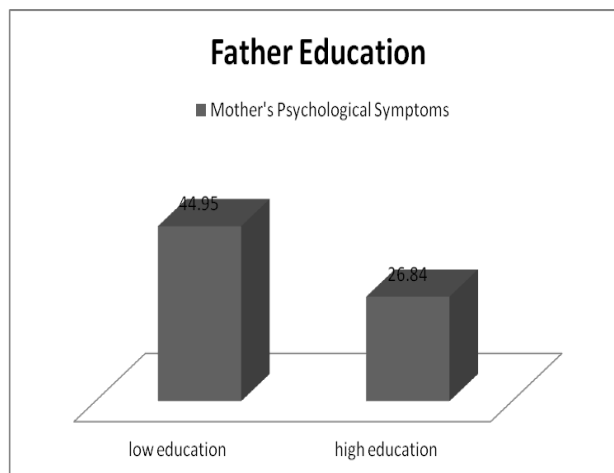


Figure 3. 7 Mean Score of Mothers Psychological Problems for different levels of Father's Education

3.3.3.1.5 T-tests for Income

A series of t-tests were performed to see income differences in terms of depression, total difficulties, and difficulties in emotion regulation and in terms of

mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated presence of differences on depression ($t [549] = 3.79, p < .001$), total difficulties ($t [553] = 2.78, p < .01$), and difficulties in emotion regulation ($t [552] = 2.86, p < .01$) scores. Similarly, results revealed significant differences in terms of mothers' psychological symptom ($t [323] = 2.10, p < .05$) but not in terms of mothers' difficulties in emotion regulation ($t [341] = 0.06, p > .05$).

Adolescents whose family income were low ($M = 13.49$) tended to have higher levels of depression as compared to those whose family income were high ($M = 11.22$). Similarly, adolescents whose family income were low ($M = 28.11$) tended to have higher level of difficulties as compared to those whose family income were high ($M = 27.04$). Furthermore, adolescents whose family income were low tend to have higher level of difficulties in emotion regulation ($M = 84.56$) as compared to those whose family income were high ($M = 79.60$) (as shown in Figure 3.8).

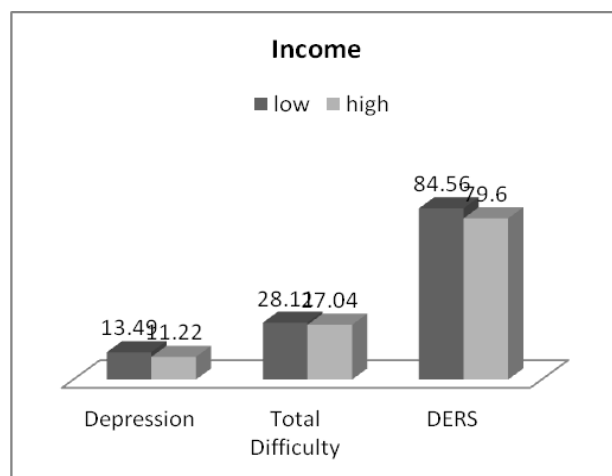


Figure 3. 8 Mean Scores of Measures with respect to Income

In addition to that, mothers whose family income are low tend to report more psychological symptoms ($M = 42.57$) than those whose family income are high ($M = 34.52$) (as shown in Figure 3.9).

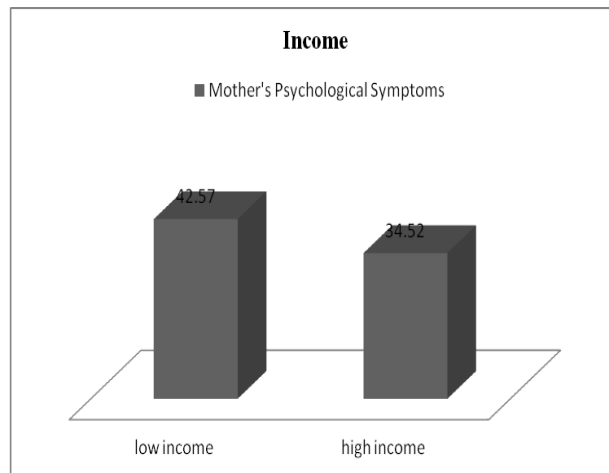


Figure 3. 9 Mean Score of Psychological Symptoms of Mothers with respect to Income

3.3.3.1.6 T-tests for Number of Siblings

A series of t-tests were performed to see the number of sibling differences in terms of depression, total difficulties, and difficulties in emotion regulation and in terms of mothers' difficulties in emotion regulation and psychological symptoms, results of which indicated non-significant differences on depression ($t [579] = -1.10, p > .05$) and difficulties in emotion regulation ($t [580] = -1.97, p > .05$) but significant differences for total difficulties ($t [583] = -2.18, p < .05$) scores. Similarly, results revealed significant differences in terms of mothers' psychological symptom ($t [336] = -2.28, p < .05$) but not in terms of mothers' difficulties in emotion regulation ($t [355] = -0.65, p > .05$).

Adolescents who had more than one sibling ($M = 27.97$) tend to have higher level of difficulties as compared to those who had one sibling / no sibling ($M = 27.15$) (as shown in Figure 3.10).

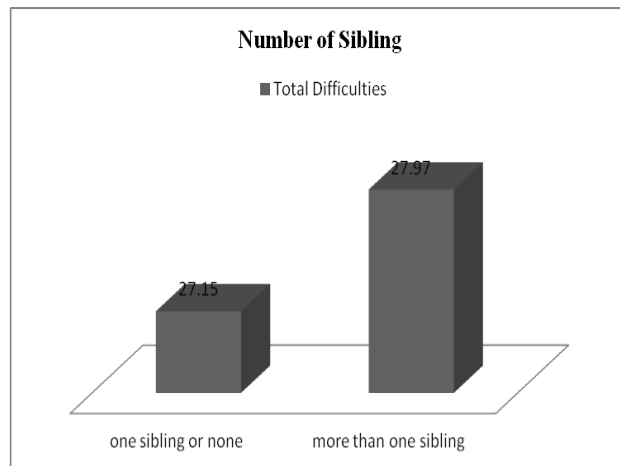


Figure 3. 10 Mean Scores of Total difficulties of Adolescents with respect to Number of Siblings

In addition to that, mothers having more than two children tended to report more psychological symptoms ($M = 43.33$) than those having two or fewer children ($M = 34.75$) (as shown in Figure 3.11).

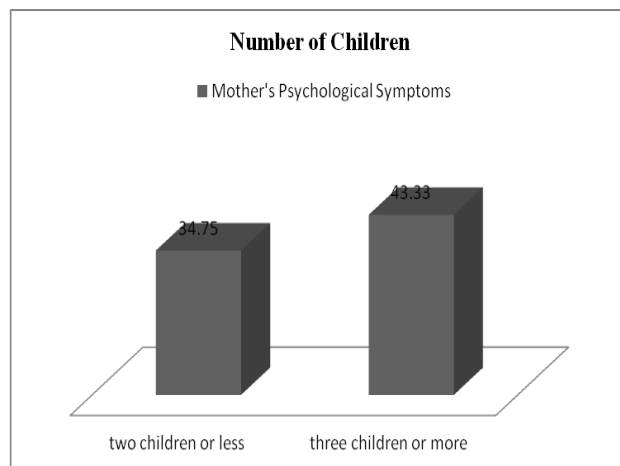


Figure 3. 11 Mean Scores of Number of Children on Measures

3.3.3.2 Differences of Demographic Variables on the Affect Style (PANAS) scores of the Study

Differences of demographic variables like type of school, gender of adolescents, mother's education level, father education level, family income, number

of sibling in terms of PANAS were examined through separate one-way multivariate analysis of variance (MANOVA).

3.3.3.2.1 Type of School Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated significant type of school effect on affect styles (Multivariate $F [2, 580] = 10.72, p < .001$, Wilks' $\Lambda = 0.96, \eta^2 = .04$). MANOVA results are presented in Table 3.5. To study which of the affect style were responsible for the significant differences between regular high school and Anatolian high school; univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as significant. This analysis indicated significant type of school difference only for negative affect ($F [1, 583] = 16.65, p < .001, \eta^2 = .03$). According to results, adolescents from regular high school report significantly more negative affect ($M = 21.14$) as compared to those from Anatolian high school ($M = 18.75$) (as shown in Figure 3.12).

Table 3. 5 MANOVA Results for Regular and Anatolian High Schools in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	10.72*	2, 580	0.96	.04		
NA		1, 583			16.65*	.03
PA		1, 583			3.09	.01

Note. NA: Negative Affect, PA: Positive Affect

* $p < .001$.

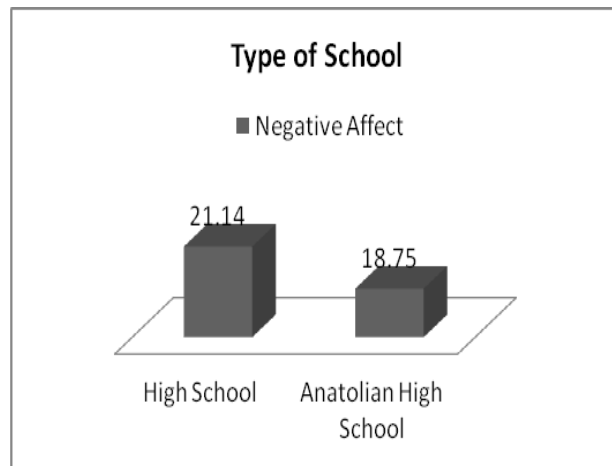


Figure 3. 12 Mean Scores of Negative Affect Measure for different Type of Schools

3.3.3.2.2 Gender Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated significant gender effect on affect styles (Multivariate $F [2, 580] = 4.16, p < .02, \text{Wilks}'\Lambda = 0.99, \eta^2 = .01$). MANOVA results are presented on Table 3.6. To study which of the affect style were responsible for the significant differences between females and males; univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as significant. This analysis indicated significant gender difference only for positive affect ($F [1, 583] = 8.34, p < .01, \eta^2 = .03$). Results revealed that males reported significantly more positive affect ($M = 37.43$) as compared to females ($M = 35.80$) (as shown in Figure 3.13).

Table 3. 6 MANOVA Results for females and males in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	4.16*	2, 580	0.99	.01		
NA		1, 583			0.08	.00
PA		1, 583			8.34*	.01

Note. NA: Negative Affect, PA: Positive Affect

* $p < .025$.

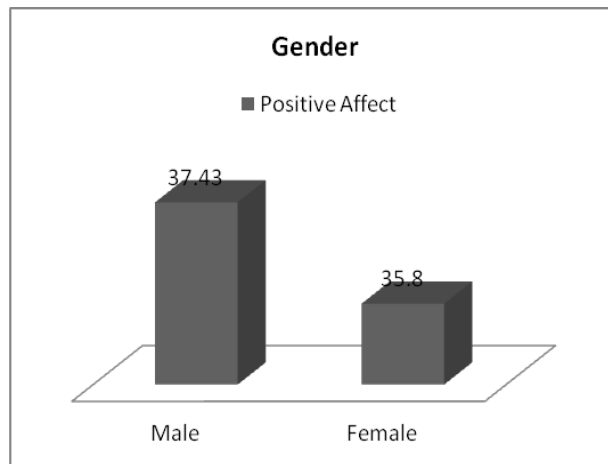


Figure 3. 13 Mean Scores of Gender on Positive Affect

3.3.3.2.3 Mothers' Education Level Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated non-significant mothers' education level effect on affect styles (Multivariate $F [2, 570] = 0.83, p > .05, \text{Wilks}'\Lambda = 0.99, \eta^2 = .003$). MANOVA results are presented on Table 3.7.

Table 3. 7 MANOVA Results for Low and High Educated Mothers in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	0.83	2, 570	0.99	.01		
NA		1, 573			1.67	.01
PA		1, 573			0.05	.00

Note. NA: Negative Affect, PA: Positive Affect

3.3.3.2.4 Fathers' Education Level Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated significant fathers' education level effect on affect styles (Multivariate $F [2, 574] = 3.72, p < .05, \text{Wilks}'\Lambda = 0.99, \eta^2 = .01$). MANOVA results are presented on Table 3.8. To study which of the affect style were responsible for the significant difference between being graduate of high school or below and graduate of a two year university and above; univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .025 were accepted as

significant. This analysis indicated significant father's education level difference only for negative affect ($F [1, 583] = 8.34, p < .01, \eta^2 = .03$). Results indicated that adolescents whose fathers were graduate of high school or below reported significantly more negative affect ($M = 20.71$) as compared to those whose fathers were graduate of a two year university or above ($M = 19.14$) (as shown in Figure 3.14).

Table 3. 8 MANOVA Results for Low and High Educated Fathers in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	3.72*	2, 574	0.99	.01		
NA		1, 577			6.87*	.01
PA		1, 577			0.25	.00

Note. NA: Negative Affect, PA: Positive Affect

* $p < .025$.

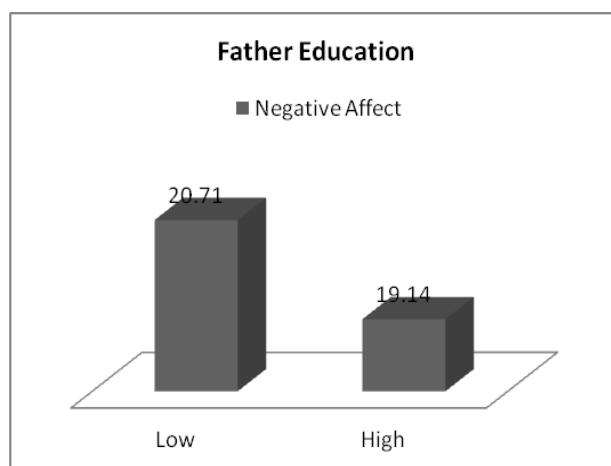


Figure 3. 14 Mean Scores of Father Education on Negative Affect

3.3.3.2.5 Family Income Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated significant family income effect on affect styles (Multivariate $F [2, 545] = 5.60, p < .01$, Wilks' $\Lambda = 0.98, \eta^2 = .02$). MANOVA results are presented on Table 3.9. To study which of the affect style were responsible for the significant difference between low and high family income; univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .025 were

accepted as significant. This analysis indicated significant family income difference only for negative affect ($F [1, 548] = 10.98, p < .001, \eta^2 = .02$). Results indicated that adolescents who had low family income reported significantly more negative affect ($M = 21.35$) as compared to those who had high family income ($M = 19.32$) (as shown in Figure 3.15).

Table 3.9 MANOVA Results for family income in terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	5.60*	2, 545	0.98	.02		
NA		1, 548			10.98**	.02
PA		1, 548			0.02	.00

Note. NA: Negative Affect, PA: Positive Affect

* $p < .01$, ** $p < .001$

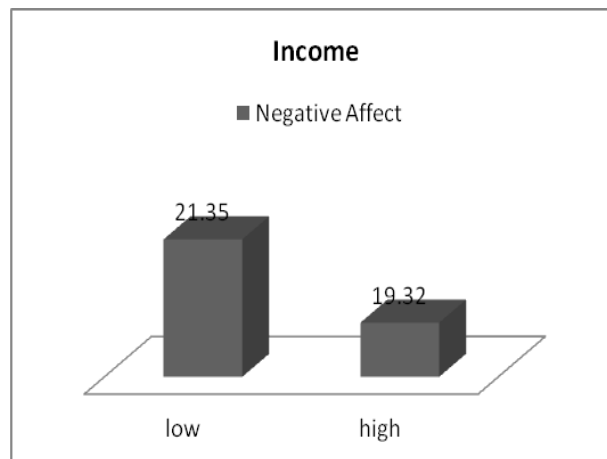


Figure 3.15 Mean Scores of Income on Negative Affect

3.3.3.2.6 Number of Sibling Difference in terms of PANAS

Multivariate analysis of variance (MANOVA) results indicated non-significant number of sibling effect on affect styles [Multivariate $F (2, 575) = 0.65, p > .05, \text{Wilks}'\Lambda = 0.99, \eta^2 = .002$]. MANOVA results are presented on Table 3.10.

Table 3. 10 MANOVA Results for Number of Sibling in Terms of PANAS

	Multi. F	df	Wilks' Lambda	Multi. η^2	Univariate F	Univariate η^2
PANAS	0.64	2, 575	0.99	.002		
NA		1, 578			0.35	.00
PA		1, 578			1.05	.00

Note: NA: Negative Affect, PA: Positive Affect

3.3.4 Gender and Informant Differences on Measures of the Study

Information about adolescents' difficulties in emotion regulation (DERS) and mothers' parental rearing behaviors (EMBU) were gathered from both adolescents themselves and their mothers. Therefore, in order to examine possible gender and informant differences on adolescents' difficulties in emotion regulation, 2 (Gender) X 2 (Informant) mixed design ANOVA with repeated measures on the last factor was performed. Furthermore, in order to examine possible gender and informant differences on mothers' parental rearing behaviors (EMBU), namely, warmth, rejection, overprotection, and comparison, 2 (Gender) X 2 (Informant) mixed design MANOVA with repeated measures on the last factor was performed.

3.3.4.1 Gender and Informant Differences on DERS

A 2 (Gender) X 2 (Informant: adolescents' report, mothers' report) mixed design ANOVA with repeated measures on the last factor yielded a significant informant main effect ($F [1, 352] = 56.24, p < .001, \eta^2 = .14$) but not significant gender main effect on adolescents' difficulties in emotion regulation ($F [1, 352] = 0.01, p > .05, \eta^2 = .00$). ANOVA results are presented on Table 3.11. According to that, adolescents tended to report higher level of difficulties in emotion regulation for themselves ($M = 80.31$) as compared to mothers' reports for adolescents' difficulties in emotion regulation ($M = 71.56$). Furthermore, a significant 2 (Gender) x 2 (Informant) interaction was observed indicating that adolescents' difficulties in emotion regulation changed from mothers' report to adolescents' own report as a function of gender ($F [1, 352] = 6.60, p < .025, \eta^2 = .02$). Post-hoc analysis with Bonforreni corrections yielded that when mother's report was considered, there is no significant difference between male adolescents ($M = 72.97$) and female adolescents

($M = 70.15$) in terms of difficulties in emotion regulation. Similarly, there is no significant difference between males ($M = 78.72$) and females' own reports ($M = 81.90$) in terms of difficulties in emotion regulation. However, results revealed that for both males and females, adolescents reported more difficulties in emotion regulation as compared to their mothers' report for adolescents' difficulties in emotion regulation (as shown in figure 3.16). Moreover, this difference was particularly salient for the female adolescents.

Table 3. 11 Gender and Informant Differences on DERS

Source	df	SS	MS	F
Gender	1	5.35	5.35	0.01
Error	352	185795.78	527.83	
Informant	1	13303.74	13303.74	56.24**
Informant X Gender	1	1562.26	1562.26	6.60*
Error	352	83269.57	236.56	

* $p < .025$, ** $p < .001$

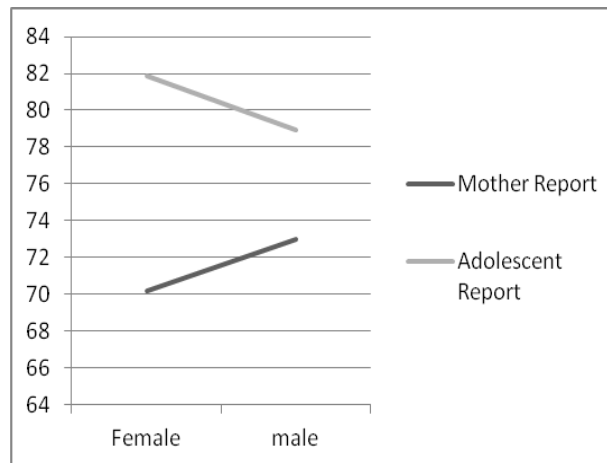


Figure 3. 16 Interaction Effect of Gender and Informant on Adolescent's DERS

3.3.4.2 Gender and Informant Differences on EMBU-subscales

A 2 (Gender) X 2 (Informant) mixed design MANOVA with repeated measures on the last factor was performed on four subscales of mothers' parental

rearing (EMBU) behaviors (i.e., warmth, rejection, overprotection, and comparison) as the dependent variables.

MANOVA results indicated significant Informant main effect (Multivariate F [4, 316] = 28.44, $p < .001$, Wilks' $\Lambda = 0.74$, $\eta^2 = .27$). MANOVA results are presented on Table 3.12. However, Gender main effect, (Multivariate F [4, 316] = 1.07, $p > .05$, Wilks' $\Lambda = 0.99$, $\eta^2 = .01$) and the interaction effect were not significant, (Multivariate F [4, 316] = 0.44, $p > .05$, Wilks' $\Lambda = 0.99$, $\eta^2 = .006$). To study which of the parenting rearing behaviors were responsible for the significant difference between adolescents' report and mothers' report, univariate analysis with Bonferroni correction was performed, thus for univariate analysis only the alpha scores lower than .0125 were accepted as significant. This analysis indicated significant informant difference for warmth (F [1, 319] = 91.80, $p < .001$, $\eta^2 = .22$), rejection (F [1, 319] = 33.13, $p < .001$, $\eta^2 = .09$), and comparison (F [1, 319] = 26.94, $p < .001$, $\eta^2 = .08$) subscales.

Results indicated that adolescents rated their mothers as showing significantly less warmth to them ($M = 4.82$) as compared to their mothers' rating of themselves ($M = 5.29$). On the other hand, adolescents rated their mothers as significantly more rejecting ($M = 2.22$) as compared to their mothers' rating of themselves ($M = 1.91$). Similarly, adolescents rated their mothers as significantly more comparing with other children ($M = 3.18$) as compared to their mothers' ratings for themselves ($M = 2.79$) (as shown in Figure 3.17).

Table 3. 12 Informant Differences on EMBU-subscale

	Multi. F	df	Wilks Λ	Multi. Eta ²	Uni. F	Uni. Eta ²
EMBU	28.44*	4, 316	.74	.27		
W		1, 319			91.80*	.22
R		1, 319			33.13*	.09
C		1, 319			26.94*	.08
O		1, 319			0.98	

Note. W: Warmth, R: Rejection, C: Comparison, O: Overprotection

* $p < .001$

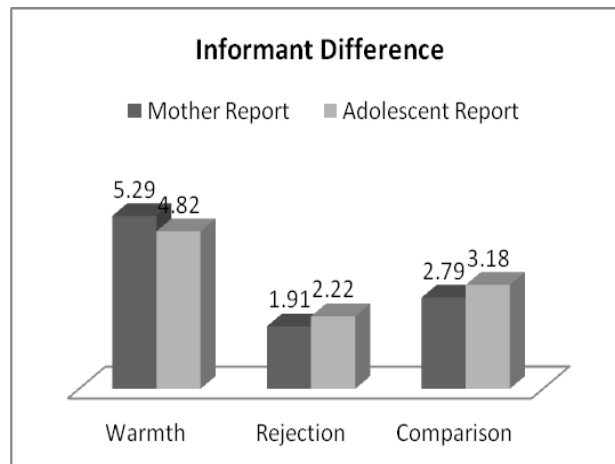


Figure 3. 17 Mean Scores of Informant Difference on EMBU-subscales

3.3.5 Pearson Correlation Coefficients

In order to determine the relationship among study variables, Pearson correlation coefficient analyses were conducted. Firstly, zero-order correlations among mothers' difficulties in emotion regulation, adolescents' difficulties in emotion regulation, and mothers' report of adolescents' difficulties in emotion regulation were performed. Secondly, zero-order correlations among basic personality traits of adolescents, adolescent's difficulties in emotion regulation, perceived mothers' parental rearing behaviors (EMBU) and psychological distress measures of depression, total difficulties, and positive affect and negative affect were performed. Lastly, zero-order correlations among mothers' difficulties in emotion regulation, perceived difficulties in emotion regulation of adolescents, mothers' psychological symptoms, basic personality traits, and maternal rearing behaviors (EMBU) were performed.

The results revealed that adolescents' difficulties in emotion regulation was significantly correlated with mothers' reports of adolescents' difficulties in emotion regulation ($r = .37, p < .001$), and mothers' own difficulties in emotion regulation ($r = .20, p < .001$). Furthermore, mothers' own difficulties in emotion regulation was highly correlated with mothers' reports of adolescents' difficulties in emotion regulation ($r = .63, p < .001$).

Correlations among adolescent related variables showed that, while adolescents' difficulties in emotion regulation was significantly and negatively correlated with extraversion ($r = -.36, p < .001$), conscientiousness ($r = -.28, p < .001$), agreeableness ($r = -.15, p < .001$), openness to experience ($r = -.25, p < .001$) subscales of basic personality traits, it was significantly and positively correlated with neuroticism ($r = .53, p < .001$) and negative valence ($r = .26, p < .001$) subscales of basic personality traits. In addition to that, adolescents' difficulties in emotion regulation was significantly and positively correlated with perceived rejection ($r = .37, p < .001$), overprotection ($r = .22, p < .001$), comparison ($r = .23, p < .001$) subscales of mothers' parental rearing (EMBU) behaviors, except for warmth ($r = -.24, p < .001$). Similarly, adolescents' difficulties in emotion regulation was highly correlated psychological distress measures of depression ($r = .61, p < .001$), total difficulties ($r = .59, p < .001$), negative affect ($r = .54, p < .001$), and it was significantly and negatively correlated with positive affect ($r = -.21, p < .001$). Correlation results are presented on Table 3.13.

Table 3. 13 *Correlations among Adolescent Related Variables*

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	
1. A_DERS	1	.37***	.20***	.54***	-.21***	.26***	-.25***	-.15***	.53***	-.28***	-.36***	.61***	.59***	-.24***	.37***	.22***	.23***	
2. P_DERS		1	.63***	.33***	-.16**	.14**	-.07	-.10	.27***	-.20***	-.20***	.37***	.31***	-.25***	.29***	.14**	.30***	
3. M_DERS			1	.22***	-.14*	.11*	-.07	-.09	.14**	-.14**	-.06	.25***	.26***	-.27***	.23***	.12*	.23***	
4. NA				1	-.09*	.30***	-.08	-.12**	.63***	-.27***	-.32***	.60***	.58***	-.25***	.36***	.21***	.23***	
5. PA					1	.09*	.56***	.33***	-.06	.41***	.17***	-.31***	-.14**	-.20***	.03	.05	.07	
6. NV						1	.04	-.26***	.36***	-.21***	-.23***	.27***	.31***	-.23***	.36***	.04	.20***	
7. OE							1	.38***	-.09*	.31***	.38***	-.27***	-.14**	.16***	.07	.09*	.12**	
8. A								1	-.17***	.40***	.18***	-.25***	-.15***	.30***	-.09*	.13**	-.01	
9. N									1	-.30***	-.41***	.48***	.62***	-.22***	.33***	.18***	.20***	
10. C										1	.09*	-.38***	-.31***	.24***	-.15**	.04	-.06	
11. E											1	-.38***	-.30***	.16***	-.15**	-.06	-.12**	
12. CDI												1	.60***	-.33***	.37***	.19***	.21***	
13. SDQ													1	-.28***	.35***	.18***	.20***	
14. W														1	-.37***	.05	-.26***	
15. R															1	.39***	.59***	
16. O																1	.35***	
17. Comp.																		1

Note. A_DERS: Adolescent Difficulties in Emotion Regulation, P_DERS: Perceived Difficulties in Emotion Regulation, M_DERS: Mother Difficulties in Emotion Regulation, NA: Negative Affect, PA: Positive Affect, NV: Negative Valence, OE: Openness to Experience, A: Agreeableness, N: Neuroticism, C: Conscientiousness, E: Extraversion, CDI: Child Depression Inventory, SDQ: Strength and Difficulties Questionnaire, W: Warmth, R: Rejection, O: Overprotection, Comp.: Comparison. * $p < .05$, ** $p < .01$, *** $p < .001$.

Correlations among mother related variables indicated that, as expected, while mothers' own difficulties in emotion regulation was significantly and negatively correlated with extraversion ($r = -.36, p < .001$), conscientiousness ($r = -.27, p < .001$), agreeableness ($r = -.23, p < .001$), openness to experience ($r = -.28, p < .001$) subscales of basic personality traits, it was significantly and positively correlated with neuroticism ($r = .43, p < .001$) and negative valence ($r = .27, p < .001$) subscales of basic personality traits. In addition to that, mothers' own difficulties in emotion regulation was significantly and positively correlated with rejection ($r = .43, p < .001$), overprotection ($r = .29, p < .001$), comparison ($r = .38, p < .001$) subscales of mothers' parental rearing (EMBU) behaviors, except for warmth ($r = -.36, p < .001$). Similarly, mothers' own difficulties in emotion regulation was highly correlated with their psychological symptoms ($r = .50, p < .001$).

In addition to that, correlation analyses revealed that perceived difficulties in emotion regulation of adolescents was significantly correlated with extraversion ($r = -.33, p < .001$), conscientiousness ($r = -.17, p < .001$), agreeableness ($r = -.20, p < .001$), openness to experience ($r = -.24, p < .001$) with neuroticism ($r = .37, p < .001$) and negative valence ($r = .27, p < .001$) subscales of basic personality traits. Furthermore, it was significantly correlated with rejection ($r = .45, p < .001$), overprotection ($r = .27, p < .001$), comparison ($r = .36, p < .001$), and warmth ($r = -.37, p < .001$) subscales of mothers' parental rearing behaviors (EMBU). Similarly, perceived difficulties in emotion regulation was highly correlated with their psychological symptoms ($r = .45, p < .001$). Correlation results are presented on Table 3.14.

As additional analyses, to see the relationship between mothers' personality traits and adolescents' personality traits, pearson correlation coefficient analyses were conducted. Results indicated that while adolescents' extraversion was positively correlated with mothers' extraversion ($r = .19, p < .001$), it was negatively correlated with mothers' neuroticism ($r = -.18, p < .001$), and negative valence ($r = -.14, p < .01$).

Table 3. 14 *Correlations among Mother Related Variables*

	1	2	3	4	5	6	7	8	9	10	11	12	13
1. E_Mother	1	.29***	.38***	-.35***	.45***	-.26***	-.13*	-.14**	-.14**	.24***	-.30***	-.36***	-.33***
2. C_Mother		1	.48***	-.27***	.37***	-.26***	-.09	.08	-.09	.29***	-.13*	-.27***	-.17**
3. A_Mother			1	-.31***	.45***	-.31***	-.11*	.07	-.11*	.37***	-.13*	-.23***	-.20***
4. N_Mother				1	-.19***	.33***	.30***	.26***	.28***	-.25***	.43***	.43***	.37***
5. OE_Mother					1	-.03	-.02	-.03	.03	.24***	.19***	-.28***	-.24***
6. NV_Mother						1	.32***	.16**	.33***	-.31***	.24***	.27***	.27***
7. Comp._Mother							1	.42***	.57***	-.19***	.34***	.38***	.36***
8. O_Mother								1	.34***	.10	.32***	.29***	.27***
9. R_Mother									1	-.30***	.42***	.43***	.45***
10. W_Mother										1	-.25***	-.36***	-.37***
11 BSI											1	.50***	.45***
12. M_DERS												1	.63***
13. P_DERS													1

Note. E: Extraversion, C: Conscientiousness, A: Agreeableness, N: Neuroticism, OE: Openness to Experience, NV: Negative Valence, Comp.: Comparison, O: Overprotection, R: Rejection, W: Warmth, BSI: Brief Symptom Inventory, M_DERS: Mother Difficulties in Emotion, P_DERS: Perceived Difficulties in Emotion Regulation

* $p < .05$, ** $p < .01$, *** $p < .001$

On the contrary, adolescents' neuroticism was positively associated with mothers' neuroticism ($r = .30, p < .001$), and negative valence ($r = .18, p < .001$). Furthermore, adolescents' conscientiousness was positively associated with mothers' conscientiousness ($r = .21, p < .001$), agreeableness ($r = .21, p < .001$), and extraversion ($r = .15, p < .01$); however, it was negatively associated with mothers' neuroticism ($r = -.11, p < .05$). Adolescents' agreeableness was significantly correlated with mothers' agreeableness ($r = .24, p < .001$), openness to experience ($r = .24, p < .001$), and conscientiousness ($r = .20, p < .001$). Likewise, adolescents' openness to experience was significantly related with mothers' openness to experience ($r = .24, p < .001$) agreeableness ($r = .15, p < .01$). Lastly, adolescents' negative valence was significantly correlated with mothers' negative valence ($r = .18, p < .001$).

Furthermore, zero order correlations were performed in order to examine the relationship between mothers' own reports of their parental rearing behaviors and adolescents' perception of their mothers' parental rearing behaviors. Results indicated that while adolescents' perception of their mothers' warmth was positively associated with their mothers' report of warmth ($r = .40, p < .001$), it was negatively associated with mothers' report of comparison ($r = -.18, p < .001$) and rejection ($r = -.20, p < .001$). On the other hand, adolescents' perception of their mothers' rejection was positively associated with their mothers' report of rejection ($r = .37, p < .001$), comparison ($r = .30, p < .001$), and overprotection ($r = .23, p < .001$). Likewise, adolescents' perception of their mothers' overprotection was positively associated with their mothers' report of overprotection ($r = .48, p < .001$), comparison ($r = .19, p < .001$), and rejection ($r = .20, p < .001$). Lastly, adolescents' perception of their mothers' comparison was positively associated with their mothers' report of comparison ($r = .50, p < .001$), overprotection ($r = .27, p < .001$), and rejection ($r = .34, p < .001$). Correlation results are presented on Table 3.15.

Table 3. 15 *Correlations among Mother Related Variables and Adolescent Related Variables*

	E_	C_	A_	N_	OE_	NV_	Comp._	O_	R_	W_
	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent	Adolescent
E_Mother	.19***	.15**	.09	-.05	.07	-.08				
C_Mother	.05	.21***	.20***	-.002	.10	-.01				
A_Mother	.07	.21***	.24***	-.01	.14**	-.04				
N_Mother	-.18***	-.11*	-.08	.30***	-.03	.04				
OE_Mother	.07	.21***	.24***	-.03	.24***	-.003				
NV_Mother	-.13**	-.01	-.04	.18***	.05	.18***				
Comp._Mother							.50***	.19***	.30***	-.18***
O_Mother							.27***	.48***	.23***	-.05
R_Mother							.34***	.20***	.37***	-.20***
W_Mother							-.20***	-.05	-.20***	.40***

Note. E: Extraversion, C: Conscientiousness, A: Agreeableness, N: Neuroticism, OE: Openness to Experience, NV: Negative Valence, Comp.: Comparison, O: Overprotection, R: Rejection, W: Warmth.

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6 Three Sets of Hierarchical Multiple Regressions

Three sets of hierarchical multiple regression analyses were conducted to examine the associations among variables of the study. Following the model presented in the Introduction section, hierarchical multiple regression analyses were performed in three sets to reveal the associates of the (i) personality traits, (ii) adolescents' reports of difficulties in emotion regulation and mothers' reports of adolescents' difficulties in emotion regulation, (iii) psychological distress measures of depression, total difficulties, negative affect, and positive affect.

3.3.6.1 Variables Associated with Personality Traits

Separate hierarchical multiple regression analyses were conducted to reveal the significant associates of personality traits, namely, extraversion, conscientiousness, agreeableness, neuroticism, openness to experience, and negative valence.

Variables were entered into the equation via three steps. In order to control the possible effects of socio-demographic variables (i.e., income, gender, type of school, mother's and father's education level), these first step variables were hierarchically entered (via stepwise method) into the equation. After controlling for the socio-demographic variables that were significantly associated with the dependent variable, variables related to maternal characteristics (i.e., mother's difficulties in emotion regulation, mother's psychological symptoms, and mother's personality traits) were hierarchically entered into the equation on the second step. After controlling for the significant maternal characteristics, the factors of mothers' parental rearing behaviors and adolescents' perceived parental rearing behaviors (i.e., rejection, overprotection, comparison, warmth) were hierarchically entered into the equation on the third step.

3.3.6.1.1 Variables Associated with Extraversion

Hierarchical regression analysis run for the extraversion measure of the adolescents revealed that among control variables, only type of school ($\beta = .20$, t [270] = 3.32, $p < .001$) was significantly associated with the extraversion. Type of

school explained 4 % of the variance ($F [1, 270] = 11.04, p < .001$). After controlling for this factor, among maternal characteristics, mother's extraversion ($\beta = .20, t [269] = 3.39, p < .001$) had significant association with adolescent's extraversion. Mother's extraversion increased explained variance to 8 % ($F_{\text{change}} [1, 269] = 11.47, p < .001$). Following this maternal characteristic, among parental rearing behaviors (EMBU), perceived maternal warmth ($\beta = .12, t [268] = 2.00, p < .05$) significantly associated with the extraversion and explained variance increased to 9 % ($F_{\text{change}} [1, 268] = 4.00, p < .05$). Results are presented on Table 3.16.

Totally, three factors as type of school, mother's extraversion, and perceived maternal warmth had significant associations with adolescent's extraversion. That is, adolescents from Anatolian high school, those whose mothers were more extrovert, and those perceiving more maternal warmth were more likely to be extroverted as compared to those from regular high school, whose mothers were less extrovert, and those perceiving less maternal warmth.

Table 3. 16 *Variables Associated with Extraversion*

	F_{change}	df	β	t (within set)	R^2
Dependent Variable					
Extraversion					
Step 1: Control Variables					
Type of School (Anatolian)	11.04**	270	.20	3.32**	.04
Step 2: Mother Characteristics					
Mother-extraversion	11.47**	269	.20	3.39**	.08
Step 3: Parental Rearing Behaviors					
Perceived-warmth	4.00*	268	.12	2.00*	.09

* $p < .05$, ** $p < .001$

3.3.6.1.2 Variables Associated with the Conscientiousness

Hierarchical regression analysis run for the conscientiousness revealed that among control variables, only mother's education level ($\beta = -.18, t [270] = -2.97, p < .01$) had significant negative association with the conscientiousness. Mother's education level explained 3 % of the variance ($F [1, 270] = 8.80, p < .01$). After controlling for this factor, among maternal characteristics, mother's openness to experience ($\beta = .21, t [269] = 3.54, p < .001$) and mother's psychological symptoms

($\beta = -.13, t [268] = -2.19, p < .05$) had significant associations with conscientiousness. Mother's extraversion increased explained variance to 8 % ($F_{\text{change}} [1, 269] = 12.52, p < .001$) and with the entrance of mother's psychological symptoms, explained variance increased up to 9 % ($F_{\text{change}} [1, 268] = 4.78, p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal warmth ($\beta = .31, t [267] = 5.41, p < .001$) significantly associated with the conscientiousness and explained variance increased to 18 % ($F_{\text{change}} [1, 267] = 29.30, p < .001$). Results are presented on Table 3.17.

Totally, four factors as mother's education level, mother's openness to experience, mother's psychological symptoms, and perceived maternal warmth had significant associations with adolescent's conscientiousness. That is, adolescents whose mothers were less educated, more open to experience, and report less psychological symptoms, and those perceiving more maternal warmth were more likely to be conscientious as compared to those whose mothers were more educated, less open to experience, and report more psychological symptoms, and those perceiving less maternal warmth.

Table 3. 17 *Variables Associated with Conscientiousness*

Dependent Variable	F_{change}	df	B	t (within set)	R^2
Conscientiousness					
Step 1: Control Variables					
Mother Education (low)	8.80**	270	-.18	-2.97**	.03
Step 2: Mother Characteristics					
Mother-openness to experience	12.52***	269	.21	3.54***	.08
Mother- psychological symptoms	4.78*	268	-.13	-2.19*	.08
Step 3: Parental Rearing Behaviors					
Perceived-warmth	29.30***	267	.31	5.41***	.18

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.1.3 Variables Associated with the Agreeableness

Hierarchical regression analysis run for the agreeableness revealed that among control variables, gender ($\beta = -.19, t [269] = -3.15, p < .01$) and father's education level ($\beta = -.15, t [268] = -2.45, p < .05$) had significant negative

associations with the agreeableness. Gender explained 4 % of the variance ($F [1, 269] = 9.89, p < .01$) and with the entrance of father's education level, explained variance increased up to 6 % ($F_{\text{change}} [1, 268] = 6.00, p < .05$). After controlling for these socio-demographic factors, among maternal characteristics, mother's agreeableness ($\beta = .23, t [267] = 3.88, p < .001$) and mother's openness to experience ($\beta = .15, t [266] = 2.34, p < .05$) had significant associations with agreeableness. Mother's agreeableness increased explained variance to 11 % ($F_{\text{change}} [1, 267] = 15.04, p < .001$) and with the entrance of mother's openness to experience, explained variance increased up to 13 % ($F_{\text{change}} [1, 266] = 5.49, p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal warmth ($\beta = .39, t [265] = 7.28, p < .001$) and perceived maternal overprotection ($\beta = .13, t [264] = 2.41, p < .05$) significantly associated with the agreeableness. Perceived maternal warmth increased explained variance into 27 % ($F_{\text{change}} [1, 265] = 52.99, p < .001$) and with the entrance of perceived maternal overprotection, explained variance increased up to 29 % ($F_{\text{change}} [1, 264] = 5.80, p < .05$). Results are presented on Table 3.18.

Totally, six factors as gender, father's education level, mother's agreeableness, mother's openness to experience, perceived maternal warmth and perceived maternal overprotection had significant associations with adolescent's agreeableness. That is, female adolescents, those whose fathers were less educated but mothers were more agreeable and more open to experience, and those perceiving more maternal warmth and more maternal overprotection were more likely to be agreeable as compared to males, those whose fathers were more educated but mothers were less agreeable and less open to experience, and those perceiving less maternal warmth and less maternal overprotection.

Table 3. 18 Variables Associated with Agreeableness

Dependent Variable	F_{change}	df	B	$t(\text{within set})$	R^2
Agreeableness					
Step 1: Control Variables					
Gender (female)	9.89**	269	-.19	-3.15**	.04
Father Education (low)	6.00*	268	-.15	-2.45*	.06
Step 2: Mother Characteristics					
Mother-agreeableness	15.04***	267	.23	3.88***	.11
Mother-openness to experience	5.49*	266	.15	2.34*	.13
Step 3: Parental Rearing Behaviors					
Perceived-warmth	52.99***	265	.39	7.28***	.27
Perceived-overprotection	5.80*	264	.13	2.41*	.29

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.1.4 Variables Associated with the Neuroticism

Hierarchical regression analysis run for the neuroticism revealed that among control variables, only type of school ($\beta = -.18$, $t [270] = -3.00$, $p < .01$) was significantly associated with the neuroticism. Type of school explained 3 % of the variance ($F [1, 270] = 9.00$, $p < .01$). After controlling for this factor, among maternal characteristics, mother's neuroticism ($\beta = .23$, $t [269] = 3.91$, $p < .001$) had significant association with adolescent's neuroticism. Mother's neuroticism increased explained variance to 8 % ($F_{\text{change}} [1, 269] = 15.27$, $p < .001$). Following this maternal characteristic, among parental rearing behaviors, perceived maternal rejection ($\beta = .26$, $t [268] = 4.32$, $p < .001$) significantly associated with the neuroticism and explained variance increased to 14 % ($F_{\text{change}} [1, 268] = 18.63$, $p < .001$). Results are presented on Table 3.19.

Totally, three factors as type of school, mother's neuroticism, and perceived maternal rejection had significant association with adolescent's neuroticism. That is, adolescents from regular high school, those whose mothers were high in neuroticism, and those perceiving more maternal rejection were more likely to be high in neuroticism as compared to those from Anatolian high school, whose mothers were low in neuroticism, and those perceiving less maternal rejection.

Table 3. 19 Variables Associated with Neuroticism

Dependent Variable	F_{change}	df	B	(within set)	R^2
Neuroticism					
Step 1: Control Variables					
Type of school (regular)	9.00*	270	-.18	-3.00*	.03
Step 2: Mother Characteristics					
Mother-neuroticism	15.27**	269	.23	3.91**	.08
Step 3: Parental Rearing Behaviors					
Perceived-rejection	18.63**	268	.26	4.32**	.14

* $p < .01$, ** $p < .001$

3.3.6.1.5 Variables Associated with the Openness to Experience

Hierarchical regression analysis run for the openness to experience revealed that among control variables, only gender ($\beta = .15$, $t [270] = 2.53$, $p < .05$) had significant association with the openness to experience. Gender explained 2 % of the variance ($F [1, 270] = 6.38$, $p < .05$). After controlling for this factor, among maternal characteristics, mother's openness to experience ($\beta = .28$, $t [269] = 4.81$, $p < .001$) had significant association with adolescent's openness to experience. Mother's openness to experience increased explained variance to 10 % ($F_{\text{change}} [1, 269] = 23.12$, $p < .001$). Following that, among parental rearing behaviors, perceived maternal warmth ($\beta = .16$, $t [268] = 2.77$, $p < .01$), perceived maternal comparison ($\beta = .20$, $t [267] = 3.41$, $p < .001$), and mother's report of maternal warmth ($\beta = -.13$, $t [266] = -2.06$, $p < .05$) significantly associated with adolescent's openness to experience. Perceived maternal warmth increased explained variance to 13 % ($F_{\text{change}} [1, 268] = 7.66$, $p < .01$) and with the entrance of perceived maternal overprotection explained variance increased up to 16 % ($F_{\text{change}} [1, 267] = 11.66$, $p < .01$). After that with the entrance of mother's report of maternal warmth, explained variance increased up to 18 % ($F_{\text{change}} [1, 266] = 4.23$, $p < .05$). Results are presented on Table 2.20.

Totally, five factors as gender, mother's agreeableness, mother's openness to experience, perceived maternal warmth and perceived maternal comparison, and

mother's report of maternal warmth had significant associations with adolescent's openness to experience. That is, male adolescents, those whose mothers were more open to experience, those perceiving more maternal warmth and maternal comparison, and those whose mothers reported less warmth were more likely to be open to experience as compared to females, those whose mothers were less open to experience, those perceiving less maternal warmth and maternal comparison, and those whose mothers reported more warmth.

Table 3. 20 *Variables Associated with Openness to Experience*

Dependent Variable	F_{change}	Df	B	t (within set)	R^2
Openness to Experience					
Step 1: Control Variables					
Gender (male)	6.38*	270	.15	2.53*	.02
Step 2: Mother Characteristics					
Mother- openness to experience	23.12***	269	.28	4.81***	.10
Step 3: Parental Rearing Behaviors					
Perceived-warmth	7.66**	268	.16	2.77**	.13
Perceived-comparison	11.66***	267	.20	3.41***	.16
Mother reported-warmth	4.23*	266	-.13	-2.06*	.18

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.1.6 Variables Associated with the Negative Valence

Hierarchical regression analysis run for the negative valence revealed that among control variables, gender ($\beta = .27$, $t [270] = 4.55$, $p < .001$) and family income ($\beta = -.16$, $t [269] = -2.66$, $p < .01$) had significant negative associations with the negative valence. Gender explained 7 % of the variance ($F [1, 270] = 20.69$, $p < .001$) and with the entrance of income into the equation, explained variance increased to 10 % ($F [1, 269] = 7.09$, $p < .01$). After controlling for these control variables, among parental rearing behaviors, perceived maternal rejection ($\beta = .33$, $t [268] = 5.92$, $p < .001$) and perceived maternal warmth ($\beta = -.19$, $t [267] = -3.28$, $p < .001$) significantly associated with adolescent's negative valence. Perceived maternal rejection increased explained variance to 20 % ($F_{\text{change}} [1, 268] = 35.07$, $p < .001$)

and with the entrance of perceived maternal warmth, explained variance increased up to 23 % ($F_{\text{change}} [1, 267] = 10.75, p < .001$). Results are presented on Table 3.21

Totally, four factors as gender, family income, perceived maternal rejection and perceived maternal warmth had significant associations with adolescent's negative valence. That is, male adolescents, those with low family income, those perceiving more maternal rejection, and less maternal warmth were more likely to be high in negative valence as compared to females, those with high family income, those perceiving less maternal rejection and more maternal warmth.

Table 3. 21 *Variables Associated with Negative Valence*

Dependent Variable	F_{change}	df	B	t (within set)	R^2
Negative Valence					
Step 1: Control Variables					
Gender (male)	20.69**	270	.27	4.55**	.07
Income (low)	7.09*	269	-.16	-2.66*	.10
Step 2: Mother Characteristics					
-					
Step 3: Parental Rearing Behaviors					
Perceived-rejection	35.07**	268	.33	5.92**	.20
Perceived-warmth	10.75**	267	-.19	-3.28**	.23

* $p < .01$, ** $p < .001$

3.3.6.2 Variables Associated with Difficulties in Emotion Regulation

Two hierarchical multiple regression analyses were conducted to reveal the significant associates of adolescent's difficulties in emotion regulation and mother's report of adolescent's difficulties in emotion regulation, respectively.

Variables were entered into the equation via four steps. In order to control for the possible effects of socio-demographic variables (i.e., income, gender, type of school, mother's and father's education level), these first step variables were hierarchically entered (via stepwise method) into the equation. After controlling for the socio-demographic variables that were significantly associated with the dependent variable, variables related to maternal characteristics (i.e., mother's difficulties in emotion regulation, mother's psychological symptoms, and mother's

personality traits) were hierarchically entered into the equation on the second step. After controlling for the significant maternal characteristics, the factors of mothers' parental rearing behaviors and adolescents' perceived parental rearing behaviors (i.e., rejection, overprotection, comparison, warmth) were hierarchically entered into the equation on the third step. Lastly, after controlling for parental rearing behaviors, the factors of personality traits (i.e., extraversion, conscientiousness, agreeableness, neuroticism, openness to experience, and negative valence) were hierarchically entered into the equation on the fourth step.

3.3.6.2.1 Variables Associated with Adolescent's Difficulties in Emotion

Regulation

Hierarchical regression analysis run for adolescent's difficulties in emotion regulation revealed that among control variables, only type of school ($\beta = -.17$, $t [265] = -2.76$, $p < .01$) had significant negative association with adolescent's difficulties in emotion regulation. Type of school explained 3 % of the variance ($F [1, 265] = 7.62$, $p < .01$). After controlling for this factor, among maternal characteristics, mother's difficulties in emotion regulation ($\beta = .21$, $t [264] = 3.57$, $p < .001$) and mother's negative valence ($\beta = .13$, $t [263] = 2.14$, $p < .05$) had significant associations with adolescent's difficulties in emotion regulation. Mother's difficulties in emotion regulation increased explained variance to 7 % ($F_{\text{change}} [1, 264] = 12.71$, $p < .001$) and with the entrance of mother's negative valence, explained variance increased to 9 % ($F_{\text{change}} [1, 263] = 4.56$, $p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal rejection ($\beta = .35$, $t [262] = 5.83$, $p < .001$) and perceived maternal overprotection ($\beta = .19$, $t [261] = 3.14$, $p < .01$) significantly associated with adolescent's difficulties in emotion regulation. Perceived maternal rejection increased explained variance to 19 % ($F_{\text{change}} [1, 262] = 33.94$, $p < .001$) and with the entrance of perceived maternal overprotection, explained variance increased to 22 % ($F_{\text{change}} [1, 261] = 9.85$, $p < .01$). After controlling for parental rearing behaviors, among basic personality traits, adolescent's neuroticism ($\beta = .39$, $t [260] = 7.38$, $p < .001$), openness to experience ($\beta = -.30$, $t [259] = -6.32$, $p < .001$), conscientiousness ($\beta = -.17$, $t [258] = -3.29$, $p <$

.001), and extraversion ($\beta = -.11$, $t [257] = -2.07$, $p < .05$) significantly associated with adolescent's difficulties in emotion regulation. Adolescent's neuroticism increased explained variance to 36 % ($F_{\text{change}} [1, 260] = 54.51$, $p < .001$) with the entrance of adolescent's openness to experience, explained variance increased up to 44 % ($F_{\text{change}} [1, 259] = 39.97$, $p < .001$) and with the entrance of adolescent's conscientiousness, explained variance increased to 47 % ($F_{\text{change}} [1, 258] = 18.85$, $p < .001$); then with the entrance of adolescent's extraversion, explained variance increased up to 48 % ($F_{\text{change}} [1, 257] = 4.28$, $p < .05$). Results are presented on Table 3.22.

Totally, nine factors as type of school, mother's difficulties in emotion regulation, mother's negative valence, perceived maternal rejection, perceived maternal overprotection, and adolescent's neuroticism, openness to experience, conscientiousness, and extraversion had significant associations with adolescent's difficulties in emotion regulation. That is, adolescents from regular high school, those whose mothers had more difficulties in emotion regulation and were high in negative valence, those perceiving more maternal rejection and maternal overprotection, and those who were high in neuroticism but low in openness to experience, conscientiousness, and extraversion were more likely to have difficulties in emotion regulation as compared to those from Anatolian high school, those whose mothers had less difficulties in emotion regulation and were low in negative valence, those perceiving less maternal rejection and maternal overprotection, and those who were low in neuroticism but high in openness to experience, conscientiousness, and extraversion.

Table 3. 22 Variables Associated with Adolescent's Difficulties in Emotion Regulation

Dependent Variable	F_{change}	df	B	t (within set)	R^2
Adolescent's DERS					
Step 1: Control Variables					
Type of school (regular)	7.62**	265	-.17	-2.76**	.03
Step 2: Mother Characteristics					
Mother-DERScore	12.71***	264	.21	3.57***	.07
Mother-negative valence	4.56*	263	.13	2.14*	.09
Step 3: Parental Rearing Behaviors					
Perceived-rejection	33.94***	262	.35	5.83***	.19
Perceived-overprotection	9.85**	261	.19	3.14**	.22
Step 4: Basic Personality Traits					
Adolescent-neuroticism	54.51***	260	.39	7.38***	.36
Adolescent-openness to experience	39.97***	259	-.30	-6.32***	.44
Adolescent- conscientiousness	10.85***	258	-.17	-3.29***	.47
Adolescent-extraversion	4.28*	257	-.11	-2.07*	.47

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.2.2 Variables Associated with Mother's Report of Adolescent's Difficulties in Emotion Regulation

Hierarchical regression analysis run for mother's report of adolescent's difficulties in emotion regulation revealed that among control variables, only income ($\beta = -.19$, t ([66] = -3.16, $p < .01$) had significant negative association with mother's report of adolescent's difficulties in emotion regulation. Income explained 4 % of the variance (F [1, 266] = 9.99, $p < .01$). After controlling for this factor, among maternal characteristics, mother's difficulties in emotion regulation ($\beta = .60$, t [265] = 12.26, $p < .001$), mother's psychological symptoms ($\beta = .21$, t [264] = 3.82, $p < .001$), and mother's extraversion ($\beta = -.11$, t [263] = -2.17, $p < .05$) had significant associations with mother's report of adolescent's difficulties in emotion regulation. Mother's difficulties in emotion regulation increased explained variance to 39 % (F_{change} [1, 265] = 150.26, $p < .001$) with the entrance of mother's psychological symptoms, explained variance increased up to 42 % (F_{change} [1, 264] = 14.61, $p < .001$), and with the entrance of mother's extraversion, explained variance increased up to 43 % (F_{change} [1, 263] = 4.71, $p < .05$). Following these maternal characteristics,

among parental rearing behaviors, perceived maternal comparison ($\beta = .18, t [262] = 3.77, p < .001$) and mother's report of warmth ($\beta = -.12, t [261] = -2.47, p < .05$) significantly associated with mother's report of adolescent's difficulties in emotion regulation. Perceived maternal comparison increased explained variance to 46 % ($F_{\text{change}} [1, 262] = 14.18, p < .001$) and with the entrance of mother's report of warmth, explained variance increased up to 47 % ($F_{\text{change}} [1, 261] = 6.09, p < .05$). After controlling parental rearing behaviors, among basic personality traits adolescent's extraversion ($\beta = -.11, t [260] = -2.46, p < .05$) significantly associated with mother's report of adolescent's difficulties in emotion regulation. Adolescent's extraversion increased explained variance to 48 % ($F_{\text{change}} [1, 260] = 6.05, p < .05$). Results are presented on Table 3.23.

Totally, seven factors as income, mother's difficulties in emotion regulation, mother's psychological symptoms, mother's extraversion, perceived maternal comparison, mother's report of warmth, and adolescent's extraversion had significant associations with mother's report of adolescent's difficulties in emotion regulation. That is, mothers having low family income, those having more difficulties in emotion regulation, reporting more psychological symptoms, and were less extrovert, those whose children perceived more maternal comparison, those reported less warmth, and those whose children were less extrovert were more likely to report adolescent's difficulties in emotion regulation as compared to those having high family income, having less difficulties in emotion regulation, reporting less psychological symptoms, and were more extrovert, those whose children perceive less maternal comparison and those reporting more warmth, and those whose children were more extrovert.

Table 3.23 Variables Associated with Mother's Report of Adolescent's Difficulties in Emotion Regulation

Dependent Variable	F_{change}	df	B	t (within set)	R^2
Mother's report of Adolescent's DERS					
Step 1: Control Variables					
Income (low)	9.99**	266	-.19	-3.16	.04
Step 2: Mother Characteristics					
Mother-DERScore	150.26***	265	.60	12.26	.39
Mother- psychological symptoms	14.61***	264	.21	3.82	.42
Mother-extraversion	4.71*	263	-.11	-2.17	.43
Step 3: Parental Rearing Behaviors					
Perceived-comparison	14.18***	262	.18	3.77	.46
Mother reported-warmth	6.09*	261	-.12	-2.47	.47
Step 4: Basic Personality Traits					
Adolescent-extraversion	6.05*	260	-.11	-2.46	.48

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.3 Variables Associated with Psychological Distress Measures

Separate hierarchical multiple regression analyses were conducted to reveal the significant associates of psychological distress measures of depression, total difficulties, negative affect, and positive affect.

Variables were entered into the equation via five steps. In order to control for the possible effects of socio-demographic variables (i.e., income, gender, type of school, mother's and father's education level), these first step variables were hierarchically entered (via stepwise method) into the equation. After controlling for the socio-demographic variables that were significantly associated with the dependent variable, variables related to maternal characteristics (i.e., mother's difficulties in emotion regulation, mother's psychological symptoms, and mother's personality traits) were hierarchically entered into the equation on the second step. After controlling for the significant maternal characteristics, the factors of mothers' parental rearing behaviors and adolescents' perceived parental rearing behaviors (i.e., rejection, overprotection, comparison, warmth) were hierarchically entered into the equation on the third step. Next, after controlling for parental rearing behaviors, the

factors of personality traits (i.e., extraversion, conscientiousness, agreeableness, neuroticism, openness to experience, and negative valence) were hierarchically entered into the equation on the fourth step. Lastly, after controlling for basic personality traits, adolescents' difficulties in emotion regulation and mother's report of adolescent's difficulties in emotion regulation were hierarchically entered into the equation on the fifth step.

3.3.6.3.1 Variables Associated with Adolescent's Depression

Hierarchical regression analysis run for adolescent's depression revealed that among control variables, only type of school ($\beta = -.21$, $t [262] = -3.43$, $p < .001$) had significant negative association with adolescent's depression. Type of school explained 4 % of the variance ($F [1, 262] = 11.79$, $p < .001$). After controlling for this factor, among maternal characteristics, mother's neuroticism ($\beta = .20$, $t [261] = 3.30$, $p < .001$) and mother's agreeableness ($\beta = -.14$, $t [260] = -2.27$, $p < .05$) had significant associations with adolescent's depression. Mother's neuroticism increased explained variance to 8 % ($F_{\text{change}} [1, 261] = 10.86$, $p < .001$) and with the entrance of mother's agreeableness, explained variance increased up to 10 % ($F_{\text{change}} [1, 260] = 5.17$, $p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal warmth ($\beta = -.29$, $t [259] = -4.95$, $p < .001$) and perceived maternal overprotection ($\beta = .23$, $t [258] = 3.96$, $p < .001$) significantly associated with adolescent's depression. Perceived maternal warmth increased explained variance to 18 % ($F_{\text{change}} [1, 259] = 24.45$, $p < .001$) and with the entrance of perceived maternal overprotection, explained variance increased up to 22 % ($F_{\text{change}} [1, 258] = 15.64$, $p < .01$). After controlling for parental rearing behaviors, among basic personality traits, adolescent's extraversion ($\beta = -.36$, $t [257] = -6.80$, $p < .001$), conscientiousness ($\beta = -.32$, $t [256] = -6.19$, $p < .001$), neuroticism ($\beta = .18$, $t [255] = 3.28$, $p < .001$), and openness to experience ($\beta = -.11$, $t [257] = -1.99$, $p < .05$) significantly associated with adolescent's depression. Adolescent's extraversion increased explained variance to 34 % ($F_{\text{change}} [1, 257] = 46.26$, $p < .001$), with the entrance of adolescent's conscientiousness, explained variance increased up to 43 % ($F_{\text{change}} [1, 256] = 38.36$, $p < .001$), with the entrance of adolescent's neuroticism,

explained variance increased to 45 % ($F_{\text{change}} [1, 255] = 10.78, p < .001$) and with the entrance of adolescent's openness to experience, explained variance increased up to 46 % ($F_{\text{change}} [1, 254] = 3.97, p < .05$). Following these basic personality traits, among adolescent's difficulties in emotion regulation and mother's report of adolescent's difficulties in emotion regulation, only adolescent's difficulties in emotion regulation ($\beta = .40, t [253] = 7.11, p < .001$) had significant association with adolescent's depression. Adolescent's difficulties in emotion regulation increased explained variance to 55 % ($F_{\text{change}} [1, 253] = 50.50, p < .001$). Results are presented on Table 3.24.

Totally, ten factors as type of school, mother's neuroticism and agreeableness, perceived maternal warmth and overprotection, and adolescent's extraversion, conscientiousness, neuroticism, and openness to experience, and adolescent's difficulties in emotion regulation had significant associations with adolescent's depression. That is, adolescents from regular high school, those whose mothers were high in neuroticism but low in agreeableness, those perceiving less maternal warmth but more maternal overprotection, those who were low in extraversion, conscientiousness, openness to experience but high in neuroticism, and those who had more difficulties in emotion regulation were more likely to have depression as compared to those from Anatolian high school, those whose mothers were low in neuroticism but high in agreeableness, those perceiving more maternal warmth but less maternal overprotection, those who were high in extraversion, conscientiousness, openness to experience but low in neuroticism, and those who had less difficulties in emotion regulation.

Table 3. 24 *Variables Associated with Depression*

Dependent Variable	F_{change}	df	β	t (within set)	R^2
Depression					
Step 1: Control Variables					
Type of school (regular)	11.79**	262	-.21	-3.43**	.04
Step 2: Mother Characteristics					
Mother-neuroticism	10.86**	261	.20	3.30**	.08
Mother-agreeableness	5.17*	260	-.14	-2.27*	.10

Table 3. 24 Variables Associated with Depression (continued)

	F_{change}	Df	β	t (within set)	R^2
Step 3: Parental Rearing Behaviors					
Perceived-warmth	24.45**	259	-.29	-4.95**	.18
Perceived-overprotection	15.64**	258	.23	3.96**	.22
Step 4: Basic Personality Traits					
Adolescent- extraversion	46.26**	257	-.36	-6.80**	.34
Adolescent- conscientiousness	38.36**	256	-.32	-6.19**	.43
Adolescent- neuroticism	10.78**	255	.18	3.28**	.45
Adolescent-openness to experience	3.97*	254	-.11	-1.99*	.46
Step 5: Adolescent DERS					
Adolescent reported-DERScores	50.50**	253	.40	7.11**	.55

* $p < .05$, ** $p < .001$

3.3.6.3.2 Variables Associated with Adolescent's Total Difficulties

Hierarchical regression analysis run for adolescent's total difficulties revealed that among control variables, only type of school ($\beta = -.24$, $t [263] = -3.98$, $p < .001$) had significant negative association with adolescent's total difficulties. Type of school explained 6 % of the variance ($F [1, 263] = 15.84$, $p < .001$). After controlling for this factor, among maternal characteristics, mother's difficulties in emotion regulation ($\beta = .18$, $t [262] = 3.03$, $p < .01$) and mother's negative valence ($\beta = .13$, $t [261] = 2.12$, $p < .05$) had significant associations with adolescent's total difficulties. Mother's difficulties in emotion regulation increased explained variance to 9 % ($F_{\text{change}} [1, 262] = 9.20$, $p < .01$) and with the entrance of mother's negative valence, explained variance increased up to 10 % ($F_{\text{change}} [1, 261] = 4.50$, $p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal rejection ($\beta = .25$, $t [260] = 4.04$, $p < .001$) significantly associated with adolescent's total difficulties. Perceived maternal rejection increased explained variance to 16 % ($F_{\text{change}} [1, 260] = 16.31$, $p < .001$). After controlling for this factor, among basic personality traits, adolescent's neuroticism ($\beta = .55$, $t [259] = 11.04$, $p < .001$) and conscientiousness ($\beta = -.14$, $t [258] = -2.64$, $p < .01$) significantly associated with adolescent's total difficulties. Adolescent's neuroticism increased explained variance to 43 % ($F_{\text{change}} [1, 259] = 121.84$, $p < .001$) and with the entrance of adolescent's conscientiousness, explained variance increased up to 44 % ($F_{\text{change}} [1, 258] = 6.95$, $p < .01$). Following these basic personality traits, among adolescent's difficulties in

emotion regulation and mother's report of adolescent's difficulties in emotion regulation, only adolescent's difficulties in emotion regulation ($\beta = .36, t [257] = 6.45, p < .001$) had significant association with adolescent's total difficulties. Adolescent's difficulties in emotion regulation increased explained variance to 52 % ($F_{\text{change}} [1, 257] = 41.57, p < .001$). Results are presented on Table 3.25.

Totally, seven factors as type of school, mother's difficulties in emotion regulation and mother's negative valence, perceived maternal rejection, adolescent's neuroticism and conscientiousness, and adolescent's difficulties in emotion regulation had significant associations with adolescent's total difficulties. That is, adolescents from regular high school, those whose mothers had more difficulties in emotion regulation and were high in negative valence, those perceiving more maternal rejection, those who were high in neuroticism but low in conscientiousness, and those who had more difficulties in emotion regulation were more likely to have total difficulties as compared to those from Anatolian high school, those whose mothers had less difficulties in emotion regulation and were low in negative valence, those perceiving less maternal rejection, those who were low in neuroticism but high in conscientiousness, and those who had less difficulties in emotion regulation.

Table 3. 25 Variables Associated with Total Difficulties

Dependent Variable	F_{change}	df	β	t (within set)	R^2
Total difficulties					
Step 1: Control Variables					
Type of school (regular)	15.84***	263	-.24	-3.98***	.06
Step 2: Mother Characteristics					
Mother-DERScores	9.20**	262	.18	3.03**	.09
Mother-negative valence	4.50*	261	.13	2.12*	.10
Step 3: Parental Rearing Behaviors					
Perceived-rejection	16.31***	260	.25	4.04***	.16
Step 4: Basic Personality Traits					
Adolescent- neuroticism	121.84***	259	.55	11.04***	.43
Adolescent- conscientiousness	6.95**	258	-.14	-2.64**	.44
Step 5: Adolescent DERS					
Adolescent reported-DERScores	41.57***	257	.36	6.45***	.52

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.3.3 Variables Associated with Adolescent's Negative Affect

Hierarchical regression analysis run for adolescent's negative affect revealed that among control variables, only type of school ($\beta = -.18, t [260] = -3.00, p < .01$) had significant negative association with adolescent's negative affect. Type of school explained 3 % of the variance ($F [1, 260] = 8.97, p < .01$). After controlling for this factor, among maternal characteristics, mother's neuroticism ($\beta = .30, t [259] = 5.05, p < .001$) and mother's negative valence ($\beta = .13, t [258] = 2.04, p < .05$) had significant associations with adolescent's negative affect. Mother's neuroticism increased explained variance to 12 % ($F_{\text{change}} [1, 259] = 25.51, p < .001$) and with the entrance of mother's negative valence, explained variance increased up to 13 % ($F_{\text{change}} [1, 258] = 4.18, p < .05$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal rejection ($\beta = .26, t [257] = 4.45, p < .001$) and overprotection ($\beta = .15, t [256] = 2.44, p < .05$) significantly associated with adolescent's negative affect. Perceived maternal rejection increased explained variance to 20 % ($F_{\text{change}} [1, 257] = 19.82, p < .001$) and with the entrance of overprotection, explained variance increased up to 21 % ($F_{\text{change}} [1, 256] = 5.95, p < .05$). After controlling for these parental rearing behaviors, among basic personality traits, adolescent's neuroticism ($\beta = .58, t [255] = 11.93, p < .001$) and extraversion ($\beta = -.10, t [254] = -2.03, p < .05$) significantly associated with adolescent's negative affect. Adolescent's neuroticism increased explained variance to 50 % ($F_{\text{change}} [1, 255] = 142.25, p < .001$) and with the entrance of adolescent's extraversion, explained variance increased to 51 % ($F_{\text{change}} [1, 254] = 4.11, p < .05$). Following these basic personality traits, among adolescent's difficulties in emotion regulation and mother's report of adolescent's difficulties in emotion regulation, only adolescent's difficulties in emotion regulation ($\beta = .29, t [253] = 5.39, p < .001$) had significant association with adolescent's negative affect. Adolescent's difficulties in emotion regulation increased explained variance to 56 % ($F_{\text{change}} [1, 253] = 29.00, p < .001$). Results are presented on Table 3.26.

Totally, eight factors as type of school, mother's neuroticism and negative valence, perceived maternal rejection and overprotection, adolescent's neuroticism and extraversion, and adolescent's difficulties in emotion regulation had significant

associations with adolescent's negative affect. That is, adolescents from regular high school, those whose mothers were high in neuroticism and negative valence, those perceiving more maternal rejection and overprotection, those who were high in neuroticism but low in extraversion, and those who have more difficulties in emotion regulation were more likely to have negative affect as compared to those from Anatolian high school, those whose mothers were low in neuroticism and negative valence, those perceiving less maternal rejection and overprotection, those who were low in neuroticism but high in extraversion, and those who had less difficulties in emotion regulation.

Table 3. 26 Variables Associated with Negative Affect

Dependent Variable	F_{change}	df	β	t (within set)	R^2
Negative Affect					
Step 1: Control Variables					
Type of school (regular)	8.97**	260	-.18	-3.00**	.03
Step 2: Mother Characteristics					
Mother-neuroticism	25.51***	259	.30	5.05***	.12
Mother-negative valence	4.18*	258	.13	2.04*	.13
Step 3: Parental Rearing Behaviors					
Perceived-rejection	19.82***	257	.26	4.45***	.20
Perceived-overprotection	5.95*	256	.15	2.44*	.21
Step 4: Basic Personality Traits					
Adolescent- neuroticism	142.25***	255	.58	11.93***	.50
Adolescent- extraversion	4.11*	254	-.10	-2.03*	.51
Step 5: Adolescent DERS					
Adolescent reported-DERScores	29.00***	253	.29	5.39***	.54

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.6.3.4 Variables Associated with Adolescent's Positive Affect

Hierarchical regression analysis run for adolescent's positive affect revealed that among control variables, only father's education level ($\beta = -.14$, $t [258] = -2.26$, $p < .05$) had significant negative association with adolescent's positive affect. Father's education explained 2 % of the variance ($F [1, 258] = 5.10$, $p < .05$). After controlling for this factor, among maternal characteristics, mother's openness to experience ($\beta = .34$, $t [257] = 5.73$, $p < .001$) and agreeableness ($\beta = .18$, $t [257] =$

2.78, $p < .01$) had significant associations with adolescent's positive affect. Mother's openness to experience increased explained variance to 13 % ($F_{\text{change}} [1, 257] = 32.88, p < .001$) and with the entrance of mother's agreeableness, explained variance increased to 16 % ($F_{\text{change}} [1, 256] = 7.71, p < .01$). Following these maternal characteristics, among parental rearing behaviors, perceived maternal warmth ($\beta = .21, t [255] = 3.69, p < .001$) had significantly associated with adolescent's positive affect. Perceived maternal warmth increased explained variance to 20 % ($F_{\text{change}} [1, 255] = 13.62, p < .001$). After controlling for this factor, among basic personality traits, adolescent's openness to experience ($\beta = .48, t [254] = 9.47, p < .001$), conscientiousness ($\beta = .25, t [253] = 4.81, p < .001$), and negative valence ($\beta = .12, t [252] = 2.36, p < .05$) significantly associated with adolescent's positive affect. Adolescent's openness to experience increased explained variance to 41 % ($F_{\text{change}} [1, 254] = 89.60, p < .001$), with the entrance of adolescent's conscientiousness, explained variance increased to 46 % ($F_{\text{change}} [1, 253] = 23.17, p < .001$), and with the entrance of negative valence, explained variance increased up to 47 % ($F_{\text{change}} [1, 252] = 5.57, p < .05$). Following these basic personality traits, among adolescent's difficulties in emotion regulation and mother's report of adolescent's difficulties in emotion regulation, none of the reports about adolescent's difficulties in emotion regulation had significant association with adolescent's positive affect. Results are presented on Table 3.27.

Totally, seven factors as father's education level, mother's openness to experience and agreeableness, perceived maternal warmth, and adolescent's openness to experience, conscientiousness, and negative valence had significant associations with adolescent's positive affect. That is, adolescents whose fathers had less education, those whose mothers were more open to experience and more agreeable, those perceiving more maternal warmth, and those who were high in openness to experience, conscientiousness, and negative valence were more likely to have positive affect as compared to those adolescents whose fathers had high education, those whose mothers were less open to experience and less agreeable, those perceiving less maternal warmth, and those who were low in openness to experience, conscientiousness, and negative valence.

Table 3. 27 Variables Associated with Positive Affect

Dependent Variable	F_{change}	df	β	t (within set)	R^2
Positive Affect					
Step 1: Control Variables					
Father Education (low)	5.10*	258	-.14	-2.26*	.02
Step 2: Mother Characteristics					
Mother-openness to experience	32.88***	257	.34	5.73***	.13
Mother-agreeableness	7.71**	256	.18	2.78**	.16
Step 3: Parental Rearing Behaviors					
Perceived-warmth	13.62***	255	.21	3.69***	.20
Step 4: Basic Personality Traits					
Adolescent- openness to experience	89.60***	254	.48	9.47***	.41
Adolescent- conscientiousness	23.17***	253	.25	4.81***	.46
Adolescent-negative valence	5.57*	252	.12	2.36*	.47
Step 5: Adolescent DERS					
-					

* $p < .05$, ** $p < .01$, *** $p < .001$

3.3.7 Mediation Analyses

In order to test whether adolescent's difficulties in emotion regulation mediate the relationship of perceived adverse parental rearing behaviors (i.e., rejection, overprotection, and comparison) with psychological distress measures of depression, total difficulties, and negative affect separate mediation analyses were conducted. Baron and Kenny's (1986) guidelines for performing mediation analyses were followed. According to these guidelines, there are four requirements for mediation. Firstly, there must be a significant relationship between the independent variable and the mediator variable. Secondly, the mediator variable and the dependent variable should be related. Lastly, there must be significant relationship between independent and dependent variable, which should be reduced when the effect of mediator variable is controlled. In other words, the relationship between dependent variable and independent variable should no longer be significant or should significantly decrease its strength, after controlling the effect of mediator variable. Thus, totally nine separate mediation analyses were examined, by following the suggestions of Baron and Kenny (1986).

3.3.7.1 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Rejection and Depression

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and depression relationship, adolescent's difficulties in emotion regulation should have a significant association with perceived maternal rejection. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal rejection entered into the equation as the second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 478] = 4.46, p < .001$). After controlling this variance, perceived maternal rejection increased explained variance to 17 % ($F_{\text{change}} [1, 477] = 72.34, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .37, t [477] = 8.51, p < .001$). Results are presented on Table 3.28.A.

On the second analysis, depression was the dependent variable, control variables entered as the first step variables and the result of this analyses revealed significant association between type of school and depression ($\beta = -.15, t [472] = -2.70, p < .01$), and explained 6 % of the variance ($F [5, 472] = 5.79, p < .001$). After controlling for this variance, perceived maternal rejection entered into the equation and explained variance increased to 16 % ($F_{\text{change}} [1, 471] = 59.50, p < .001$), and had a significant association with depression ($\beta = .34, t [471] = 7.71, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 44 % ($F_{\text{change}} [1, 470] = 227.23, p < .001$), and had a significant association with depression ($\beta = .57, t [470] = 15.07, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal rejection reduced significantly ($\beta = .13, t (470) = 3.34, p < .01$). Results are presented on Table 3.28.B. The sobel test confirmed this significant decrease ($z = 7.39, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and depression relationship was supported. Further analysis of the results revealed that 62 % of the perceived

maternal rejection — depression path was accounted for by adolescent’s difficulties in emotion regulation (for this analysis see Holmbeck, 2002).

These two regression analyses, together with the sobel test indicated that adolescent’s difficulties in emotion regulation mediate perceived maternal rejection and depression relationship. Therefore, it can be suggested that the observed association between perceived maternal rejection and depression was maintained by adolescent’s difficulties in emotion regulation. The mediator role of adolescent’s difficulties in emotion regulation between perceived maternal rejection and depression is depicted in Figure 3.18.

Table 3. 28 *Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Rejection and Depression*

Model:					
Independent Variables	df	F	B	T	R ²
A. DV: DERS					
1. Type of School	5, 478	4.46**	-.15	-2.81*	.05
2. Maternal Rejection	1, 477	72.34**	.37	8.51**	.17
B. DV: Depression					
1. Type of School	5, 472	5.79**	-.15	-2.70*	.06
2. Maternal Rejection	1, 471	59.50**	.34	7.71**	.16
3. DERS	1, 470	227.23**	.57	15.07**	.44
(Maternal Rejection)	470		.13	3.34*	

* $p < .01$, ** $p < .001$

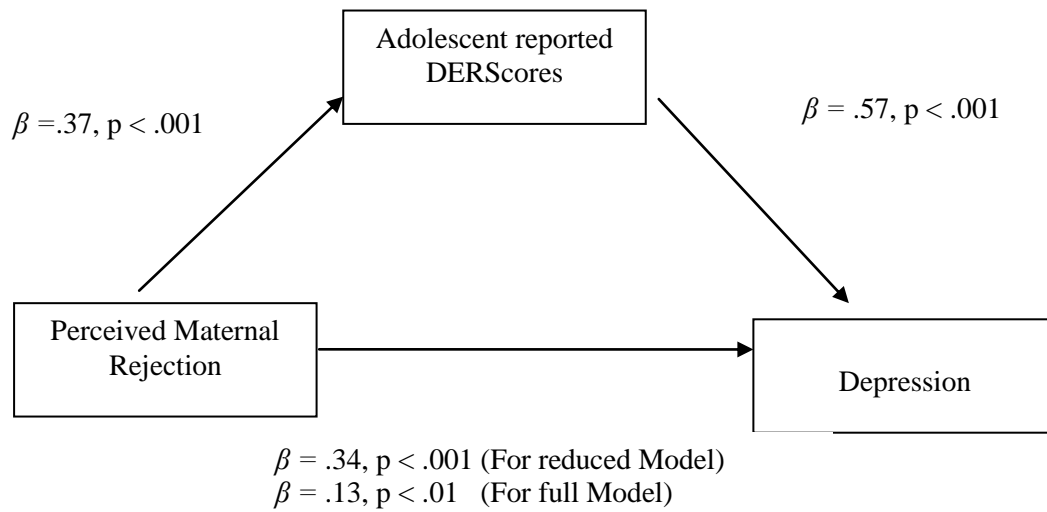


Figure 3. 18 *Mediator role of Adolescent Reported DERS between Perceived Maternal Rejection and Depression*

3.3.7.2 Mediator Role of Adolescent’s Difficulties in Emotion Regulation between Perceived Maternal Rejection and Total difficulties

Considering the mediator role of adolescent’s difficulties in emotion regulation between perceived maternal rejection and total difficulties relationship adolescent’s difficulties in emotion regulation should have a significant association with perceived maternal rejection. Thus, to examine this association regression analysis was conducted, in which adolescent’s difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as the first step variables and perceived maternal rejection entered into the equation as the second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 478] = 4.46, p < .001$). After controlling for this variance, perceived maternal rejection increased explained variance to 17 % ($F_{\text{change}} [1, 477] = 72.34, p < .001$), and had a significant association with adolescent’s difficulties in emotion regulation ($\beta = .37, t [477] = 8.51, p < .001$). Results are presented on Table 3.29.A.

On the second analysis, total difficulties was the dependent variable, control variables entered as the first step variables and the results revealed significant

association between type of school and total difficulties level ($\beta = -.21, t [477] = -4.02, p < .001$) and this association explained 7 % of the variance ($F [5, 477] = 6.81, p < .001$). After controlling for this variance, perceived maternal rejection entered into the equation and explained variance increased to 16 % ($F_{\text{change}} [1, 476] = 54.31, p < .001$), and had a significant association with total difficulties ($\beta = .33, t [476] = 7.37, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 40 % ($F_{\text{change}} [1, 475] = 189.31, p < .001$), and had a significant association with total difficulties ($\beta = .54, t [475] = 13.76, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal rejection reduced significantly ($\beta = .12, t (475) = 3.04, p < .01$). Results are presented on Table 3.29.B. The sobel test confirmed this significant decrease ($z = 7.14, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and total difficulties relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal rejection and total difficulties relationship. Therefore, it can be suggested that the observed association between perceived maternal rejection and total difficulties was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 61 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and total difficulties is depicted in Figure 3.19.

Table 3. 29 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Rejection and Total difficulties

Model:					
Independent Variables	df	F	B	T	R ²
A. DV: DERS					
1. Type of School	5, 478	4.46**	-.15	-2.81*	.05
2. Maternal Rejection	1, 477	72.34**	.37	8.51**	.17
B. DV: Total difficulties					
1. Type of School	5, 477	6.81**	-.21	-4.02*	.07
2. Maternal Rejection	1, 476	54.31**	.33	7.37**	.16
3. DERS (Maternal Rejection)	1, 475 475	189.31**	.54 .12	13.76** 3.04*	.40

* $p < .01$, ** $p < .001$

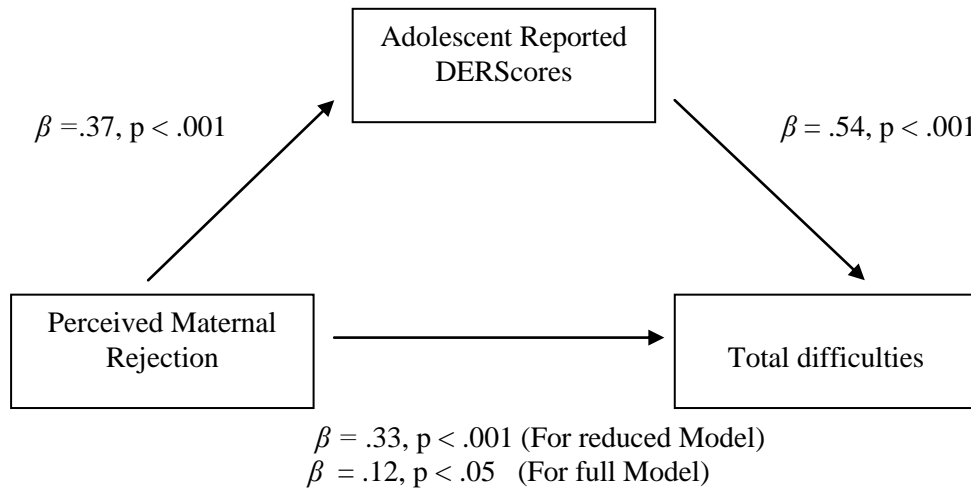


Figure 3. 19 Mediator role of Adolescent Reported DERS between Perceived Maternal Rejection and Total difficulties

3.3.7.3 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Rejection and Negative Affect

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and negative affect relationship, adolescent's difficulties in emotion regulation should have a significant association with perceived maternal rejection. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was

the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as the first step variables and perceived maternal rejection entered into the equation as the second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 478] = 4.46, p < .001$). After controlling for this variance, perceived maternal rejection increased explained variance to 17 % ($F_{\text{change}} [1, 477] = 72.34, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .37, t [477] = 8.51, p < .001$). Results are presented on Table 3.30.A.

On the second analysis, negative affect was the dependent variable, control variables entered as the first step variables and the results revealed significant association between type of school and negative affect ($\beta = -.12, t [470] = -2.16, p < .01$) and explained 4 % of the variance ($F [5, 470] = 3.59, p < .001$). After controlling for this variance, perceived maternal rejection entered into the equation and explained variance increased to 15 % ($F_{\text{change}} [1, 469] = 58.71, p < .001$), and had a significant association with negative affect ($\beta = .35, t [469] = 7.66, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 35 % ($F_{\text{change}} [1, 468] = 151.12, p < .001$), and had a significant association with negative affect ($\beta = .51, t [468] = 12.29, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal rejection reduced significantly ($\beta = .15, t (468) = 3.60, p < .001$). Results are presented on Table 3.30.B. The sobel test confirmed this significant decrease ($z = 6.99, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and negative affect relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal rejection and negative affect relationship. Therefore, it can be suggested that the observed association between perceived maternal rejection and negative affect was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 55 % of this association.

The mediator role of adolescent's difficulties in emotion regulation between perceived maternal rejection and negative affect is depicted in Figure 3.20.

Table 3. 30 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Rejection and Negative Affect

Model:					
Independent Variables	df	F	B	T	R ²
A. DV: DERS					
1. Type of School	5, 478	4.46**	-.15	-2.81*	.05
2. Maternal Rejection	1, 477	72.34**	.37	8.51**	.17
B. DV: Negative Affect					
1. Type of School	5, 470	3.59**	-.12	-2.16*	.04
2. Maternal Rejection	1, 469	58.71**	.35	7.66**	.15
3. DERS (Maternal Rejection)	1, 468	151.12**	.51	12.29**	.35
	468		.15	3.60**	

* $p < .01$, ** $p < .001$.

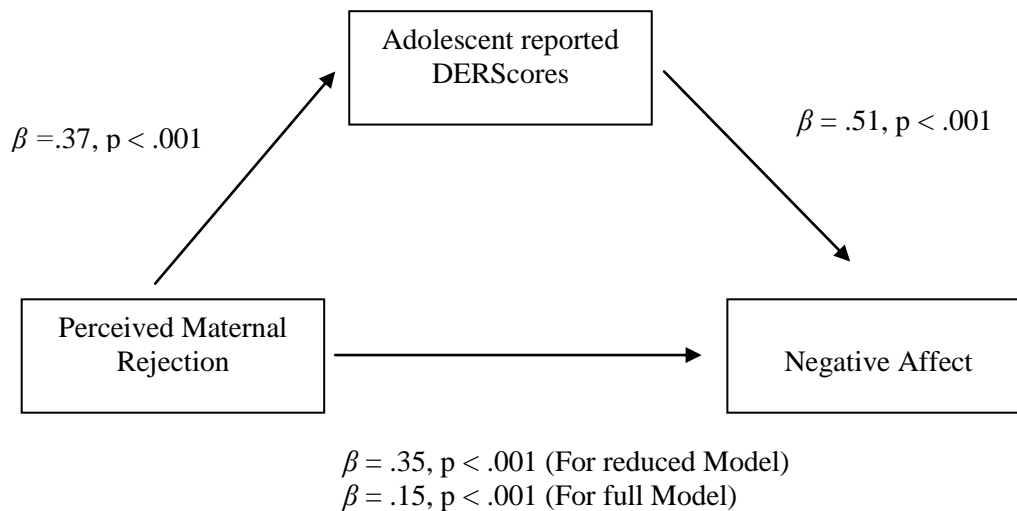


Figure 3. 20 Mediator role of Adolescent Reported DERS between Perceived Maternal Rejection and Negative Affect

3.3.7.4 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Overprotection and Depression

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and depression relationship, adolescent's difficulties in emotion regulation should also have a significant

association with perceived maternal overprotection. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as the first step variables and perceived maternal overprotection entered into the equation as the second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 524] = 5.63, p < .001$). After controlling for this variance, perceived maternal overprotection increased explained variance to 8 % ($F_{\text{change}} [1, 523] = 18.36, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .19, t [523] = 4.28, p < .001$). Results are presented on Table 3.31.A.

On the second analysis, depression was the dependent variable, control variables entered as the first step variables and the results revealed significant association between type of schools and depression ($\beta = -.16, t [517] = -3.10, p < .01$) and explained 5 % of the variance ($F [5, 517] = 5.62, p < .001$). After controlling for this variance, perceived maternal overprotection entered into the equation and explained variance increased to 7 % ($F_{\text{change}} [1, 516] = 10.77, p < .001$), and had a significant association with depression ($\beta = .15, t [516] = 3.28, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 40 % ($F_{\text{change}} [1, 515] = 280.97, p < .001$), and had a significant association with depression ($\beta = .60, t [515] = 16.76, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal overprotection lost its significance ($\beta = .03, t (515) = 0.85, p > .05$). Results are presented on Table 3.31.B. The sobel test confirmed this significant decrease ($z = 4.17, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and depression relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal overprotection and depression relationship. Therefore, it can be suggested that the

observed association between perceived maternal overprotection and depression was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 77 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and depression is depicted in Figure 2.22.

Table 3. 31 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Overprotection and Depression

Model:	df	F	B	T	R ²
Independent Variables					
A. DV: DERS					
1. Type of School	5, 524	5.63**	-.18	-3.55*	.05
2. Maternal Overprotection	1, 523	18.36**	.19	4.28**	.08
B. DV: Depression					
1. Type of School	5, 517	5.62**	-.16	-3.10*	.05
2. Maternal Overprotection	1, 516	10.77**	.15	3.28**	.07
3. DERS	1, 515	280.97**	.60	16.76**	.40
(Maternal Overprotection)	515		.03	0.85	

* $p < .01$, ** $p < .001$.

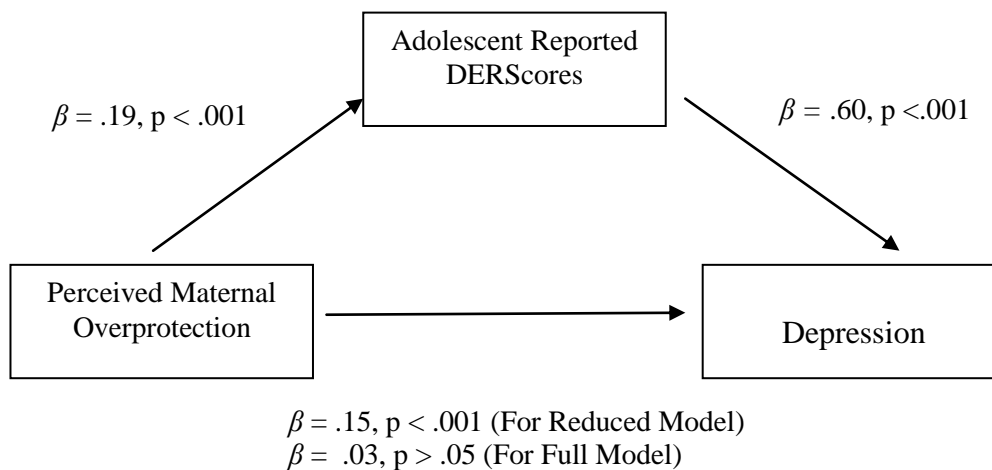


Figure 3. 21 Mediator role of Adolescent Reported DERScores between Perceived Maternal Overprotection and Depression

3.3.7.5 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Overprotection and Total difficulties

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and total difficulties relationship, adolescent's difficulties in emotion regulation should also have a significant association with perceived maternal overprotection. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal overprotection entered into the equation as second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 524] = 5.63, p < .001$). After controlling this variance, perceived maternal overprotection increased explained variance into 8 % ($F_{\text{change}} [1, 523] = 18.36, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .19, t [523] = 4.28, p < .001$). Results are presented on Table 3.32.A.

On the second analysis, total difficulties was the dependent variable, control variables entered as first step variables and the result of which the result of the regression analysis revealed significant association between type of school and total difficulties ($\beta = -.25, t [522] = -4.96, p < .001$) and explained 8 % of the variance ($F [5, 522] = 8.78, p < .001$). After controlling this variance, perceived maternal overprotection entered into the equation and explained variance increased to 9 % ($F_{\text{change}} [1, 521] = 9.35, p < .01$), and had a significant association with total difficulties ($\beta = .13, t [521] = 3.06, p < .01$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 38 % ($F_{\text{change}} [1, 520] = 238.34, p < .001$), and had a significant association with total difficulties ($\beta = .56, t [520] = 15.44, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal overprotection lost its significance ($\beta = .03, t (520) = 0.76, p > .01$). However, the sobel test did not confirm this significant decrease ($z = 1.61, p > .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal

overprotection and total difficulties relationship was not supported. The results are presented on Table 3.32.B.

Table 3. 32 *Summary of Regression Models Testing for Adolescent Reported DERScores as Mediator between Perceived Maternal Overprotection and Total difficulties*

Model:					
Independent Variables	df	<i>F</i>	<i>B</i>	<i>t</i>	<i>R</i> ²
A. DV: DERS					
1. Type of School	5, 524	5.63**	-.18	-3.55*	.05
2. Maternal Overprotection	1, 523	18.36**	.19	4.28**	.08
B. DV: Total difficulties					
1. Type of School	5, 522	8.78**	-.25	-4.96*	.08
2. Maternal Overprotection	1, 521	9.35*	.13	3.06*	.09
3. DERS	1, 520	238.34**	.56	15.44**	.38
(Maternal Overprotection)	520		.03	0.76	

* $p < .01$, ** $p < .001$

3.3.7.6 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Overprotection and Negative Affect

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and negative affect relationship, adolescent's difficulties in emotion regulation should also have a significant association with perceived maternal overprotection. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal overprotection entered into the equation as second step variable. As a result of this analysis 5 % of the variance was explained by type of school, ($F [5, 524] = 5.63, p < .001$). After controlling this variance, perceived maternal overprotection increased explained variance into 8 % ($F_{\text{change}} [1, 523] = 18.36, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .19, t [523] = 4.28, p < .001$). Results are presented on Table 3.33.A.

On the second analysis, negative affect was the dependent variable, type of school entered as first step variables and the result of which revealed significant association between type of school and negative affect ($\beta = -.13, t [515] = -2.44, p < .05$) and explained 3 % of the variance ($F [5, 515] = 3.29, p < .01$). After controlling this variance, perceived maternal overprotection entered into the equation and explained variance increased to 6 % ($F_{\text{change}} [1, 514] = 15.39, p < .001$), and had a significant association with negative affect ($\beta = .18, t [514] = 3.92, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 31 % ($F_{\text{change}} [1, 513] = 195, p < .001$), and had a significant association with negative affect ($\beta = .54, t [513] = 13.98, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal overprotection lost its significance ($\beta = .07, t (513) = 1.79, p > .05$). Results are presented on Table 3.33.B. The sobel test confirmed this significant decrease ($z = 4.12, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and negative affect relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal overprotection and negative affect relationship. Therefore, it is suggested that the observed association between perceived maternal overprotection and negative affect was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 57 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal overprotection and negative affect is depicted in Figure 3.22.

Table 3. 33 Summary of Regression Models Testing for Adolescent Reported DERScores as Mediator between Perceived Maternal Overprotection and Negative Affect

Model:					
Independent Variables	df	F	β	T	R ²
A. DV: DERS					
1. Type of School	5, 524	5.63**	-.18	-3.55*	.05
2. Maternal Overprotection	1, 523	18.36**	.19	4.28**	.08
B. DV: Negative Affect					
1. Type of School	5, 515	3.29*	-.13	-2.44*	.03
2. Maternal Overprotection	1, 514	15.39**	.18	3.92**	.06
3. DERS (Maternal Overprotection)	1, 513	195.42**	.54	13.98**	.32
	513		.07	1.79	

* $p < .01$, ** $p < .001$

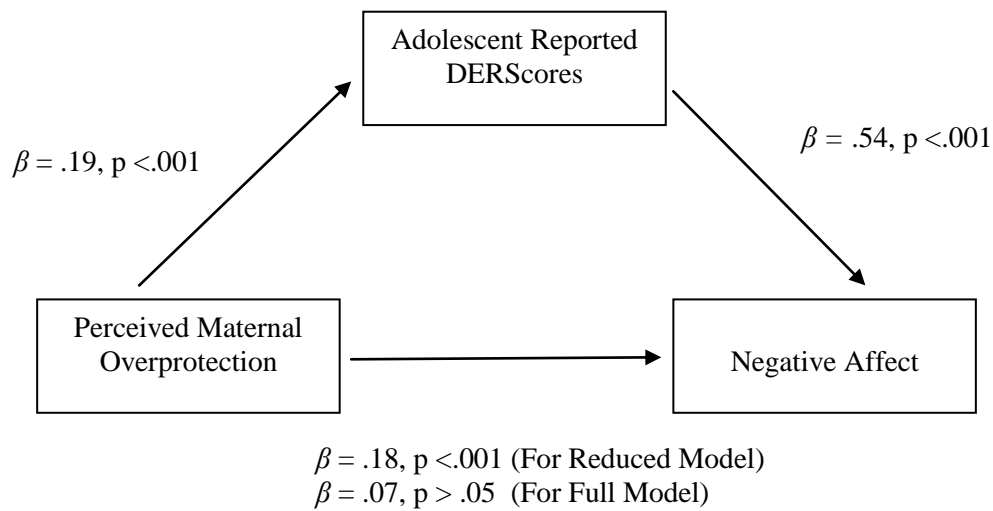


Figure 3. 22 Mediator role of Adolescent Reported DERScores between Perceived Maternal Overprotection and Negative affect

3.3.7.7 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Comparison and Depression

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and depression relationship, adolescent's difficulties in emotion regulation should also have a significant association with perceived maternal comparison. Thus, to examine this association

regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal comparison entered into the equation as second step variable. As a result of this analysis 4 % of the variance was explained by type of school, ($F_{\text{change}} [5, 529] = 5.50, p < .001$). After controlling this variance, perceived maternal comparison increased explained variance into 8 % ($F_{\text{change}} [1, 528] = 25.08, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .22, t [528] = 5.01, p < .001$). Results are presented on Table 3.34.A.

On the second analysis, depression was the dependent variable, control variables entered as first step variables and the result of which revealed significant association between type of school and depression ($\beta = -.16, t [522] = -3.06, p < .001$) and explained 4 % of the variance ($F [5, 522] = 5.74, p < .001$). After controlling this variance, perceived maternal comparison entered into the equation and explained variance increased to 7 % ($F_{\text{change}} [1, 521] = 14.48, p < .001$), and had a significant association with depression ($\beta = .17, t [521] = 3.81, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 40 % ($F_{\text{change}} [1, 520] = 279.10, p < .001$), and had a significant association with depression ($\beta = .60, t [520] = 16.71, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal comparison lost its significance ($\beta = .04, t (520) = 1.12, p > .05$). Results are presented on Table 3.34.B. The sobel test confirmed this significant decrease ($z = 4.82, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and depression relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal comparison and depression relationship. Therefore, it is suggested that the observed association between perceived maternal comparison and depression was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that

adolescent's difficulties in emotion regulation accounted for 77 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and depression is depicted in Figure 3.23.

Table 3. 34 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Comparison and Depression

Model:					
Independent Variables	df	F	β	t	R ²
A. DV: DERS					
1. Type of School	5, 529	5.50**	-.18	-3.44**	.04
2. Maternal Comparison	1, 528	25.08**	.22	5.01**	.08
B. DV: Depression					
1. Type of School	5, 522	5.74**	-.16	-3.06*	.04
2. Maternal Comparison	1, 521	14.48**	.17	3.81**	.07
3. DERS (Maternal Comparison)	1, 520 520	279.10**	.60 .04	16.71** 1.12	.40

* $p < .01$, ** $p < .001$

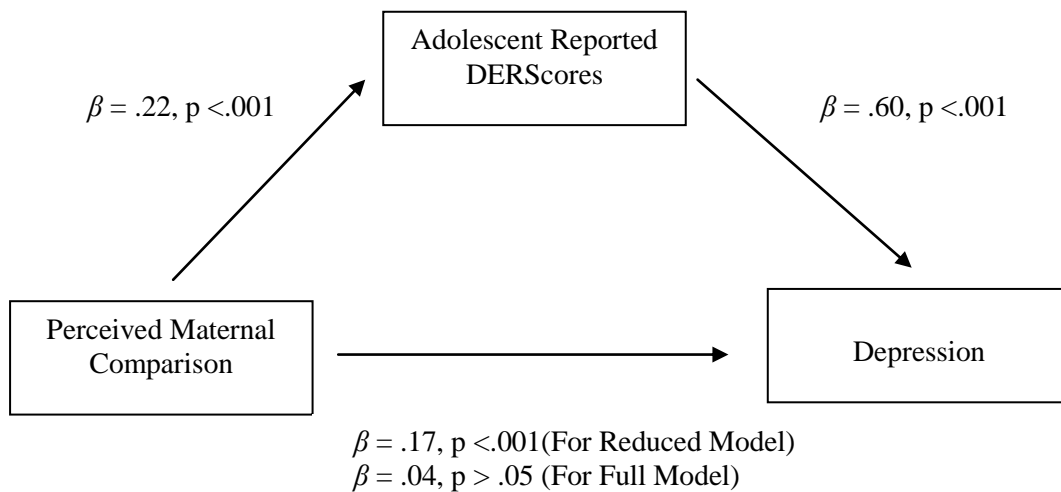


Figure 3. 23 Mediator role of Adolescent Reported DERScores between Perceived Maternal Comparison and Depression

3.3.7.8 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Comparison and Total difficulties

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and total difficulties relationship, adolescent's difficulties in emotion regulation should also have a significant

association with perceived maternal comparison. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal comparison entered into the equation as second step variable. As a result of this analysis 4 % of the variance was explained by type of school, ($F_{\text{change}} [5, 529] = 5.50, p < .001$). After controlling this variance, perceived maternal comparison increased explained variance into 8 % ($F_{\text{change}} [1, 528] = 25.08, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .22, t [528] = 5.01, p < .001$). Results are presented on Table 3.35.A.

On the second analysis, total difficulties was the dependent variable, control variables entered as first step variables and the result of which revealed significant association between type of school and total difficulties ($\beta = -.24, t [527] = -4.78, p < .001$) and explained 8 % of the variance ($F [5, 527] = 8.53, p < .001$). After controlling this variance, perceived maternal comparison entered into the equation and explained variance increased to 11 % ($F_{\text{change}} [1, 526] = 18.05, p < .001$), and had a significant association with total difficulties ($\beta = .18, t [526] = 4.25, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 38 % ($F_{\text{change}} [1, 525] = 232.86, p < .001$), and had a significant association with total difficulties ($\beta = .55, t [525] = 15.26, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal comparison lost its significance ($\beta = .06, t (525) = 1.67, p > .05$). Results are presented on Table 3.35.B. The sobel test confirmed this significant decrease ($z = 4.77, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and total difficulties relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal comparison and total difficulties relationship. Therefore, it is suggested that the observed association between perceived maternal comparison and total difficulties

was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 65 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and total difficulties is depicted in Figure 3.24.

Table 3. 35 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Comparison and Total difficulties

Model:					
Independent Variables	df	F	β	T	R ²
A. DV: DERS					
1. Type of School	5, 529	5.50*	-.18	-3.44*	.05
2. Maternal Comparison	1, 528	25.08*	.22	5.01*	.09
B. DV: Total difficulties					
1. Type of School	5, 527	8.53*	-.24	-4.78*	.08
2. Maternal Comparison	1, 526	18.05*	.18	4.25*	.11
3. DERS	1, 525	232.86*	.55	15.26*	.38
(Maternal Comparison)	525		.06	1.67	

* $p < .001$.

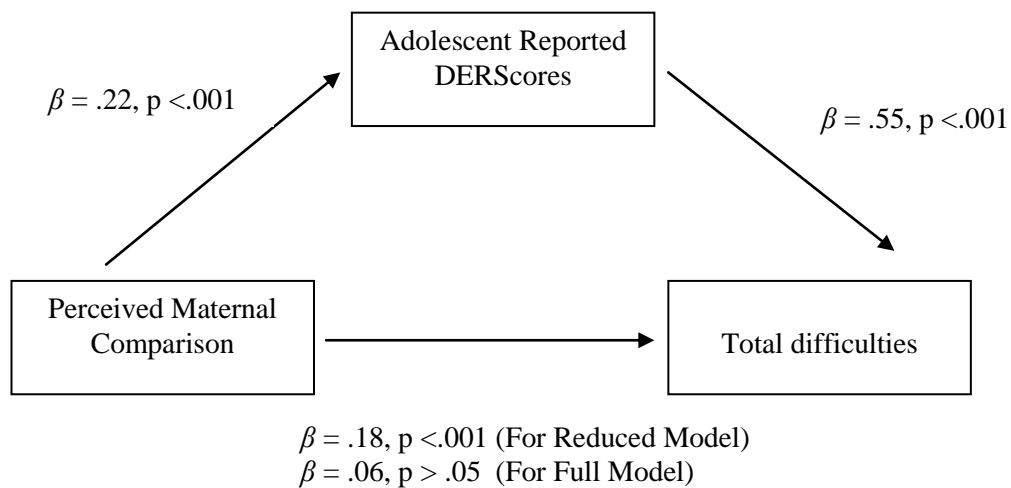


Figure 3. 24 Mediator role of Adolescent Reported DERScores between Perceived Maternal Comparison and Total difficulties

3.3.7.9 Mediator Role of Adolescent's Difficulties in Emotion Regulation between Perceived Maternal Comparison and Negative Affect

Considering the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and negative affect relationship, adolescent's difficulties in emotion regulation should also have a significant association with perceived maternal comparison. Thus, to examine this association regression analysis was conducted, in which adolescent's difficulties in emotion regulation was the dependent variable, control variables (i.e., type of school, gender, income, mother education, and father education) entered as first step variables and perceived maternal comparison entered into the equation as second step variable. As a result of this analysis 4 % of the variance was explained by type of school, ($F_{\text{change}} [5, 529] = 5.50, p < .001$). After controlling this variance, perceived maternal comparison increased explained variance into 8 % ($F_{\text{change}} [1, 528] = 25.08, p < .001$), and had a significant association with adolescent's difficulties in emotion regulation ($\beta = .22, t [528] = 5.01, p < .001$). Results are presented on Table 3.36.A.

On the second analysis, negative affect was the dependent variable, control variables entered as first step variables and the result of which revealed significant association between type of school and negative affect ($\beta = -.12, t [520] = -2.31, p < .05$).and explained 3 % of the variance ($F [5, 520] = 3.27, p < .01$). After controlling this variance, perceived maternal comparison entered into the equation and explained variance increased to 7 % ($F_{\text{change}} [1, 519] = 21.67, p < .001$), and had a significant association with negative affect ($\beta = .21, t [519] = 4.66, p < .001$). On the third step adolescent's difficulties in emotion regulation entered into the equation and the explained variance increased to 32 % ($F_{\text{change}} [1, 518] = 193.09, p < .001$), and had a significant association with negative affect ($\beta = .53, t [518] = 13.90, p < .001$). After controlling for the adolescent's difficulties in emotion regulation, the effect of perceived maternal comparison reduced significantly ($\beta = .09, t (518) = 2.22, p < .05$). Results are presented on Table 3.36.B. The sobel test confirmed this significant decrease ($z = 4.77, p < .05$), thus the mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and negative affect relationship was supported.

These two regression analyses, together with the sobel test indicated that adolescent's difficulties in emotion regulation mediate perceived maternal comparison and negative affect relationship. Therefore, it is suggested that the observed association between perceived maternal comparison and negative affect was maintained by adolescent's difficulties in emotion regulation, and further analysis revealed that adolescent's difficulties in emotion regulation accounted for 57 % of this association. The mediator role of adolescent's difficulties in emotion regulation between perceived maternal comparison and negative affect is depicted in Figure 3.25.

Table 3. 36 Summary of Regression Models Testing for Adolescent Reported DERS as Mediator between Perceived Maternal Comparison and Negative Affect

Model:					
Independent Variables	df	F	B	T	R ²
A. DV: DERS					
1. Type of School	5, 529	5.50***	-.18	-3.44***	.05
2. Maternal Comparison	1, 528	25.08***	.22	5.01***	.09
B. DV: Negative Affect					
1. Type of School	5, 520	3.27**	-.12	-2.31*	.03
2. Maternal Comparison	1, 519	21.67***	.21	4.66***	.07
3. DERS	1, 518	193.09***	.53	13.90***	.32
(Maternal Comparison)	518		.09	2.22	

* $p < .05$, * $p < .01$, * $p < .001$

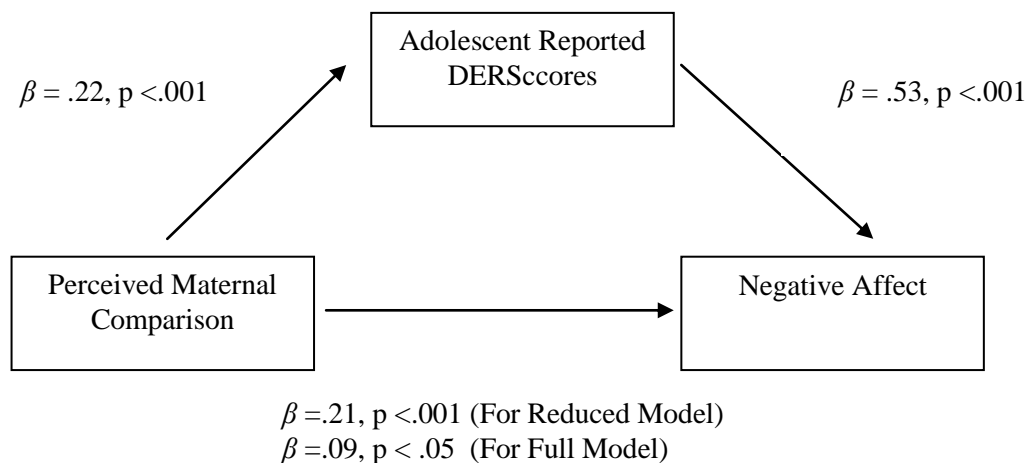


Figure 3. 25 Mediator role of Adolescent Reported DERScores between Perceived Maternal Comparison and Negative Affect

3.4 Discussion

The aim of the main study was roughly to explore the association among maternal rearing behaviors, adolescents' emotion regulation, and their psychological problems. Before the testing of main hypotheses, preliminary analyses were conducted in which levels of each demographic variable (i.e., gender, education levels of parents, income, and type of school) were compared in terms of adolescents' and their mothers' emotion regulation difficulties and psychological distress levels. It was found that type of school, education levels of parents, and incomes were differed on adolescents' and their mothers' emotion regulation difficulties and psychological distress levels. Secondly, the discrepancies between mothers' and adolescents' reports on adolescents' emotion regulation were examined and found that adolescents reported more emotion regulation difficulties than mothers perceive them to have. Thirdly, hierarchical multiple regression analyses were conducted in order to identify factors associated with adolescents' basic personality traits, emotion regulation difficulties, and psychological problems. Findings indicated that mothers' personality traits highly overlap with adolescents' corresponding personality traits. Moreover, perceived maternal warmth was found to be crucial for adolescents' personality traits. As for emotion regulation difficulties of adolescents, results indicated that in order for children to be able to practice and master their own regulation, maternal acceptance and support of autonomy are very important. Furthermore, adolescents' personality traits were also found to be significantly associated with their emotion regulation difficulties. As for the psychological problems of adolescents, it was found that emotion regulation difficulties of adolescents were prominently associated with psychological distress of adolescents. Finally, mediating role of emotion regulation difficulties of adolescents between perceived maternal rearing behaviors and psychological problems was examined and it was found that this relation occurs through adolescents' emotion regulation difficulties.

3.4.1 Impact of Demographic Variables on the Measures of the Study

In order to examine how levels of demographic variables make distinction on adolescents' and their mothers' emotion regulation difficulties and psychological distress levels, a series of t-test analyses and MANOVAs were conducted. The results indicated that adolescents from regular high schools reported significantly higher levels of difficulties in emotion regulation and psychological problems as compared to those from Anatolian high schools. The differences between Anatolian High school and regular high school students can be explained by different levels of expected academic success in these schools. Type of school is generally considered as an indicator of academic performance. Adolescents being successful at Anatolian High School Entrance Exam are accepted to Anatolian high schools. Therefore, it is expected that adolescents from Anatolian high schools have better academic performance as compared to those from regular high schools. Consistently, a number of authors point out negative association between depressive symptoms and academic achievement at school (e.g., Fergusson & Woodward, 2002; Forsterling & Binser, 2002; Reinherz et al., 1991; Shahar et al., 2006). There are also evidences that students with conduct disorders, hyperactivity, and peer relationship problems have low school performance (Biederman et al., 2004; Fergusson & Woodward, 2000; Wilson & Marcotte, 1996; Woodward & Fergusson, 2000). However, it will be misleading to infer cause-effect relationship here because the direction of relation between emotional or psychological problems and type of school that adolescents are involved in is not clear in correlational analyses. Conducting longitudinal studies including both clinical and non-clinical samples will be more informative about the direction of the relation between academic success and psychological problems.

Another plausible explanation might be that adolescents from Anatolian high schools are generally considered as having more advantageous environment in terms of the resources available at home, academic and achievement views of their parents and socio economic status of the family because their parents are generally more educated and they have higher income than adolescents from regular high schools. Additional analyses were conducted in order to examine whether education levels of parents and their incomes differ for Anatolian high school and regular high school

students. Consistent with expectation, frequencies of higher educated mothers [Pearson χ^2 (1, $N = 585$) = 101.42, $p < .001$)] and fathers [Pearson χ^2 (1, $N = 589$) = 144.03, $p < .001$)] of adolescents from Anatolian high schools were significantly different than those whose children are going to regular high school. Moreover, income levels of parents [Pearson χ^2 (1, $N = 560$) = 103.25, $p < .001$)] of adolescents from Anatolian high schools were significantly higher than those whose children are going to regular high school.

Taken together, findings of the current study should be interpreted cautiously because classifying adolescents' vulnerability to emotional and psychological problems considering solely type of school they are involved in would be misleading. In the current study, type of school is used as an indicator of academic success and socio economic status of the family together with education levels of parents and income. Inevitably, education levels of parents and income are important in deciding which school that their children will be enrolled. Existing literature shows that children of educated and affluent parents generally have more advantages and opportunities for achievement. Well-educated parents encourage their children to have relationships with peers who share their values, especially values of achievement (Wentzel & Feldman, 1993; Williams & Radin, 1993). Furthermore, parents with higher socioeconomic status are more active in their children's education and have higher expectations about their children's career choices (Alspaugh & Harting, 1995; Gutman & Eccles, 1999; Juang & Silbereisen, 2002). Educated parents who have achieved career and economic success may set role models of achievement for their children (Wentzel & Feldman, 1993). As a result, these adolescents being grown up in advantageous environments are less likely to have difficulties in emotion regulation and psychological problems than those being grown up in disadvantageous environments.

However, when we control education levels of parents and income, the significant relation between type of school and adolescents' emotion regulation difficulties may reduce or completely lost its significance. Still, we kept type of school as significant predictor of emotion regulation difficulties in order to emphasize the vulnerability of adolescents from regular high schools to emotional

and psychological problems. It may be possible to develop some intervention strategies or educational policies in order to reach those children. For example, transforming regular high schools into Anatolian high schools can be given as example. In this way, it is expected that being equalize education qualities will contribute to academic success and self-esteem of those children thereby emotional and psychological well-being as well.

3.4.2 Gender and Informant Differences on Measures of the Study

There is a growing interest in multi-method assessment of child emotion regulation. However, studies guiding researchers in conceptualizing and using discrepant information in this area are limited (Hourigan et al., 2011). To address this gap in the literature, the present study investigated the discrepancy between mothers' and adolescents' self-reports on adolescents' emotion regulation difficulties. As expected, adolescents, both boys and girls, reported higher levels of difficulties in emotion regulation for themselves as compared to the reports of mothers for the adolescents. The findings of the current study support previous studies showing that adolescents report more psychological problems than parents perceive them to have (Sourander et al., 1999; Verhulst & Van der Ende, 1992). Moreover, the present study expanded previous research by exploring the discrepancy on reports of emotion regulation. To our knowledge, only one study has examined the discrepancy between parents' and children's reports of children's emotion regulation (Hourigan et al., 2011) and found that children use significantly more inhibition across emotion type than parents, which is consistent with the findings of the present study.

Secondly, as expected, it was found that the discrepancy between mothers and daughters were larger than the discrepancy between mothers and sons. This finding can be explained by girls' ability to mask their negative emotions (Cole et al., 1994). Girls tend to report experiencing higher levels of self-conscious emotions like guilt, shame, and self-directed hostility (Hamilton & Jensvold, 1992), which may make them more vulnerable to internalizing problems like emotional reactivity, anxious or depressed moods, somatic complaints, and social withdrawal (Nolen-Hoeksema, 1994). Although experiencing difficulties in emotion regulation and having

internalizing problems are two different phenomena, Neumann et al. (2010) found a stronger relationship between emotion regulation difficulties and internalizing problems as compared to externalizing problems, which is also consistent with the findings of the present study.

It is quite difficult for others to detect internalizing problems (Eiser & Morse, 2001). Thus, directly asking adolescents about their own thoughts and feelings about how they manage their own emotions might give more accurate insights into their feelings states (Bowie, 2009). However, understanding informant discrepancies during adolescence is critical (Hughes & Gullone, 2010) because discrepancies between parents and their adolescents in terms of adolescent's difficulties in emotion regulation might occur as a result of parents' unawareness of the adolescents' symptoms and parents' own psychological states (Berg, Nielsen et al., 2003; Grills & Ollendick, 2002). Many adolescents, in need of psychological support, do not receive appropriate assistance because their problems remained unnoticed by adults (Sourander et al., 1999). Therefore, awareness of parents about their children's psychological states should be increased. Furthermore, mothers must be taught to differentiate their own difficulties in emotion regulation from their perception of adolescents' difficulties in emotion regulation.

Present study also examined the discrepancy between mothers' and adolescents' reports in terms of mothers' maternal rearing behaviors. Findings indicated that adolescents reported more maternal rejection and comparison than their mothers perceived themselves. On the other hand, mothers reported more warmth towards their children than their children perceived them to show. Based on these findings, we could infer that adolescents may need more concern and acceptance of their mothers. However, their mothers may not even be aware of these needs of their children. Perceived parenting behaviors have more detrimental effects on psychological adjustment of children. Thus, future studies should be carried out to examine factors leading to this discrepancy and finding out ways to reduce discrepancy between mothers and children. Interestingly, there is no discrepancy between mothers' and adolescents' reports in terms of maternal over-protection. It is

plausible to conclude that since definition of over-protection is not as damaging as rejection, particularly for people living in collectivistic cultures (Kagitçibaşı, 2005), mothers may think that being over-protective mother is a good way of parenting so they may assess themselves more objectively.

3.4.3 Multiple Regression Analyses

3.4.3.1 Variables Associated with Personality Traits

Separate hierarchical multiple regression analyses were conducted to examine significant associates of personality traits, namely, extraversion, conscientiousness, agreeableness, neuroticism, openness to experience, and negative valence. Results indicated that even after controlling the effects of both socio-demographic variables (i.e., income, type of school, gender, education levels of both mother and father) and maternal characteristics (i.e., mothers' difficulties in emotion regulation, psychological symptoms, and personality traits), perceived maternal warmth was found to be crucial for adolescents' personality traits, particularly for extraversion, conscientiousness, agreeableness, and openness to experience. However, it is seen that perceived maternal rejection plays more significant role for adolescents' neuroticism. Individuals who score high in neuroticism are more likely than average person to experience anxiety, anger, guilt, and depression, thus responding poorly to environmental stress, being likely to interpret ordinary situations as threatening, and experiencing minor frustrations as hopelessly overwhelming (Widiger, 2009). Therefore, it is expected that these individuals pervasively and excessively need to be taken care of which leads to submissive and clinging behavior and fears of separation. Likewise, perceived maternal rejection in accordance with perceived lack of maternal warmth is important for adolescents' negative valence.

Furthermore, results indicated that besides perceived maternal warmth, perceived maternal comparison and mother reported warmth play significant role for adolescents' openness to experience. According to the findings, mothers reported that they provided less warmth to their adolescents and adolescents reported that their mothers compared them with others, which are indicators of authoritarian parenting. However, the interesting point is that these features of mothers do not

adversely affect adolescents' openness to experience, rather contribute to their openness to experience because adolescents still perceived sufficient levels of maternal warmth. It is seen that mothers reduce levels of warmth on purpose (providing conditional warmth) and adolescents get the message. That is, mothers are success oriented and try to motivate their adolescents by reducing warmth and increasing comparison behaviors and it seems that it works. As for the agreeableness, it was found that perceived maternal over-protection in accordance with perceived maternal warmth is significant for adolescents' agreeableness, especially for female adolescents. According to this, it might be possible to conclude that mothers' over-protection enhances adolescents' dependency behaviors. In other words, over-protection with warmth is helpful in either reducing deviant behavior or enhancing dependency behavior. Moreover, consistent with the findings of Kitamura et al. (2009), the results indicated that mothers' personality traits highly overlapped with adolescents' corresponding personality traits. For instance, mothers' extraversion was significantly associated with adolescents' extraversion. As a result, it was concluded that personality traits were transmitted directly from mothers to their children, most probably through social learning techniques like modeling.

3.4.3.2 Variables Associated with Difficulties in Emotion Regulation

Separate hierarchical multiple regression analyses were conducted to examine significant associates of adolescents' difficulties in emotion regulation. Results indicated that even after controlling the effects of socio-demographic variables (i.e., income, type of school, gender, education levels of both mother and father), maternal characteristics (i.e., mothers' difficulties in emotion regulation, psychological symptoms, and personality traits), and perceived parental rearing behaviors, four personality traits (i.e., extraversion, openness to experience, conscientiousness, and neuroticism) were found to be crucial for adolescents' difficulties in emotion regulation.

Findings of the present study were consistent with the literature. For instance, Costa and McCrae (1992) suggested that "the general tendency to experience negative affect such as fear, sadness, embarrassment, anger, guilt, and disgust is the

core of the neuroticism” (p.14). Therefore, adolescents high in neuroticism are likely to experience difficulties in emotion regulation (Elliott, et al., 1994; Soldz & Vaillant, 1999). Furthermore, extraversion was related to understanding and regulation of emotions. Likewise, Mann et al. (1994, 1995) concluded that extraversion, agreeableness and openness to experience are negatively related to alexithymia, which indicates lack of emotional awareness. As for the conscientiousness, Tellegen (1988) defined it as “tendency to respond in a certain way under certain circumstances” (p.622), which is very important feature of emotion regulation. Therefore, adolescents low in conscientiousness is likely to experience difficulties in emotion regulation. Lastly, Leary and Hoyle (2009) mentioned about dispositional factors (i.e., interpersonal, emotional, cognitive, and motivational) predicting variation in people’s thoughts, feelings, and behaviors that cannot be explained by situational factors. They classified extraversion and agreeableness under interpersonal disposition and neuroticism under emotional disposition. In addition, they classified openness to experience under cognitive disposition and conscientiousness under motivational disposition. In the present study, it is seen that difficulties in emotion regulation is associated with personality traits from all dimensions. Therefore, it is possible to conclude that emotion regulation is related with personality traits not only through emotional dimension but also through interpersonal, cognitive, and motivational dimensions.

Results of the present study also indicated that both perceived maternal rejection and over-protection lead to adolescents’ difficulties in emotion regulation. In order for children to be able to practice and master their own regulation, parents should provide appropriate level of relatedness and autonomy to their children in emotional situations (Southam-Gerow & Kendall, 2002). In other words, if parents are unable to provide relatedness enough, adolescents perceive rejection. On the contrary, if parents are unable to provide autonomy, adolescents perceive over-protection, both of which lead to the difficulties in emotion regulation. However, when we looked at the explained variance, it was seen that maternal rejection explained more variance of adolescents’ emotion regulation difficulties compared to

maternal over-protection. Thus, we may infer that maternal rejection affects adolescents' emotion regulation abilities more adversely.

Moreover, results revealed that beside parental rearing behaviors, mothers' own difficulties in emotion regulation plays significant role on adolescents' difficulties in emotion regulation. It is consistent with the existing literature indicating that children being reared by parents who are high in awareness, acceptance, and coaching of emotions are more likely to successfully regulate their emotions than those whose parents are low in awareness, acceptance and coaching of emotions (Gottman et al., 1996).

Results of the present study indicated that when adolescents were asked about their difficulties in emotion regulation, adolescent related factors like personality traits and perceived maternal rearing behaviors were found to be the most significant factors. On the other hand, when mothers were asked about their children's difficulties in emotion regulation, mother related factors like mothers' difficulties in emotion regulation and mothers' psychological symptoms were found to be the most significant factors. According to mothers, adolescents' extraversion was critical for their emotion regulation. However, adolescents reported that four personality traits (i.e., neuroticism, openness to experience, extraversion, and conscientiousness) were related with their emotion regulation. It is suggested that extraversion has emerged as one of the fundamental dimensions of the personality (Digman, 1997) and core feature of extraversion is thought to be the disposition to engage in social behavior. Therefore, it is possible to conclude that mothers were able to detect only the interpersonal dimensions of personality and they thought it to be significant for their children's emotion regulation. In other words, extraversion as a personality trait is more observable by others, thus being easily detected.

Moreover, mothers reported that their warmth toward adolescents was related to adolescents' difficulties in emotion regulation, which is also consistent with the literature (Darling & Steinberg, 1993; Gottman, et al., 1996). It is interesting that while adolescents emphasize the importance of maternal rejection and over-protection, mothers underlie the significance of warmth and comparison for

adolescents' emotion regulation. According to them, their children mostly complain about that their mothers compare them with others so this might be related to adolescents' difficulties in emotion regulation. One possible explanation for this finding is that mothers do not accept that they either reject or overprotect their children. Moreover, they might not be aware how their children perceive their maternal behaviors. That is why discrepancies were reached between mothers' and adolescents' reports in terms of maternal rearing behaviors.

It has been argued in the literature that for parents to be an effective and adequate emotion socialization agent for their children, they must have the ability to effectively and adaptively manage their own emotions. Parental dysregulated emotions may contribute to inappropriate emotional expression or experience, which may, in turn, contribute to poor emotional development outcomes for children (Dix, 1991). Furthermore, research has shown that parents' awareness of their own emotions was significantly correlated with their awareness of emotions in their children (Gottman et al., 1997). Based on these results, Gottman et al. (1997) suggested that one way parents might increase their awareness of their children's emotions is through awareness of their own emotions. Consistent with the literature, in the present study, according to mothers' report, it was found that mothers' own emotion regulation is very significant for their children's emotion regulation. According to this, if they have difficulties in emotion regulation, their children are more likely to have difficulties in emotion regulation. This finding corresponds with adolescents' reports as well. That is, adolescents report that their mothers' difficulties in emotion regulation are critical for their own difficulties in emotion regulation. However, the difference between mother report and adolescent report in terms of adolescents' difficulties in emotion regulation is that mothers' difficulties in emotion regulation increased explained variance to 39 % in mother report. In contrast, it increased explained variance into 7 % in adolescent report. That is, mothers' perception of their children's difficulties in emotion regulation are not independent from their own difficulties in emotion regulation, which may be different from the reality and that is why ANOVA results indicated that adolescents reported more difficulties compared to their mothers' reports about them. However, as adolescents

get older and have more developed abstract abilities, they may move from using their parents as models in forming their own beliefs about emotions. In this way, the influence of parents' own difficulties in emotion regulation may change over the course of adolescence. Directly comparing associations between the emotional beliefs of older and younger adolescents and their parents within the same study would allow for better understanding of the changing influence of parents over the adolescence period.

Mothers' reported that their psychological symptoms were also related to adolescents' emotion regulation. This finding is also consistent with previous findings indicating that parents' mental states influence their appraisals of children's emotional states (Berg-Nielsen et al., 2003). Furthermore, psychological problems are associated with emotion regulation difficulties (Cole et al., 2004). For example, Garber et al. (1991) indicated that depressed mothers reported using significantly fewer and poorer quality of emotion regulation strategies in response to sadness-eliciting vignettes as compared to non-depressed mothers. Therefore, it was expected that those mothers would be affected by their own emotion regulation in perceiving their children's emotion regulation as stated previously.

3.4.3.3 Variables Associated with Psychological Distress Measures

Separate hierarchical multiple regression analyses were conducted in order to examine significant associates of adolescents' psychological distress. Results indicated that even after controlling the effects of socio-demographic variables (i.e., income, type of school, gender, education levels of both mother and father), maternal characteristics (i.e., mothers' difficulties in emotion regulation, psychological symptoms, and personality traits), perceived maternal rearing behaviors, and four personality traits (i.e., extraversion, openness to experience, conscientiousness, and neuroticism), adolescents' difficulties in emotion regulation were found to be crucial for adolescents' psychological problems.

Findings of the present study revealed that emotion regulation difficulties were significant predictors of psychological problems. Consistently, past studies

pointed out the relation between psychopathology and emotion regulation difficulties (Greenberg, 2002; Gross & Munoz, 1995; Kring & Bachorowski, 1999; Mennin & Farach, 2007). Particularly, the relation between depression, anxiety, and emotion dysregulation were widely examined and concluded that depression and anxiety occur as a result of difficulties in emotion regulation (Campbell-Sills & Barlow, 2007; Gross & Munoz, 1995; Mennin, Holoway, Fresco, Moore, & Heimberg, 2007). In addition, Suveg and Zeman (2004) found that children with anxiety disorders have poorer emotional understanding and have more difficulty in managing their negative emotions compared to non-anxious youth. Similarly, several other studies indicated that poor emotional understanding and difficulty in regulating negative emotions were also significantly associated with high levels of aggressive behaviors (Bohnert, Crnic, & Lim, 2003; Cole, Zahn-Waxler, & Smith, 1994; Eisenberg et al., 2000). However, the cross-sectional nature of the present study is the main problem as vast majority of research in the literature. Thus, the direction of the relation between emotion dysregulation and psychological distress is not clear. In other words, is emotion dysregulation a risk factor for the development of adolescent psychopathology or does having mental health problems cause adolescents ineffectively manage their emotions? Utilizing prospective data from a large adolescent sample, McLaughlin, Hatzenbuehler, Mennin, & Hoeksema (2011) examined the direction of this relationship and found that while emotion dysregulation predicted changes in symptoms of psychological distress, psychopathology did not predict subsequent changes in emotion regulation. It was concluded that emotion regulation difficulties are predictors and not consequences of adolescent psychopathology. Thus, findings of the present study should be interpreted within this perspective.

Findings revealed that personality traits of adolescents, especially neuroticism, extraversion, and conscientiousness were second most important factors accounting for adolescents' psychological distress. Consistently, temperament and personality research has generally investigated the role of negative emotionality (neuroticism) and effortful control (conscientiousness) as important risk factors for psychological disorders and concluded these personality traits as being strong

predictors of internalizing problems including depression (Caspi, Henry, McGee, Moffitt, & Silva, 1995; Lonigan, Phillips, & Hooe, 2003; Rothbart & Posner, 2006) and anxiety disorders (Clark, Watson, & Mineka, 1994). Because as Widiger (2009) suggested adolescents with high neuroticism have a tendency to interpret even ordinary situations as threatening and overwhelming, thus unable to manage with these emotions. Similarly, lack of conscientiousness makes it impossible to acquire strategies to cope with frustration coming from objects and tasks (Jensen-Campbell et al., 2002). Yap et al. (2011) examined the role of emotion dysregulation as a mechanism through which a particular temperamental disposition may lead an individual to develop depression and found that high neuroticism or low conscientiousness leads to emotional dysregulation which in turn lead to depressive symptoms.

When we looked at other predictors of adolescents' psychological distress, it was seen that type of school is important one among demographic factors. As we discussed in previous section, type of school is not a single predictor itself. It may reflect adolescent's academic success, socio economic status of family, sources provided within the family environment. Thus, without controlling all these factors it may be misleading to talk about the relation between type of school and psychological distress measures. Still, findings pointed out vulnerability of adolescents who attend to regular high schools for mental health problems.

3.4.4 Mediating Role of Adolescent's Difficulties in Emotion Regulation between Maternal Rearing Behaviors and Psychological Distress Measures

Morris et al. (2007) proposed a mediational model based on the idea that much of the effects of family context on children's psychosocial development occur via children's emotion regulation (see Eisenberg et al., 2003; Eisenberg, Gershoff, et al., 2001). According to Morris et al. (2007), parenting practices and the emotional climate of the family constitute family context. The former is parenting behaviors defined by specific content and socialization goals (Darling & Steinberg, 1993). For example, parents use specific strategies to teach their children how to regulate their emotions like coaching behaviors, meaning that parents discuss and validate

children's feelings in response to emotionally distressing events, value children's emotions, and teach them how to manage negative emotions (Gottman et al., 1996). On the other hand, general parenting behaviors, independent from content, create emotional climate in which parenting behaviors are expressed. Considering this proposal, mediating role of emotion regulation difficulties between maternal rearing behaviors and psychological distress measures were examined. Consistently, it was found that the relation between maternal rearing behaviors and adolescents' psychological distress was mediated by adolescents' emotion regulation difficulties. Previous studies examined mediating effect of emotion regulation, as well. For instance, Cunningham et al. (2009) found the link between maternal emotion socialization practices and child adjustment via child emotion competence. Furthermore, Maughan and Cicchetti (2002) indicated that child emotion regulation mediated the relation between mother's dysfunctional interaction with children and child internalizing behaviors.

However, different than the present study, past studies were mostly conducted with children and rather than rearing behaviors, parenting practices were used as indicators of family context. As example, Ramsden and Hubbard (2002) found that children were more aware of their emotion and better able to regulate their emotion when their mothers encouraged them to initiate discussions about emotions. In contrast, children have poorer emotion regulation abilities when their mothers minimize or punish displays of negative emotions (Smith & Walden, 1998). However, depending on the child's developmental age, parents' direct influence as socializing agents may be weakened because older children begin to seek more emotional and behavioral independence from parents and are more reliant on peers for emotional support (Klimes-Dougan & Zeman, 2007). For example, Saarni (1988) demonstrated that while young children were more likely to express their emotions to adults, older children cited their peers as the source of emotional disclosure. Therefore, we argue that, independent from the content, parents' general behaviors toward their children play significant roles in adolescents' emotion regulation.

As stated in the introduction section, there is accumulating evidence pointing out the significant relation between emotional climate of family and abilities of emotion regulation (Eisenberg et al., 1998; Grolnick & Farkas, 2002; Morris et al., 2002). All these studies emphasize the detrimental effects of parental rejection, hostility, and lack of sensitivity on emotion regulation of adolescents. Furthermore, controlling and over-protective behaviors in response to negative emotions cause children to develop poor emotion regulation strategies (Bell & Calkins, 2000; Fox & Calkins, 2003). In addition, the link between parenting behaviors and adolescents' psychological adjustment were demonstrated in previous studies. For example, Lunkenheimer et al (2007) found that parents' emotion dismissing behaviors were related to child externalizing problems during middle childhood. Furthermore, inconsistent parental monitoring, harsh discipline and lack of emotional availability and support were found as risk factors for depression in adolescence (Cummings & Davies, 2002; Dallaire et al., 2006). Consistent with previous studies, present study also demonstrated the link between parenting and emotion regulation, the link between emotion regulation and psychological distress measures, and finally the link between parenting and psychological problems separately.

Additionally, mediation results indicated that the relation between maternal rearing behaviors (i.e., maternal rejection, maternal over-protection, and maternal comparison) and psychological problems occur via adolescents' difficulties in emotion regulation. That is, maternal rejection, comparison, and over-protection lead emotion regulation difficulties, which in turn lead psychological problems in adolescents. However, Sümer and Kağıtçıbaşı (2010) argued that over-protection is more culturally relevant parenting behavior. In non-western cultures in which relatedness is more valued, over-protection is mostly perceived as signs of care and concern, thus perceived as more adaptive than in western cultures in which autonomy is more valued. Findings of the present study seem contradicting with this approach. One possible explanation for this different finding could be the age of the sample. Sümer and Kağıtçıbaşı (2010) conducted their study with children at the age of 11 years old. In contrast, the present study was conducted with adolescents at the age of 15 years old. As children get older, their needs for autonomy increase. Thus, parents'

over-protective behaviors may be more disturbing compared to previous years. Still, when we looked at the explained variance, it is seen that while maternal rejection explained 17 % of the variance, maternal over-protection explained 8 % of the variance in emotion regulation difficulties, which may be interpreted as Turkish adolescents' greater needs for parental warmth and support.

3.4.5 Limitations and Strengths of the Study, and Directions for Future Research

The current study has contributed to available literature by exploring the interplay between maternal rearing behaviors, emotion regulation difficulties, and psychological distress of adolescents. However, several limitations of the study should be considered in interpreting the findings. Cross-sectional nature of the study prevented causal inferences. Longitudinal data from variety of reporters should be considered in future studies so that causal inferences will be more possible.

Multi-informant approach is important in order to prevent shared response variance. For example, when we ask adolescents' self report, if they report emotion regulation difficulties, they are more likely to perceive their mothers as rejecting and to report psychological distress. That is, the explained variance may be inflated when the report is obtained from one informant alone. In the current study, we obtained data from both mothers and adolescents about mothers' rearing behaviors and adolescents' emotion regulation difficulties. Significant discrepancies between mothers' and adolescents' reports were observed. That is, adolescents are more likely to report higher levels of emotion regulation difficulties compared to mothers perceive them to have. Similarly, adolescents are more likely to perceive their mothers as rejecting than mothers perceive themselves. Considering adolescents' perception is more informative than mothers' report, adolescents' self-reports were used in mediation analyses. Still, this study would have been strengthened by the inclusion of observational data. Thus, future studies conducted with observational procedures are strongly encouraged.

Since mothers have been considered to be more involved in their children's emotion socialization (Garside & Klimes-Dougan 2002; Klimes-Dougan & Zeman,

2007), the discrepancy between mothers' and adolescents' reports was the focus of this study. However, the discrepancy between fathers' and their children's reports would also provide valuable information about adolescents' difficulties in emotion regulation. In addition, the link among maternal rearing behaviors, adolescents' emotion regulation difficulties, and psychological distress measures were explored but the role of paternal rearing behaviors was not considered in the present study based on the idea that mothers are more successful in establishing emotionally supportive relationship with their adolescents. However, the role of fathers' parental rearing on adolescents' psychological and emotional adjustment should be investigated in future studies. Portraying the interplay between mothers, fathers, and adolescents' variables would also give more parsimonious picture.

Third, since the sampling procedure was not based on randomization, the findings may not be representative of all Turkish adolescents. However, in order to overcome this problem, schools were selected from different parts of Ankara and a large sample size was utilized. Another limitation of the current study related to voluntary nature of participation is that relatively lower return rate of mother (61.34%) may confound the findings of the current study because mothers with certain profile might have refrained from participation which would increase homogeneity in the sample thereby reducing variance. However, in order to examine this confounding effect education levels of mothers who did and did not complete questionnaires were compared and no significant difference was found ($t(583) = -0.487, p > .05$). Moreover, additional t-test analyses were conducted to compare emotion regulation difficulties of adolescents whose mothers took part in the research with those whose mothers did not, and the difference was found to be non-significant ($t(585) = -1.03, p > .05$).

3.4.6 Clinical Implications of the Current Research

The results of the current study are in line with the conceptualization that the relation between parenting behaviors and psychological distress of adolescents occurs via adolescents' emotion regulation difficulties. Thus, identifying factors which lead to emotion regulation difficulties are very important in this perspective.

This study provides a foundation for clinicians to make sense of conflicting information in the study of emotion regulation. Although informant discrepancies may cause confounding interpretive dilemmas for clinicians, conceptualizing discrepancy as a construct might provide useful information. In clinical settings, clinicians may focus on possible discrepancy between mothers' and adolescents' reports on adolescents' emotion regulation difficulties and try to enhance communication between mothers and their children. Reduction of discrepancy means that mothers perceive their children's emotion regulation difficulties in a right way and provide supports for the adolescents which will then contribute to their psychological well-being. One way of reducing discrepancy between mothers and adolescents is to improve mothers' awareness about their own emotional states. When mothers are open to their own emotions, they are more likely to accept their children's negative emotions and allow them to express freely.

Likewise, identification of discrepancies on maternal rearing behaviors is also very important for adolescents' psychological well-being. Findings of present study revealed that mothers rated their parenting behaviors more positive than their children. It is possible that mothers were not aware that their behaviors damaged adolescents' psychological health. Thus, mothers should be educated about features of dysfunctional parenting behaviors and their adverse effects on adolescents' psychological wellbeing. There is no doubt that adolescents are in need of more concern and acceptance than their mothers provide so mothers' awareness about adolescents' needs also must be increased.

Findings of preliminary analyses revealed that adolescents living in "a disadvantaged conditions" are more vulnerable to emotion regulation difficulties and psychological disorders. Thus, clinicians should take these conditions into account when deciding their methods in psychotherapy. For example, socio-economic status of family and parental psychopathology were identified as important risk factors for emotional and psychological problems of adolescents. It is expected that these factors will play significant roles in the prognosis of the treatment as well. Therefore, if mothers have emotional and psychological problems, those mothers

should be given psychological support parallel to their children. If parents have low education, it may be better to apply more behavioral techniques.

In summary, on the basis of the findings of the current study it can be argued that, when working with adolescents, clinicians should not rely solely on mothers' reports as they may be biased. Mothers' perception of their children's difficulties in emotion regulation may be strongly influenced by their own difficulties in emotion regulation. Mothers should be informed that what their child experiences could be different from their own perceptions of that experience, and their perceptions could be influenced by their own difficulties which could be a result of their psychological problems. Similarly, adolescents should be informed about their mothers' thought processes, so that they can provide their mothers with more detailed and precise information about their own experiences, including emotion regulation. This kind of awareness might foster a better mother-child relationship, as well as healthy and open communication between the two dyad members. Such an approach might also enhance the psychotherapy process.

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APPENDICES

APPENDIX A: Permission Letter (STUDY 1 & MAIN STUDY)

T.C.
ANKARA VALİLİĞİ
Milli Eğitim Müdürlüğü

BÖLÜM : İstatistik Bölümü
SAYI : B.B.08.4.MEM.4.06.00.06-312/ 27578
KONU : Araştırma izni
Prof. Dr. Tülin GENÇÖZ
Dilek SARITAŞ

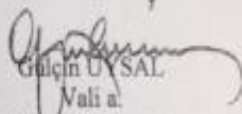
24/03/2010

..... KAYMAKAMLIĞINA
(İlçe Milli Eğitim Müdürlüğü)

İlgi: a) M.E.B. Bağlı Okul ve Kurumlarda Yapılacak Araştırma ve Araştırma Desteğine Yönelik İzin ve Uygulama Yönergesi.
b) MEB EARGED' in araştırma izinlerine ilişkin 11/04/2007 tarih ve 1950 sayılı yazısı.
c) 02/09/2009 tarih ve 74835 sayılı Valilik Onayı.
d) 05/11/2009 tarih ve 98610 sayılı Valilik Onayı.
e) ODTÜ Sosyal Bilimler Enstitüsünün 05/03/2010 tarih ve 3231 sayılı yazısı.

ODTÜ Sosyal Bilimler Enstitüsü Psikoloji Anabilim Dalı Klinik Psikoloji Doktora öğrencisi Dilek SARITAŞ' ın tez danışmanı Prof. Dr. Tülin GENÇÖZ yönetiminde yürüttüğü "Ebeveyn stilleri, algılanan duygu-durum düzenlemesi ve ergenlerin psikolojik sağlığı" konulu tez çalışması ile ilgili anketi, ek listedeki ilginç okullarında uygulama yapılması isteği Müdürlüğümüz Değerlendirme Komisyonunca uygun görülmüştür.

Mühürlü anket örnekleri (23 sayfadan oluşan) araştırmacıya ulaştırılmış olup, uygulama yapılacak sayıda araştırmacı tarafından çoğaltılarak, araştırmacının ilgi (a) yönerge çerçevesinde gönüllülük esasına göre uygulanmasını rica ederim.


Gülçin UYSAL
Vali a.
Müdür Yardımcısı

EKLER :
1-Okul Listesi (1 Sayfa)

DAĞITIM :
Keçiören-Çankaya-Altındağ-Yenimahalle
Pursaklar Kaymakamlığına

APPENDIX B: Informed Consent-Adolescent Form (STUDY 1)

Değerli Katılımcı,

Bu araştırmayı, Orta Doğu Teknik Üniversitesi Psikoloji Bölümü'nde yürütmekte olduğum doktora tezi kapsamında yapmaktayım. Araştırmanın amacı, ebeveyn tutum ve davranışları ile siz ergenlerin duygusal gelişimi arasındaki ilişkiyi incelemektir. Bu amacı gerçekleştirebilmek için ilişikteki anketleri doldurmanıza ihtiyaç duymaktayım.

Araştırmanın sonuçları açısından sağlıklı bilgi edinilmesi için yönergelerin dikkatlice okunması, verilen cevaplarda samimi olunması ve cevaplandırılmamış soru bırakılmaması son derece önemlidir. Cevaplar grup halinde değerlendirileceği için isminizi belirtmenize gerek yoktur ancak anne çocuk eşleştirmelerini yapabilmek için okul numaranızın belirtilmesi önemlidir. Cevaplarınız kesinlikle gizli tutulacak ve bu cevaplar sadece bilimsel araştırma amacıyla kullanılacaktır.

Anketi doldurarak sağlayacağınız bilgiler siz ergenlerin duygusal gelişimini etkileyen faktörlerin saptanmasına önemli bir katkıda bulunacaktır. Çalışma hakkında daha fazla bilgi almak için Psikoloji Bölümü araştırma görevlisi Dilek Sarıtaş (Oda: B35; Tel: 210 3138; E-posta: dsaritas@metu.edu.tr) ile iletişim kurabilirsiniz.

Katılımınız için şimdiden teşekkür ederim.

Araş. Gör. Dilek Sarıtaş
ODTÜ Psikoloji Bölümü
E-posta: dsaritas@metu.edu.tr

Tez Danışmanı
Prof. Dr. Tülin Gençöz
ODTÜ Psikoloji Bölümü

Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman yarıda kesip çıkabileceğimi biliyorum. Verdiğim bilgilerin bilimsel amaçlı yayımlarda kullanılmasını kabul ediyorum. (Formu doldurup imzaladıktan sonra uygulayıcıya geri veriniz).

Okul Numaranız

Tarih

İmza

APPENDIX C: Permission letter of Parents (STUDY 1)

Sayın Veliler,

Bu çalışma Orta Doğu Teknik Üniversitesi bünyesinde yapılmakta olan “Ebeveyn Stilleri, Algılanan Duygu-Durum Düzenlemesi ve Ergenlerin Psikolojik Sağlığı” başlıklı bir doktora bitirme tezidir. Araştırmanın amacı, ebeveyn tutum ve davranışları ile ergenlerin duygusal gelişimi arasındaki ilişkiyi incelemektir. Bu amacı gerçekleştirebilmek için çocuklarınızın bazı anketleri doldurmalarına ihtiyaç duymaktayım. Katılmasına izin verdiğiniz takdirde çocuğunuz anketi okulda ders saatinde dolduracaktır. Çocuğunuzun cevaplayacağı soruların onun psikolojik gelişimine olumsuz etkisi olmayacağından emin olabilirsiniz. Çocuğunuzun dolduracağı anketlerde cevaplar kesinlikle gizli tutulacak ve bu cevaplar sadece bilimsel araştırma amacıyla kullanılacaktır. Bu formu imzaladıktan sonra çocuğunuz katılımcılıktan ayrılma hakkına sahipsiniz. Araştırma sonuçlarının özeti tarafımızdan okula ulaştırılacaktır. Anketleri doldurarak bize sağlayacağınız bilgiler çocukların duygusal gelişimini etkileyen faktörlerin saptanmasına önemli bir katkıda bulunacaktır. Araştırmayla ilgili sorularınızı aşağıdaki e-posta adresini veya telefon numarasını kullanarak bana yöneltebilirsiniz.

Saygılarımızla,

Uzman Psikolog Dilek SARITAŞ

Orta Doğu Teknik Üniversitesi, Psikoloji Bölümü

Tel: (0312) 210 3138

e-posta: dsaritas@metu.edu.tr

Lütfen bu araştırmaya katılmak konusundaki tercihinizi aşağıdaki seçeneklerden size en uygun gelenin altına imzanızı atarak belirtiniz ve bu formu çocuğunuzla okula geri gönderiniz.

A) Bu araştırmada çocuğum’nın da katılımcı olmasına izin veriyorum.

Anne Adı-Soyadı.....

İmza

B) Bu çalışmaya çocuğum’nın katılımcı olmasına izin vermiyorum.

Anne Adı-Soyadı.....

İmza

APPENDIX D: Battery of Questionnaires for Adolescents (STUDY 1)

DERS

Aşağıda insanların duygularını kontrol etmekte kullandıkları bazı yöntemler verilmiştir. Lütfen her durumu dikkatlice okuyunuz ve her birinin sizin için ne kadar doğru olduğunu içtenlikle yanıtlayınız. Yanıtınızı uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Ne hissettiğim konusunda netimdir.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

2. Ne hissettiğimi dikkate alırım.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

3. Duygularım bana dayanılmaz ve kontrolsüz gelir.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

4. Ne hissettiğim konusunda hiç bir fikrim yoktur.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

5. Duygularıma bir anlam vermekte zorlanırım.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

6. Ne hissettiğime dikkat ederim.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

7. Ne hissettiğimi tam olarak bilirim.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

8. Ne hissettiğimi önemserim.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

9. Ne hissettiğim konusunda karmaşa yaşarım.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

10. Kendimi kötü hissetmeyi kabullenebilirim.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

11. Kendimi kötü hissettiğimde böyle hissettiğim için kendime kızarım.

- Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

12. Kendimi kötü hissettiğim zaman utanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
13. Kendimi kötü hissettiğimde işlerimi bitirmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
14. Kendimi kötü hissettiğimde kontrolden çıkmaya başlarım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
15. Kendimi kötü hissettiğimde uzun süre böyle kalacağıma inanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
16. Kendimi kötü hissetmemin yoğun depresif duyguyla sonuçlanacağına inanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
17. Kendimi kötü hissettiğimde duygularımın yerinde ve önemli olduğuna inanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
18. Kendimi kötü hissederken başka şeylere odaklanmakta zorlanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
19. Kendimi kötü hissederken kontrolden çıktığım duygusu yaşarım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
20. Kendimi kötü hissediyor olsam da çalışmayı sürdürebilirim.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
21. Kendimi kötü hissettiğimde bu duygumdan dolayı kendimden utanırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
22. Kendimi kötü hissettiğimde eninde sonunda kendimi daha iyi hissetmenin bir yolunu bulacağımı bilirim.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
23. Kendimi kötü hissettiğimde zayıf biri olduğum duygusuna kapılırım.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman
24. Kendimi kötü hissettiğimde de davranışlarım kontrolümün altındadır.
 Hiçbir zaman Bazen Yaklaşık
Yarı yarıya Çoğu zaman Her zaman

25. Kendimi kötü hissettiğim için suçluluk duyarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
26. Kendimi kötü hissettiğimde konsantre olmakta zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
27. Kendimi kötü hissettiğimde davranışlarımı kontrol etmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
28. Kendimi kötü hissettiğimde daha iyi hissetmem için yapacağım hiç bir şey olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
29. Kendimi kötü hissettiğimde böyle hissettiğim için kendimden rahatsız olurum.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
30. Kendimi kötü hissettiğimde kendim için çok fazla endişelenmeye başlarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
31. Kendimi kötü hissettiğimde kendimi bu duyguya bırakmaktan başka çıkar yol olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
32. Kendimi kötü hissettiğimde davranışlarım üzerindeki kontrolümü kaybederim.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
33. Kendimi kötü hissettiğimde başka bir şey düşünmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
34. Kendimi kötü hissettiğimde duygumun gerçekte ne olduğunu anlamak için zaman ayırırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
35. Kendimi kötü hissettiğimde kendimi daha iyi hissetmem uzun zaman alır.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
36. Kendimi kötü hissettiğimde duygularım dayanılmaz olur.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman

SDQ

Son 6 ay içindeki davranışlarını göz önüne alarak lütfen aşağıdaki maddeleri doldur. Her bir maddenin senin için ne derece doğru olduğunu aşağıdaki 3 seçenekten en uygun olanını yuvarlak içine alarak göster. 1 puan-----2 puan-----3 puan Doğru değil Kısmen doğru Kesinlikle doğru	Doğru Değil	Kısmen Dpğru	Kesinlikle Doğru
1. İnsanlara karşı iyi davranmaya çalışırım. Onların duygularını önemserim. .	1	2	3
2. Uzun süre kıpırdamadan oturamam huzursuz olurum.	1	2	3
3. Çok fazla baş ağrım, karın ağrım ya da bulantım olur.	1	2	3
4. Genellikle başkalarıyla (yiyecek, oyuncak, kalem vs.) paylaşıyorum.	1	2	3
5. Çok öfkelenirim ve sıkça kontrolümü kaybederim.	1	2	3
6. Genellikle kendi başıyım. Genellikle yalnız oynarım ya da başkaları ile birlikte olmaktan kaçınırım.	1	2	3
7. Genellikle bana söyleneni yaparım.	1	2	3
8. Çok endişelenirim.	1	2	3
9. Eger birisi incinmiş, morali bozulmuş ya da kendini kötü hissediyor ise ona yardım ederim.	1	2	3
10. Sürekli ellerim ayaklarım kıpır kıpırdır ya da oturduğu yerde kıpırdanıp dururum.	1	2	3
11. En az bir yakın arkadaşı var.	1	2	3
12. Çok kavga ederim. Diğer insanlara istediğimi yaptırabilirim.	1	2	3
13. Sıkça mutsuz, kederli ya da ağlamaklıyım.	1	2	3
14. Yaşıtlarım genelde beni sever.	1	2	3
15. Dikkatim kolayca dağılır. Yoğunlaşmakta güçlük çekerim.	1	2	3
16. Yeni ortamlarda gerginim. Kendime güvenimi kolayca kaybederim.	1	2	3
17. Kendimden küçüklere iyi davranırım.	1	2	3
18. Sıkça yalan söylemek ya da hile yapmakla suçlanırım.	1	2	3
19. Diğer çocuklar ya da gençler bana takarlar ya da benimle alay ederler.	1	2	3
20. Sıkça baskalarına (anne, baba, öğretmen, diğer çocuklar) yardım etmeye istekli olurum.	1	2	3
21. Birseyi yapmadan önce düşünürüm.	1	2	3
22. Ev, okul ya da başka yerlerden benim olmayan şeyleri izinsiz alırım..	1	2	3
23. Yetişkinlerle, çocuklardan daha iyi geçinirim.	1	2	3
24. Pek çok korkum var. Kolayca ürkerim.	1	2	3
25. Başladığım işi bitiririm, dikkat sürem iyidir..	1	2	3

ERQ

Aşağıda insanların duygularını kontrol etmekte kullandıkları bazı yöntemler verilmiştir. Lütfen her durumu dikkatlice okuyunuz ve her birinin sizin için ne kadar doğru olduğunu içtenlikle yanıtlayınız. Yanıtınızı uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Duygularımı, içinde bulunduğum durum hakkındaki düşüncelerimi değiştirerek kontrol ederim.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

2. Hissettiğim olumsuz duyguları azaltmak istediğimde, içinde bulunduğum durum hakkındaki düşüncelerimi değiştiririm.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

3. Hissettiğim olumlu duyguları arttırmak istediğimde, içinde bulunduğum durum hakkındaki düşüncelerimi değiştiririm.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

4. Hissettiğim olumlu duyguları (sevinç veya eğlence/çoşku gibi) arttırmak istediğimde, düşündüğüm şeyleri değiştiririm.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

5. Hissettiğim olumsuz duyguları (üzüntü veya kızgınlık gibi) azaltmak istediğimde, düşündüğüm şeyleri değiştiririm.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

6. Stres yaratan bir durumla karşılaştığımda, sakin kalmama yardımcı olacak şekilde düşünmeye çalışırım.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

7. Duygularımı onları belli etmeyerek kontrol ederim.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

8. Olumsuz duygular hissettiğimde, onları belli etmemek için elimden geleni yaparım.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

9. Duygularımı kendime (içimde) saklarım
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

10. Olumlu duygular hissettiğimde, onları belli etmemeye özen gösteririm.
 Hiç Çok az Bazen Kısmen Oldukça Tamamen
Doğru değil doğru doğru doğru doğru doğru

PANAS

Bu ölçek farklı duyguları tanımlayan bir takım sözcükler içermektedir. Son iki hafta nasıl hissettiğinizi düşünüp her maddeyi okuyun. Uygun cevabı her maddenin yanında ayrılan yere (puanları daire içine alarak) işaretleyin. Cevaplarınızı verirken aşağıdaki puanları kullanın.

1. Çok az veya hiç
2. Biraz
3. Ortalama
4. Oldukça
5. Çok fazla

1. İlgili 1 2 3 4 5
2. Sıkıntılı 1 2 3 4 5
3. Heyecanlı 1 2 3 4 5
4. Mutsuz 1 2 3 4 5
5. Güçlü 1 2 3 4 5
6. Suçlu 1 2 3 4 5
7. Ürkmüş 1 2 3 4 5
8. Düşmanca 1 2 3 4 5
9. Hevesli 1 2 3 4 5
10. Gururlu 1 2 3 4 5
11. Asabi 1 2 3 4 5
12. Uyanık 1 2 3 4 5
13. Utanmış 1 2 3 4 5
14. İlhamlı 1 2 3 4 5
(yaratıcı düşüncelerle dolu)
15. Sinirli 1 2 3 4 5
16. Kararlı 1 2 3 4 5
17. Dikkatli 1 2 3 4 5
18. Tedirgin 1 2 3 4 5
19. Aktif 1 2 3 4 5
20. Korkmuş 1 2 3 4 5

APPENDIX E: Informed Consent-Adolescent Form (MAIN STUDY)

Değerli Katılımcı,

Orta Doğu Teknik Üniversitesi Psikoloji Bölümü olarak TÜBİTAK tarafından desteklenmekte olan 110K333 No'lu "Ebeveyn Stilleri, Algılanan Duygu-Durum Düzenlemesi ve Ergenlerin Psikolojik Sağlığı" başlıklı araştırma projesini yürütmekteyiz. Araştırmanın amacı, ebeveyn tutum ve davranışları ile ergenlerin duygusal gelişimi arasındaki ilişkiyi incelemektir. Bu amacı gerçekleştirebilmek için ilişikteki anketleri doldurmanıza ihtiyaç duymaktayız.

Araştırmanın sonuçları açısından sağlıklı bilgi edinilmesi için yönergelerin dikkatlice okunması, verilen cevaplarda samimi olunması ve cevaplandırılmamış soru bırakılmaması son derece önemlidir. Cevaplar grup halinde değerlendirileceği için isminizi belirtmenize gerek yoktur ancak anne çocuk eşleştirmelerini yapabilmek için çocuğunuzun okul numarasının belirtilmesi önemlidir. Cevaplarınız kesinlikle gizli tutulacak ve bu cevaplar sadece bilimsel araştırma amacıyla kullanılacaktır.

Anketi doldurarak sağlayacağınız bilgiler ergenlerin duygusal gelişimini etkileyen faktörlerin saptanmasına önemli bir katkıda bulunacaktır. Çalışma hakkında daha fazla bilgi almak için Psikoloji Bölümü araştırma görevlisi, Uzm. Psikolog Dilek Sarıtaş (Oda: B35; Tel: 210 3138; e-posta: dsaritas@metu.edu.tr) ile iletişim kurabilirsiniz.

Katılımınız için şimdiden teşekkür ederiz.

Proje Asistanı
Araş. Gör. Dilek Sarıtaş
ODTÜ Psikoloji Bölümü

Proje Yürütücüsü
Prof. Dr. Tülin Gençöz
ODTÜ Psikoloji Bölümü

Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman yarıda kesip çıkabileceğimi biliyorum. Verdiğim bilgilerin bilimsel amaçlı yayımlarda kullanılmasını kabul ediyorum. (Formu doldurup imzaladıktan sonra uygulayıcıya geri veriniz).

Çocuğunuzun Okul Numarası

Tarih

İmza

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APPENDIX F: Permission of Parent (MAIN STUDY)

Sayın Anneler,

Orta Doğu Teknik Üniversitesi Psikoloji Bölümü olarak TÜBİTAK tarafından desteklenmekte olan 110K333 No'lu "Ebeveyn Stilleri, Algılanan Duygu-Durum Düzenlemesi, ve Ergenlerin Psikolojik Sağlığı" başlıklı araştırma projesini yürütmekteyiz. Bu araştırmanın amacı, ebeveyn tutum ve davranışları ile ergenlerin duygusal gelişimi arasındaki ilişkiyi incelemektir. Bu amacı gerçekleştirebilmek için çocuklarınızın ve sizin bazı anketleri doldurmanıza ihtiyaç duymaktayım. Katılmasına izin verdiğiniz takdirde çocuğunuz anketi okulda ders saatinde dolduracaktır. Anne anketleri ise size çocuğunuz aracılığıyla ulaştırılacaktır. Çocuğunuzun cevaplayacağı soruların onun psikolojik gelişimine olumsuz etkisi olmayacağından emin olabilirsiniz. Sizin ve çocuğunuzun dolduracağı anketlerde cevaplarınız kesinlikle gizli tutulacak ve bu cevaplar sadece bilimsel araştırma amacıyla kullanılacaktır. Bu formu imzaladıktan sonra hem siz hem de çocuğunuz katılımcılıktan ayrılma hakkına sahipsiniz. Araştırma sonuçlarının özeti tarafımızdan okula ulaştırılacaktır. Anketleri doldurarak bize sağlayacağınız bilgiler çocukların duygusal gelişimini etkileyen faktörlerin saptanmasına önemli bir katkıda bulunacaktır. Araştırmayla ilgili sorularınızı aşağıdaki e-posta adresini veya telefon numarasını kullanarak bana yöneltebilirsiniz.

Saygılarımızla,

Proje Yürütücüsü Prof. Dr. Tülin Gençöz
Orta Doğu Teknik Üniversitesi, Psikoloji Bölümü

Proje Asistanı: Dilek Sarıtaş, M.S.
Orta Doğu Teknik Üniversitesi, Psikoloji Bölümü
Tel: 0312 210 3138
e-posta: dsaritas@metu.edu.tr

Lütfen bu araştırmaya katılmak konusundaki tercihinizi aşağıdaki seçeneklerden size en uygun gelenin altına imzanızı atarak belirtiniz ve bu formu çocuğunuzla okula geri gönderiniz.

A) Bu araştırmaya tamamen gönüllü olarak katılıyorum ve çocuğum'nın da katılımcı olmasına izin veriyorum. Çalışmayı istediğim zaman yarıda kesip bırakabileceğimi biliyorum ve verdiğim bilgilerin bilimsel amaçlı olarak kullanılmasını kabul ediyorum.

Anne Adı-Soyadı.....

İmza

B) Bu çalışmaya katılmayı kabul etmiyorum ve çocuğum'nın da katılımcı olmasına izin vermiyorum.

Anne Adı-Soyadı.....

İmza

APPENDIX G: Informed Consent-Mother Form (MAIN STUDY)

Değerli Ebeveyn,

Orta Dogu Teknik Üniversitesi Psikoloji Bölümü olarak TÜBİTAK tarafından desteklenmekte olan 110K333 No’lu “Ebeveyn Stilleri, Algılanan Duygu-Durum Düzenlemesi ve Ergenlerin Psikolojik Sağlığı” başlıklı araştırma projesini yürütmekteyiz.. Araştırmanın amacı, ebeveyn tutum ve davranışları ile ergenlerin duygusal gelişimi arasındaki ilişkiyi incelemektir. Bu amacı gerçekleştirebilmek için ilişikteki anketleri doldurmanıza ihtiyaç duymaktayız.

Araştırmanın sonuçları açısından sağlıklı bilgi edinilmesi için yönergelerin dikkatlice okunması, verilen cevaplarda samimi olunması ve cevaplandırılmamış soru bırakılmaması son derece önemlidir. Cevaplar grup halinde değerlendirileceği için isminizi belirtmenize gerek yoktur ancak anne çocuk eşleştirmelerini yapabilmek için çocuğunuzun okul numarasının belirtilmesi önemlidir. Cevaplarınız kesinlikle gizli tutulacak ve bu cevaplar sadece bilimsel araştırma amacıyla kullanılacaktır.

Anketi doldurarak sağlayacağınız bilgiler ergenlerin duygusal gelişimini etkileyen faktörlerin saptanmasına önemli bir katkıda bulunacaktır. Çalışma hakkında daha fazla bilgi almak için Psikoloji Bölümü araştırma görevlisi, Uzm. Psikolog Dilek Sarıtaş (Oda: B35; Tel: 210 3138; e-posta: dsaritas@metu.edu.tr) ile iletişim kurabilirsiniz.

Katılımınız için şimdiden teşekkür ederiz.

Proje Asistanı
Araş. Gör. Dilek Sarıtaş
ODTÜ Psikoloji Bölümü

Proje Yürütücüsü
Prof. Dr. Tülin Gençöz
ODTÜ Psikoloji Bölümü

Bu çalışmaya tamamen gönüllü olarak katılıyorum ve istediğim zaman yarıda kesip çıkabileceğimi biliyorum. Verdiğim bilgilerin bilimsel amaçlı yayımlarda kullanılmasını kabul ediyorum. (Formu doldurup imzaladıktan sonra uygulayıcıya geri veriniz).

Çocuğunuzun Okul Numarası

Tarih

İmza

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APPENDIX H: Battery of Questionnaires for Adolescents (MAIN STUDY)

Demographic Form

Lütfen aşağıda istenilen bilgileri yazınız ve seçenekli sorularda size uygun olan seçeneğin yanındaki () ile gösterilen alana **X** işareti koyarak belirtiniz.

1. Cinsiyetiniz: (K) (E)

2. Yaşınız:

3. Okulunuz:.....

5. Annenizin eğitim durumu

() Okur yazar () İlkokul mezunu () Ortaokul mezunu

() Lise mezunu () Yüksek Okul (2 yıllık) () Üniversite mezunu (4

yıllık)

() Master veya Doktora

6. Babanızın eğitim durumu

() Okur yazar () İlkokul mezunu () Ortaokul mezunu

() Lise mezunu () Yüksek Okul (2 yıllık) () Üniversite mezunu (4

yıllık)

() Master veya Doktora

6. Ailenizin aylık toplam geliri:

7. Anne ve babanız birlikteler mi?

() Evet () Hayır

Cevabınız 'Hayır' ise ne kadar zamandır ayrılır?

8. Sen dahil kaç kardeşsiniz?.....

9. Şu anda ailenizle birlikte mi yaşıyorsunuz?

() Evet

() Hayır (lütfen belirtiniz)

10. Son 6 ay içinde psikolojik yada psikiyatrik destek aldınız mı?

Cevabınız evet ise lütfen açıklayınız.....

DERS

Aşağıda insanların duygularını kontrol etmekte kullandıkları bazı yöntemler verilmiştir. Lütfen her durumu dikkatlice okuyunuz ve her birinin sizin için ne kadar doğru olduğunu içtenlikle yanıtlayınız. Yanıtınızı uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Ne hissettiğim konusunda netimdir.

- Hiçbir zaman net değilim Bazen netim Yaklaşık Yarı yarıya Çoğu zaman netim Her zaman netim

2. Ne hissettiğimi dikkate alırım.

- Hiçbir zaman dikkate almam Bazen dikkate alırım Yaklaşık Yarı yarıya Çoğu zaman dikkate alırım Her zaman dikkate alırım

3. Duygularım bana dayanılmaz ve kontrolsüz gelir.

- Hiçbir zaman gelmez Bazen gelir Yaklaşık Yarı yarıya Çoğu zaman gelir Her zaman gelir

4. Ne hissettiğim konusunda hiç bir fikrim yoktur.

- Hiçbir zaman Fikrim yoktur Bazen fikrim vardır Yaklaşık Yarı yarıya Çoğu zaman fikrim vardır Her zaman fikrim vardır

5. Duygularıma bir anlam vermekte zorlanırım.

- Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım

6. Ne hissettiğime dikkat ederim.

- Hiçbir zaman dikkat etmem Bazen dikkat ederim Yaklaşık Yarı yarıya Çoğu zaman dikkat ederim Her zaman dikkat ederim

7. Ne hissettiğimi tam olarak bilirim.

- Hiçbir zaman bilmem Bazen bilirim Yaklaşık Yarı yarıya Çoğu zaman bilirim Her zaman bilirim

8. Ne hissettiğimi önemserim.

- Hiçbir zaman önemsemem Bazen önemserim Yaklaşık Yarı yarıya Çoğu zaman önemserim Her zaman önemserim

9. Ne hissettiğim konusunda karmaşa yaşarım.

- Hiçbir zaman yaşamam Bazen yaşamam Yaklaşık Yarı yarıya Çoğu zaman yaşarım Her zaman yaşarım

10. Kendimi kötü hissetmeyi kabullenebilirim.

- Hiçbir zaman kabullenemem Bazen kabullenebilirim Yaklaşık Yarı yarıya Çoğu zaman kabullenebilirim Her zaman kabullenebilirim

11. Kendimi kötü hissettiğimde böyle hissettiğim için kendime kızarım.

- Hiçbir zaman kızmam Bazen kızarım Yaklaşık Yarı yarıya Çoğu zaman kızarım Her zaman kızarım

12. Kendimi kötü hissettiğim zaman utanırım.
 Hiçbir zaman utanmam Bazen utanırım Yaklaşık Yarı yarıya Çoğu zaman utanırım Her zaman utanırım
13. Kendimi kötü hissettiğimde işlerimi bitirmekte zorlanırım.
 Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım
14. Kendimi kötü hissettiğimde kontrolden çıkmaya başlarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
15. Kendimi kötü hissettiğimde uzun süre böyle kalacağıma inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
16. Kendimi kötü hissetmemin yoğun depresif duyguyla sonuçlanacağına inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
17. Kendimi kötü hissettiğimde duygularımın yerinde ve önemli olduğuna inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
18. Kendimi kötü hissederken başka şeylere odaklanmakta zorlanırım.
 Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım
19. Kendimi kötü hissederken kontrolden çıktığım duygusu yaşarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
20. Kendimi kötü hissediyor olsam da yine de işlerimi yapabilirim.
 Hiçbir zaman yapamam Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman yapabilirim
21. Kendimi kötü hissettiğimde bu duygumdan dolayı kendimden utanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
22. Kendimi kötü hissettiğimde eninde sonunda kendimi daha iyi hissetmenin bir yolunu bulacağıma inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
23. Kendimi kötü hissettiğimde zayıf biri olduğum duygusuna kapılırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman

24. Kendimi kötü hissettiğimde de davranışlarım kontrolümün altındadır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
25. Kendimi kötü hissettiğimde, böyle hissettiğim için suçluluk duyarım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
26. Kendimi kötü hissettiğimde konsantre olmakta zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
27. Kendimi kötü hissettiğimde davranışlarımı kontrol etmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
28. Kendimi kötü hissettiğimde daha iyi hissetmem için yapacağım hiç bir şey olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
29. Kendimi kötü hissettiğimde böyle hissettiğim için kendimden rahatsız olurum.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
30. Kendimi kötü hissettiğimde kendim için çok fazla endişelenmeye başlarım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
31. Kendimi kötü hissettiğimde kendimi bu duyguya bırakmaktan başka çıkar yol olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
32. Kendimi kötü hissettiğimde davranışlarım üzerindeki kontrolümü kaybederim.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
33. Kendimi kötü hissettiğimde başka bir şey düşünmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
34. Kendimi kötü hissettiğimde duygumun gerçekte ne olduğunu anlamak için zaman ayırırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
35. Kendimi kötü hissettiğimde bu duygunun geçmesi çok uzun zaman alır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
36. Kendimi kötü hissettiğimde duygularım dayanılmaz olur.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya

EMBU

Aşağıda, şu an annenizle olan ilişkileriniz hakkında cümleler verilmiştir. Her bir cümlede anlatılan durumu şu an ne sıklıkla yaşadığınızı 6 aralıklı ölçek üzerinde, ilgili rakam üzerine çarpı (X) koyarak gösteriniz. Hiçbir maddenin doğru ya da yanlış cevabı yoktur. Önemli olan her cümle ile ilgili olarak kendi durumunuzu doğru bir şekilde yansıtmamız

1-----2-----3-----4-----5-----6
Hiçbir Nadiren Bazen Ara sıra Sık sık Her zaman
Zaman

	1	2	3	4	5	6
1. Annem sıkıntılı olduğumu söylemeden anlar.	1	2	3	4	5	6
2. Annem aldığı sonuçtan çok diğerlerine göre nerede olduğumu merak eder.	1	2	3	4	5	6
3. Başladığım bir işi başardığımda annemin benimle gurur duyduğunu hissederim.	1	2	3	4	5	6
4. Annem başıma bir şey gelecek korkusuyla başka çocukların yaptığı bazı şeyleri yapmama izin vermez.	1	2	3	4	5	6
5. Annem küçük şeyler için bile beni sert bir şekilde cezalandırır.	1	2	3	4	5	6
6. Annem bana kızdığı anda kendisinin de üzülüğünü hissederim.	1	2	3	4	5	6
7. Annem kötü bir şey yaptığımda hemen kızmaz, nedenini anlamaya çalışır.	1	2	3	4	5	6
8. Annemin ne yapıp ettiğim konusunda daha az endişelenmesini isterim.	1	2	3	4	5	6
9. Annem kötü bir şey yaptığımda bunu surat asarak veya başka bir yolla öyle belli eder ki kendimi gerçekten suçlu hissederim.	1	2	3	4	5	6
10. Annem yaptıklarıyla bana kendimden utanmam gerektiğini hissettirir.	1	2	3	4	5	6
11. Annem arkadaşlarımda içinde en iyisi olmam için beni zorlar.	1	2	3	4	5	6
12. Annemin bana hak ettiğimden daha fazla vurduğu ya da ceza verdiği olur.	1	2	3	4	5	6
13. İşlerim kötü gittiğinde, annem beni rahatlatmaya ve yüreklendirmeye çalışır.	1	2	3	4	5	6
14. Oynarken tehlikeler konusunda en çok benim annem uyarır (Ağaca, duvara tırmanmamamı söylemek gibi)	1	2	3	4	5	6
15. Sokakta oynarken annesi tarafından en çok çağırılan ben olurum	1	2	3	4	5	6
16. Annem bana ailenin günah keçisi (her konuda suçlanacak insan) muamelesi yapar.	1	2	3	4	5	6
17. Annem ergenlik yıllarımda keyif verici ve öğretici geçmesine çalışır (tatile, akrabalara, kursa göndermek, bana güzel kitaplar almak gibi davranışlarla).	1	2	3	4	5	6
18. Annem beni derslerim konusunda arkadaşlarımla karşılaştırır.	1	2	3	4	5	6
19. Annem üşüyeceğim endişesiyle çok kalın giydirir.	1	2	3	4	5	6
20. Annem beni takdir eder ya da ödüllendirir.	1	2	3	4	5	6
21. Annem beni herkesin içinde eleştirir, tembel ve işe yaramaz olduğumu söyler.	1	2	3	4	5	6
22. Annemin kardeş(ler)imi (benden küçük ya da büyük) benden daha çok sevdiğini hissederim.	1	2	3	4	5	6
23. Annemin başıma bir şey gelebileceği yolundaki endişeleri çok abartılıdır.	1	2	3	4	5	6
24. Annemle aramda sıcaklık ve sevecenlik vardır.	1	2	3	4	5	6
25. Annem, oynarken evin yakınından ayrılmama hiç izin vermez.	1	2	3	4	5	6
26. Annem sözleri ve hareketleriyle beni sevdiğini gösterir.	1	2	3	4	5	6
27. Annem başka çocukları bana örnek gösterir.	1	2	3	4	5	6
28. Annemin nedenini söylemeden bana kızgın ya da ters davrandığı olur.	1	2	3	4	5	6
29. Annem beni derslerim konusunda kardeş(ler)imle veya akraba çocuklarıyla karşılaştırır.	1	2	3	4	5	6

SDQ

Son 6 ay içindeki davranışlarını göz önüne alarak lütfen aşağıdaki maddeleri doldur. Her bir maddenin senin için ne derece doğru olduğunu aşağıdaki 3 seçenektan en uygun olanını yuvarlak içine alarak göster.	Doğru Değil	Kısmen Doğru	Kesinlikle Doğru
1 puan-----2 puan-----3 puan Doğru değil Kısmen doğru Kesinlikle doğru			
1. İnsanlara karşı iyi davranmaya çalışırım. Onların duygularını önemserim. .	1	2	3
2. Uzun süre kıpırdamadan oturamam huzursuz olurum.	1	2	3
3. Çok fazla baş ağrım, karın ağrım ya da bulantım olur.	1	2	3
4. Genellikle başkalarıyla (yiyecek, oyuncak, kalem vs.) paylaşıyorum.	1	2	3
5. Çok öfkelenirim ve sıkça kontrolümü kaybederim.	1	2	3
6. Genellikle kendi başımayım. Genellikle yalnız oynarım ya da başkaları ile birlikte olmaktan kaçınırım.	1	2	3
7. Genellikle bana söyleneni yaparım.	1	2	3
8. Çok endişelenirim.	1	2	3
9. Eğer birisi incinmiş, morali bozulmuş ya da kendini kötü hissediyor ise ona yardım ederim.	1	2	3
10. Sürekli ellerim ayaklarım kıpır kıpırdır ya da oturduğu yerde kıpırdanıp dururum.	1	2	3
11. En az bir yakın arkadaşı var.	1	2	3
12. Çok kavga ederim. Diğer insanlara istediğimi yaptırabilirim.	1	2	3
13. Sıkça mutsuz, kederli ya da ağlamaklıyım.	1	2	3
14. Yaşıtlarım genelde beni sever.	1	2	3
15. Dikkatim kolayca dağılır. Yoğunlaşmakta güçlük çekerim.	1	2	3
16. Yeni ortamlarda gerginim. Kendime güvenimi kolayca kaybederim.	1	2	3
17. Kendimden küçüklere iyi davranırım.	1	2	3
18. Sıkça yalan söylemek ya da hile yapmakla suçlanırım.	1	2	3
19. Diğer çocuklar ya da gençler bana takarlar ya da benimle alay ederler.	1	2	3
20. Sıkça başkalarına (anne, baba, öğretmen, diğer çocuklar) yardım etmeye istekli olurum.	1	2	3
21. Bir şeyi yapmadan önce düşünürüm.	1	2	3
22. Ev, okul ya da baksa yerlerden benim olmayan şeyleri izinsiz alırım..	1	2	3
23. Yetişkinlerle, çocuklardan daha iyi geçinirim.	1	2	3
24. Pek çok korkum var. Kolayca ürkerim.	1	2	3
25. Başladığım işi bitiririm, dikkat sürem iyidir..	1	2	3

Basic Personality Traits

Aşağıda size uyan ya da uymayan pek çok kişilik özelliği bulunmaktadır. Bu özelliklerden her birinin sizin için ne kadar uygun olduğunu ilgili rakamı daire içine alarak belirtiniz.

Örneğin;

Kendimi biri olarak görüyorum.

<u>Hiç uygun değil</u>	<u>Uygun değil</u>	<u>Kararsızım</u>	<u>Uygun</u>	<u>Cok</u>
1	2	3	4	5
	Hiç uygun değil			Hiç uygun değil
	Uygun değil			Uygun değil
	Kararsızım			Kararsızım
	Uygun			Uygun
	Çok uygun			Çok uygun
1 Aceleci	1 2 3 4 5	24 Pasif	1 2 3 4 5	
2 Yapmacık	1 2 3 4 5	25 Disiplinli	1 2 3 4 5	
3 Duyarlı	1 2 3 4 5	26 Açgözlü	1 2 3 4 5	
4 Konuşkan	1 2 3 4 5	27 Sinirli	1 2 3 4 5	
5 Kendine güvenen	1 2 3 4 5	28 Cana yakın	1 2 3 4 5	
6 Soğuk	1 2 3 4 5	29 Kızgın	1 2 3 4 5	
7 Utangaç	1 2 3 4 5	30 Sabit fikirli	1 2 3 4 5	
8 Paylaşımçı	1 2 3 4 5	31 Görgüsüz	1 2 3 4 5	
9 Geniş / rahat	1 2 3 4 5	32 Durgun	1 2 3 4 5	
10 Cesur	1 2 3 4 5	33 Kaygılı	1 2 3 4 5	
11 Agresif(Saldırgan)	1 2 3 4 5	34 Terbiyesiz	1 2 3 4 5	
12 Çalışkan	1 2 3 4 5	35 Sabırsız	1 2 3 4 5	
13 İçten pazarlıklı	1 2 3 4 5	36 Yaratıcı	1 2 3 4 5	
14 Girişken	1 2 3 4 5	37 Kaprisli	1 2 3 4 5	
15 İyi niyetli	1 2 3 4 5	38 İçine kapanık	1 2 3 4 5	
16 İçten	1 2 3 4 5	39 Çekingen	1 2 3 4 5	
17 Kendinden emin	1 2 3 4 5	40 Alıngan	1 2 3 4 5	
18 Huysuz	1 2 3 4 5	41 Hoşgörülü	1 2 3 4 5	
19 Yardımsever	1 2 3 4 5	42 Düzenli	1 2 3 4 5	
20 Kabiliyetli	1 2 3 4 5	43 Titiz	1 2 3 4 5	
21 Üşengeç	1 2 3 4 5	44 Tedbirli	1 2 3 4 5	
22 Sorumsuz	1 2 3 4 5	45 Azimli	1 2 3 4 5	
23 Sevecen	1 2 3 4 5			

PANAS

Bu ölçek farklı duyguları tanımlayan bir takım sözcükler içermektedir. Son iki hafta nasıl hissettiğinizi düşünüp her maddeyi okuyun. Uygun cevabı her maddenin yanında ayrılan yere (puanları daire içine alarak) işaretleyin. Cevaplarınızı verirken aşağıdaki puanları kullanın.

1. Çok az veya hiç
2. Biraz
3. Ortalama
4. Oldukça
5. Çok fazla

1. İlgili	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
2. Sıkıntılı	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
3. Heyecanlı	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
4. Mutsuz	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
5. Güçlü	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
6. Suçlu	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
7. Ürkmüş	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
8. Düşmanca	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
9. Hevesli	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
10. Gururlu	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
11. Asabi	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
12. Uyanık	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
13. Utanmış	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
14. İlhamlı (yaratıcı düşüncelerle dolu)	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
15. Sinirli	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
16. Kararlı	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
17. Dikkatli	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
18. Tedirgin	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
19. Aktif	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
20. Korkmuş	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>

CDI

Sevgili öğrenciler, aşağıda gruplar halinde bazı cümleler yazılıdır. Her gruptaki cümleleri dikkatlice okuyunuz. Her grup için, bugün, dahil son iki hafta içinde size en uygun olun cümlenin yanındaki numarayı daire içine almız.

1. a- Kendimi arada sırada üzgün hissederim.
b- Kendimi sık sık üzgün hissederim.
c- Kendimi her zaman üzgün hissederim.
2. a- İşlerim hiç bir zaman yolunda gitmeyecek.
b- İşlerimin yolunda gidip gitmeyeceğinden emin değilim.
c- İşlerim yolunda gidecek.
3. a- İşlerimin çoğunu doğru yaparım.
b- İşlerimin çoğunu yanlış yaparım.
c- Hepsini yanlış yaparım.
4. a- Birçok şeyden hoşlanırım.
b- Bazı şeylerden hoşlanırım.
c- Hiçbir şeyden hoşlanmam.
5. a- Her zaman kötü bir çocuğum.
b- Çoğu zaman kötü bir çocuğum.
c- Arada sırada kötü bir çocuğum.
6. a- Arada sırada basıma kötü bir şeylerin geleceğini düşünürüm.
b- Sık sık basıma kötü bir şeylerin geleceğinden endişelenirim.
c- Basıma çok kötü şeyler geleceğinden eminim.
7. a- Kendimden nefret ederim.
b- Kendimi beğenmem.
c- Kendimi beğenirim.
8. a- Bütün kötü şeyler benim hatam.
b- Kötü şeylerin bazıları benim hatam.
c- Kötü şeyler genellikle benim hatam değil.
9. a- Kendimi öldürmeyi düşünmem.
b- Kendimi öldürmeyi düşünürüm ama yapmam.
c- Kendimi öldürmeyi düşünüyorum.
10. a- Hergün içimden ağlamak gelir.
b- Birçok günler içimden ağlamak gelir.
c- Arada sırada içimden ağlamak gelir.
11. a- Her şey hergün beni sıkır.
b- Her şey sık sık beni sıkır.
c- Her şey arada sırada beni sıkır.
12. a- İnsanlarla beraber olmaktan hoşlanırım.
b- Çoğu zaman insanlarla birlikte olmaktan hoşlanmam.
c- Hiçbir zaman insanlarla birlikte olmaktan hoşlanmam.
13. a- Herhangi bir şey hakkında karar veremem.
b- Herhangi bir şey hakkında karar vermek zor gelir.
c- Herhangi bir şey hakkında kolayca karar veririm.

14. a- Güzel/Yakısıklı sayılırım.
b- Güzel/Yakısıklı olmayan yanlarım var.
c- Çirkinim.
15. a- Okul ödevlerimi yapmak için her zaman kendimi zorlarım.
b- Okul ödevlerimi yapmak için çoğu zaman kendimi zorlarım.
c- Okul ödevlerimi yapmak sorun değil.
16. a- Her gece uyumakta zorluk çekerim.
b- Bir çok gece uyumakta zorluk çekerim.
c- Oldukça iyi uyurum.
17. a- Arada sırada kendimi yorgun hissederim.
b- Bir çok gün kendimi yorgun hissederim.
c- Her zaman kendimi yorgun hissederim.
18. a- Hemen hergün canım yemek yemek istemez.
b- Çoğu gün canım yemek yemek istemez.
c- Oldukça iyi yemek yerim.
19. a- Ağrı ve sızılardan endişe etmem.
b- Çoğu zaman ağrı ve sızılardan endişe ederim.
c- Her zaman ağrı ve sızılardan endişe ederim.
20. a- Kendimi yalnız hissetmem.
b- Çoğu zaman kendimi yalnız hissederim.
c- Her zaman kendimi yalnız hissederim.
21. a- Okuldan hiç hoslanmam.
b- Arada sırada okuldan hoslanırım.
c- Çoğu zaman okuldan hoslanırım.
22. a- Birçok arkadaşım var.
b- Birçok arkadaşım var ama daha fazla olmasını isterdim.
c- Hiç arkadaşım yok.
23. a- Okul başarımlı iyi.
b- Okul başarımlı eskisi kadar iyi değil.
c- Eskiden iyi olduğum derslerde çok başarısızım.
24. a- Hiçbir zaman diğer çocuklar kadar iyi olamıyorum.
b- Eğer istersem diğer çocuklar kadar iyi olurum.
c- Diğer çocuklar kadar iyiyim.
25. a- Kimse beni sevmez.
b- Beni seven insanların olup olmadığından emin değilim.
c- Beni seven insanların olduğundan eminim.
26. a- Bana söyleneni genellikle yaparım.
b- Bana söyleneni çoğu zaman yaparım.
c- Bana söyleneni hiçbir zaman yapmam.
27. a- İnsanlarla iyi geçinirim.
b- İnsanlarla sık sık kavga ederim.
c- İnsanlarla her zaman kavga ederim.

APPENDIX I: Battery of Questionnaires for Mothers (MAIN STUDY)

Demographic Form for Mothers

Lütfen aşağıda istenilen bilgileri yazınız ve seçenekli sorularda size uygun olan seçeneğin yanındaki () ile gösterilen alana **X** işareti koyarak belirtiniz.

1. Yaşınız:

2. Eğitim durumunuz:

() Okur yazar () İlkokul mezunu () Ortaokul mezunu

() Lise mezunu () Yüksek okul (2 yıllık) () Üniversite mezunu (4

yıllık)

() Master veya Doktora

3. Size en uygun seçeneği işaretleyiniz.

() Ev hanımı () Çalışıyor () İşsiz () Emekli

Varsa, mesleğiniz:

4. Eve giren aylık gelir miktarınız:

5. Ev telefonunuz:

6a. Aile durumunuzu sizin, eşinizin ve çocuğunuzun durumunu en iyi

yansıtacak şekilde işaretleyiniz.

() Evli ve anne-baba birlikte

() Evli ve anne baba ayrı yaşıyor

() Boşanmış ve çocuk anne ile yaşıyor

() Boşanmış ve çocuk babayla yaşıyor

() Boşanmış ve çocuk akraba ile yaşıyor

() Diğer (Lütfen belirtiniz).....

b. Evliyseniz:

Ne kadar süredir evlisiniz? yıl ay

Bu kaçınıcı evliliğiniz?

7. Kaç çocuğunuz var?.....

8. Son 6 ay içinde psikolojik yada psikiyatrik destek aldınız mı?

Cevabınız evet ise lütfen açıklayınız.....

EMBU

Aşağıdaki maddeler **ANKETİ GETİREN ÇOCUĞUNUZLA** olan ilişkinizi ölçmektedir. Lütfen ONUNLA ŞU ANKI İLİŞKİNİZİ düşünerek bu maddeleri cevaplandırınız. Lütfen hiçbir maddeyi boş bırakmayınız. Cevaplarınızı seçtiğiniz cevap içine çarpı (X) koyarak belirtiniz.

1-----2-----3-----4-----5-----6

Hiçbir zaman Nadiren Bazen Ara sıra Sık sık Her zaman

	1	2	3	4	5	6
1. Çocuğumun sıkıntılı olduğunu o söylemeden anlarım.	1	2	3	4	5	6
2. Çocuğumun aldığı sonuçtan çok arkadaşlarına göre nerede olduğunu merak ederim.	1	2	3	4	5	6
3. Başladığı bir işi başardığında çocuğumla gurur duyarım.	1	2	3	4	5	6
4. Başına bir şey gelecek korkusuyla başka çocukların yaptığı bazı şeyleri yapmasına izin vermem.	1	2	3	4	5	6
5. Küçük şeyler için bile çocuğumu sert bir şekilde cezalandırırım.	1	2	3	4	5	6
6. Çocuğuma kızdığımda kendim de üzülürüm.	1	2	3	4	5	6
7. Kötü bir şey yaptığında hemen kızmaz, nedenini anlamaya çalışırım.	1	2	3	4	5	6
8. Çocuğumun ne yapıp ettiği konusunda çok endişelenirim.	1	2	3	4	5	6
9. Kötü bir şey yaptığında bunu surat asarak veya başka bir yolla öyle belli ederim ki çocuğum kendisini gerçekten suçlu hisseder.	1	2	3	4	5	6
10. Yaptıklarımın çocuğuma kendisinden utanması gerektiğini hissettiririm.	1	2	3	4	5	6
11. Arkadaşlarının içinde en iyisi olması için çocuğumu zorlarım.	1	2	3	4	5	6
12. Çocuğuma hak ettiğinden daha fazla dayak attığım ya da ceza verdiğim olur.	1	2	3	4	5	6
13. İşleri kötü gittiğinde, onu rahatlatmaya ve yüreklendirmeye çalışırım.	1	2	3	4	5	6
14. Oynarken başına bir şey gelir korkusuyla çocuğumu diğer annelerden daha çok uyarırım. (ağaca, duvara tırmanmamasını söylemek gibi)	1	2	3	4	5	6
15. Sokakta oynarken çocuğumu diğer annelerin çocuklarını çağırdıklarından daha çok çağırırım.	1	2	3	4	5	6
16. Çocuğuma ailenin günah keçisi (her konuda suçlanacak insan) muamelesi yaparım.	1	2	3	4	5	6
17. Ergenlik yıllarının keyif verici ve öğretici geçmesine çalışırım (tatile, akrabalara, kursa göndermek, ona güzel kitaplar almak gibi davranışlarla).	1	2	3	4	5	6
18. Çocuğumu dersleri konusunda arkadaşlarıyla karşılaştırırım.	1	2	3	4	5	6
19. Çocuğumu üşüyeceği endişesiyle çok kalın giydiririm.	1	2	3	4	5	6
20. Çocuğumu takdir eder ya da ödüllendiririm.	1	2	3	4	5	6
21. Çocuğumu herkesin içinde eleştirir, tembel ve işe yaramaz olduğunu söylerim.	1	2	3	4	5	6
22. Kardeş(ler)ini (ondan küçük ya da büyük) ondan daha çok severim.	1	2	3	4	5	6
23. Çocuğumun başına bir şey gelebileceği yolundaki bazı endişelerim abartılıdır	1	2	3	4	5	6
24. Çocuğumla aramda sıcaklık ve sevecenlik vardır	1	2	3	4	5	6
25. Oynarken evin yakınından ayrılmasına hiç izin vermem.	1	2	3	4	5	6
26. Sözlerim ve hareketlerimle çocuğuma onu sevdiğimi gösteririm.	1	2	3	4	5	6
27. Başka çocukları çocuğuma örnek gösteririm.	1	2	3	4	5	6
28. Nedenini söylemeden çocuğuma kızgın ya da ters davrandığım olur.	1	2	3	4	5	6
29. Dersleri konusunda kardeş(ler)i veya akraba çocuklarıyla karşılaştırırım.	1	2	3	4	5	6

BSI

Aşağıda, insanların bazen yaşadıkları belirtilerin ve yakınmaların bir listesi verilmiştir. Listedeki her maddeyi lütfen dikkatle okuyunuz ve daha sonra o belirtinin sizde bugün dahil son bir haftadır ne kadar var olduğunu yandaki seçeneklerde uygun olan yerde işaretleyiniz. Her belirti için sadece bir yeri işaretlemeye ve hiç bir madde atlamamaya özen gösteriniz. Aşağıdakiler sizi ne kadar rahatsız ediyor?	Hiç	Biraz	Orta derecede	Epey	Çok fazla
0 Hiç 1 Biraz 2 Orta derecede 3 Epey 4 Çok fazla	0	1	2	3	4
1. İçinizdeki sinirlilik ve titreme hali	0	1	2	3	4
2. Baygınlık ve baş dönmesi	0	1	2	3	4
3. Bir başka kişinin sizin düşüncelerinizi kontrol ettiği fikri	0	1	2	3	4
4. Başınıza gelen sıkıntılardan dolayı başkalarının suçlu olduğu düşüncesi	0	1	2	3	4
5. Olayları hatırlama da güçlük	0	1	2	3	4
6. Çok kolayca kızıp öfkelenme	0	1	2	3	4
7. Göğüs ve kalp bölgesinde ağrılar	0	1	2	3	4
8. Meydanlık (açık) yerlerden korkma duygusu	0	1	2	3	4
9. Yaşamınıza son verme düşünceleri	0	1	2	3	4
10. İnsanların çoğuna güvenilmeyeceği hissi	0	1	2	3	4
11. İştahta bozukluklar	0	1	2	3	4
12. Hiçbir nedeni olmayan ani korkular	0	1	2	3	4
13. Kontrol edemediğiniz duygu patlamaları	0	1	2	3	4
14. Başka insanlarla beraberken bile yalnızlık hissetme	0	1	2	3	4
15. İşleri bitirme konusunda engellenmişlik hissetme	0	1	2	3	4
16. Yalnızlık hissetme	0	1	2	3	4
17. Hüznü, kederli hissetme	0	1	2	3	4
18. Hiçbir şeye ilgi duymama	0	1	2	3	4
19. Ağlamaklı hissetme	0	1	2	3	4
20. Kolayca incinebilme, kırılma	0	1	2	3	4
21. İnsanların sizi sevmediğine, size kötü davrandığına inanmak	0	1	2	3	4
22. Kendini diğerlerinden daha aşağı görmek	0	1	2	3	4
23. Mide bozukluğu, bulantı	0	1	2	3	4
24. Diğerlerinin sizi gözlediği ya da hakkınızda konuştuğu düşüncesi	0	1	2	3	4
25. Uykuya dalmada güçlük	0	1	2	3	4
26. Yaptığımız eylemleri tekrar tekrar doğru mu diye kontrol etme	0	1	2	3	4

27. Karar vermede güçlükler	0	1	2	3	4
28. Otobüs, tren, metro gibi vasıtalarla seyahatlerden korkma	0	1	2	3	4
29. Nefes darlığı, nefessiz kalma	0	1	2	3	4
30. Sıcak, soğuk basmaları	0	1	2	3	4
31. Sizi korkuttuğu için bazı eşya ya da etkinliklerden uzak kalma	0	1	2	3	4
32. Kafanızın “bomboş” kalması	0	1	2	3	4
33. Bedeninizin bazı bölgelerinde uyuşmalar, karıncalanmalar	0	1	2	3	4
34. Günahlarınız için cezalandırılmanız gerektiği düşünceleri	0	1	2	3	4
35. Gelecekle ilgili umutsuzluk duyguları	0	1	2	3	4
36. Konsantrasyonda (dikkati bir şey üzerinde toplamada) güçlük/zorlanma	0	1	2	3	4
37. Bedenin bazı bölgelerinde zayıflık, güçsüzlük hissi	0	1	2	3	4
38. Kendini gergin ve tedirgin hissetme	0	1	2	3	4
39. Ölüm ve ölüm üzerine düşünceler	0	1	2	3	4
40. Birini dövme, ona zarar verme, yaralama isteği	0	1	2	3	4
41. Bir şeyleri kırma dökme isteği	0	1	2	3	4
42. Diğerlerinin yanındayken sürekli kendini gözleyip, yanlış bir şeyler yapmamaya çalışmak	0	1	2	3	4
43. Kalabalıklarda rahatsızlık duymak	0	1	2	3	4
44. Bir başka insana hiç yakınlık duymamak	0	1	2	3	4
45. Dehşet ve panik nöbetleri	0	1	2	3	4
46. Sık sık tartışmaya girmek	0	1	2	3	4
47. Yalnız bırakıldığında /kalındığında sinirlilik hissetmek	0	1	2	3	4
48. Başarılarınızı için diğerlerinden yeterince takdir alamamak	0	1	2	3	4
49. Yerinde duramayacak kadar huzursuz hissetmek	0	1	2	3	4
50. Kendini değersiz ve görmek/Değersizlik duyguları	0	1	2	3	4
51. Eğer izin verirsiniz insanların sizi sömüreceği duygusu	0	1	2	3	4
52. Suçluluk duyguları	0	1	2	3	4
53. Aklınızda bir bozukluk olduğu düşüncesi	0	1	2	3	4

DERS-Mothers rated adolescents

Aşağıda insanların duygularını kontrol etmekte kullandıkları bazı yöntemler verilmiştir. Lütfen ifadeleri anketi size getiren çocuğunuzu düşünerek okuyun ve size göre bu ifadelerin çocuğunuz için ne kadar doğru olduğunu içtenlikle uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Çocuğum ne hissettiği konusunda nettir.

- Hiçbir zaman net değildir Bazen nettir Yaklaşık Yarı yarıya Çoğu zaman nettir Her zaman nettir

2. Çocuğum hislerini dikkate alır.

- Hiçbir zaman dikkate almaz Bazen dikkate alır Yaklaşık Yarı yarıya Çoğu zaman dikkate alır Her zaman dikkate alır

3. Duyguları çocuğuma dayanılmaz ve kontrolsüz gelir.

- Hiçbir zaman gelmez Bazen gelir Yaklaşık Yarı yarıya Çoğu zaman gelir Her zaman gelir

4. Çocuğumun ne hissettiği konusunda hiç bir fikri yoktur

- Hiçbir zaman fikri yoktur Bazen fikri vardır Yaklaşık Yarı yarıya Çoğu zaman fikri vardır Her zaman fikri vardır

5. Çocuğum duygularına bir anlam vermekte zorlanır.

- Hiçbir zaman zorlanmaz Bazen zorlanır Yaklaşık Yarı yarıya Çoğu zaman zorlanır Her zaman zorlanır

6. Çocuğum ne hissettiğine dikkat eder.

- Hiçbir zaman Dikkat etmez Bazen dikkat eder Yaklaşık Yarı yarıya Çoğu zaman dikkat eder Her zaman dikkat eder

7. Çocuğum ne hissettiğini tam olarak bilir.

- Hiçbir zaman bilmez Bazen bilir Yaklaşık Yarı yarıya Çoğu zaman Her zaman

8. Çocuğum ne hissettiğini önemser.

- Hiçbir zaman önemsemmez Bazen önemser Yaklaşık Yarı yarıya Çoğu zaman önemser Her zaman önemser

9. Çocuğum ne hissettiği konusunda karmaşa yaşar.

- Hiçbir zaman yaşamaz Bazen yaşar Yaklaşık Yarı yarıya Çoğu zaman yaşar Her zaman yaşar

10. Çocuğum kendini kötü hissetmeyi kabullenebilir.

- Hiçbir zaman kabullenemez Bazen kabullenebilir Yaklaşık Yarı yarıya Çoğu zaman kabullenebilir Her zaman kabullenebilir

11. Çocuğum kendini kötü hissettiğinde böyle hissettiği için kendine kızar.

- Hiçbir zaman kendine kızmaz Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman kendine kızar

12. Çocuğum kendini kötü hissettiği için utanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
13. Çocuğum kendini kötü hissettiğinde işlerini bitirmekte zorlanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
14. Çocuğum kendini kötü hissettiğinde kontrolden çıkmaya başlar.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
15. Çocuğum kendini kötü hissettiğinde uzun süre böyle kalacağına inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
16. Çocuğum kendini kötü hissetmesinin yoğun depresif duyguyla sonuçlanacağına inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
17. Çocuğum kendini kötü hissettiğinde bile duygularının yerinde ve önemli olduğuna inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
18. Çocuğum kendini kötü hissederken başka şeylere odaklanmakta zorlanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
19. Çocuğum kendini kötü hissederken kontrolden çıktığı duygusu yaşar.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
20. Çocuğum kendini kötü hissediyor olsa da yine de işlerini yapabilir.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
21. Çocuğum kendini kötü hissettiğinde bu duygusundan dolayı kendinden utanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
22. Çocuğum kendini kötü hissettiğinde eninde sonunda kendini daha iyi hissetmenin bir yolunu bulacağını inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
23. Çocuğum kendini kötü hissettiğinde zayıf biri olduğu duygusuna kapılır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
24. Çocuğum kendini kötü hissettiğinde de davranışları kontrolü altındadır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya

25. Çocuğum kendini kötü hissettiğinde böyle hissettiği için suçluluk duyar.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
26. Çocuğum kendini kötü hissettiğinde konsantre olmakta zorlanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
27. Çocuğum kendini kötü hissettiğinde davranışlarını kontrol etmekte zorlanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
28. Çocuğum kendini kötü hissettiğinde daha iyi hissetmek için yapabileceği hiç bir şey olmadığına inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
29. Çocuğum kendini kötü hissettiğinde böyle hissettiği için kendinden rahatsız olur.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
30. Çocuğum kendini kötü hissettiğinde kendisi ile ilgili olarak çok fazla endişelenmeye başlar.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
31. Çocuğum kendini kötü hissettiğinde kendini bu duyguya bırakmaktan başka çıkar yol olmadığına inanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
32. Çocuğum kendini kötü hissettiğinde davranışları üzerindeki kontrolünü kaybeder.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
kaybetmez Yarı yarıya kaybeder
33. Çocuğum kendini kötü hissettiğinde başka bir şey düşünmekte zorlanır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
34. Çocuğum kendini kötü hissettiğinde duygusunun gerçekte ne olduğunu anlamak için zaman ayırır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
35. Çocuğum kendini kötü hissettiğinde kendini daha iyi hissetmesi uzun zaman alır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
36. Çocuğum kendini kötü hissettiğinde duyguları dayanılmaz olur.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya

Basic Personality Traits

Aşağıda size uyan ya da uymayan pek çok kişilik özelliği bulunmaktadır. Bu özelliklerden her birinin sizin için ne kadar uygun olduğunu ilgili rakamı daire içine alarak belirtiniz.

Örneğin;

Kendimi biri olarak görüyorum.

<u>Hiç uygun değil</u>	<u>Uygun değil</u>	<u>Kararsızım</u>	<u>Uygun</u>	<u>Çok</u>
1	2	3	4	5
	Hiç uygun değil			Hiç uygun değil
	Uygun değil			Uygun değil
	Kararsızım			Kararsızım
	Uygun			Uygun
	Çok uygun			Çok uygun
1 Aceleci	1 2 3 4 5	24 Pasif	1 2 3 4 5	
2 Yapmacık	1 2 3 4 5	25 Disiplinli	1 2 3 4 5	
3 Duyarlı	1 2 3 4 5	26 Açgözlü	1 2 3 4 5	
4 Konuşkan	1 2 3 4 5	27 Sinirli	1 2 3 4 5	
5 Kendine güvenen	1 2 3 4 5	28 Cana yakın	1 2 3 4 5	
6 Soğuk	1 2 3 4 5	29 Kızgın	1 2 3 4 5	
7 Utangaç	1 2 3 4 5	30 Sabit fikirli	1 2 3 4 5	
8 Paylaşımçı	1 2 3 4 5	31 Görgüsüz	1 2 3 4 5	
9 Geniş / rahat	1 2 3 4 5	32 Durgun	1 2 3 4 5	
10 Cesur	1 2 3 4 5	33 Kaygılı	1 2 3 4 5	
11 Agresif(Saldırgan)	1 2 3 4 5	34 Terbiyesiz	1 2 3 4 5	
12 Çalışkan	1 2 3 4 5	35 Sabırsız	1 2 3 4 5	
13 İçten pazarlıklı	1 2 3 4 5	36 Yaratıcı	1 2 3 4 5	
14 Girişken	1 2 3 4 5	37 Kaprisli	1 2 3 4 5	
15 İyi niyetli	1 2 3 4 5	38 İçine kapanık	1 2 3 4 5	
16 İçten	1 2 3 4 5	39 Çekingen	1 2 3 4 5	
17 Kendinden emin	1 2 3 4 5	40 Alıngan	1 2 3 4 5	
18 Huysuz	1 2 3 4 5	41 Hoşgörülü	1 2 3 4 5	
19 Yardımsever	1 2 3 4 5	42 Düzenli	1 2 3 4 5	
20 Kabiliyetli	1 2 3 4 5	43 Titiz	1 2 3 4 5	
21 Üşengeç	1 2 3 4 5	44 Tedbirli	1 2 3 4 5	
22 Sorumsuz	1 2 3 4 5	45 Azimli	1 2 3 4 5	
23 Sevecen	1 2 3 4 5			

DERS

Aşağıda insanların duygularını kontrol etmekte kullandıkları bazı yöntemler verilmiştir. Lütfen her durumu dikkatlice okuyunuz ve her birinin sizin için ne kadar doğru olduğunu içtenlikle yanıtlayınız. Yanıtınızı uygun cevap önündeki yuvarlak üzerine çarpı (X) koyarak işaretleyiniz.

1. Ne hissettiğim konusunda netimdir.

- Hiçbir zaman net değilim Bazen netim Yaklaşık Yarı yarıya Çoğu zaman netim Her zaman netim

2. Ne hissettiğimi dikkate alırım.

- Hiçbir zaman dikkate almam Bazen dikkate alırım Yaklaşık Yarı yarıya Çoğu zaman dikkate alırım Her zaman dikkate alırım

3. Duygularım bana dayanılmaz ve kontrolsüz gelir.

- Hiçbir zaman gelmez Bazen gelir Yaklaşık Yarı yarıya Çoğu zaman gelir Her zaman gelir

4. Ne hissettiğim konusunda hiç bir fikrim yoktur.

- Hiçbir zaman Fikrim yoktur Bazen fikrim vardır Yaklaşık Yarı yarıya Çoğu zaman fikrim vardır Her zaman fikrim vardır

5. Duygularıma bir anlam vermekte zorlanırım.

- Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım

6. Ne hissettiğime dikkat ederim.

- Hiçbir zaman dikkat etmem Bazen dikkat ederim Yaklaşık Yarı yarıya Çoğu zaman dikkat ederim Her zaman dikkat ederim

7. Ne hissettiğimi tam olarak bilirim.

- Hiçbir zaman bilmem Bazen bilirim Yaklaşık Yarı yarıya Çoğu zaman bilirim Her zaman bilirim

8. Ne hissettiğimi önemserim.

- Hiçbir zaman önemsemem Bazen önemserim Yaklaşık Yarı yarıya Çoğu zaman önemserim Her zaman önemserim

9. Ne hissettiğim konusunda karmaşa yaşarım.

- Hiçbir zaman yaşamam Bazen yaşamam Yaklaşık Yarı yarıya Çoğu zaman yaşarım Her zaman yaşarım

10. Kendimi kötü hissetmeyi kabullenebilirim.

- Hiçbir zaman kabullenemem Bazen kabullenebilirim Yaklaşık Yarı yarıya Çoğu zaman kabullenebilirim Her zaman kabullenebilirim

11. Kendimi kötü hissettiğimde böyle hissettiğim için kendime kızarım.

- Hiçbir zaman kızmam Bazen kızarım Yaklaşık Yarı yarıya Çoğu zaman kızarım Her zaman kızarım

12. Kendimi kötü hissettiğim zaman utanırım.
 Hiçbir zaman utanmam Bazen utanırım Yaklaşık Yarı yarıya Çoğu zaman utanırım Her zaman utanırım
13. Kendimi kötü hissettiğimde işlerimi bitirmekte zorlanırım.
 Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım
14. Kendimi kötü hissettiğimde kontrolden çıkmaya başlarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
15. Kendimi kötü hissettiğimde uzun süre böyle kalacağıma inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
16. Kendimi kötü hissetmemin yoğun depresif duyguyla sonuçlanacağına inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
17. Kendimi kötü hissettiğimde duygularımın yerinde ve önemli olduğuna inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
18. Kendimi kötü hissederken başka şeylere odaklanmakta zorlanırım.
 Hiçbir zaman zorlanmam Bazen zorlanırım Yaklaşık Yarı yarıya Çoğu zaman zorlanırım Her zaman zorlanırım
19. Kendimi kötü hissederken kontrolden çıktığım duygusu yaşarım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
20. Kendimi kötü hissediyor olsam da yine de işlerimi yapabilirim.
 Hiçbir zaman yapamam Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman yapabilirim
21. Kendimi kötü hissettiğimde bu duygumdan dolayı kendimden utanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
22. Kendimi kötü hissettiğimde eninde sonunda kendimi daha iyi hissetmenin bir yolunu bulacağıma inanırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
23. Kendimi kötü hissettiğimde zayıf biri olduğum duygusuna kapılırım.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman
24. Kendimi kötü hissettiğimde de davranışlarım kontrolümün altındadır.
 Hiçbir zaman Bazen Yaklaşık Yarı yarıya Çoğu zaman Her zaman

25. Kendimi kötü hissettiğimde, böyle hissettiğim için suçluluk duyarım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
26. Kendimi kötü hissettiğimde konsantre olmakta zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
27. Kendimi kötü hissettiğimde davranışlarımı kontrol etmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
28. Kendimi kötü hissettiğimde daha iyi hissetmem için yapacağım hiç bir şey olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
29. Kendimi kötü hissettiğimde böyle hissettiğim için kendimden rahatsız olurum.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
30. Kendimi kötü hissettiğimde kendim için çok fazla endişelenmeye başlarım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
31. Kendimi kötü hissettiğimde kendimi bu duyguya bırakmaktan başka çıkar yol olmadığına inanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
32. Kendimi kötü hissettiğimde davranışlarım üzerindeki kontrolümü kaybederim.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
33. Kendimi kötü hissettiğimde başka bir şey düşünmekte zorlanırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
34. Kendimi kötü hissettiğimde duygumun gerçekte ne olduğunu anlamak için zaman ayırırım.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
35. Kendimi kötü hissettiğimde bu duygunun geçmesi çok uzun zaman alır.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya
36. Kendimi kötü hissettiğimde duygularım dayanılmaz olur.
 Hiçbir zaman Bazen Yaklaşık Çoğu zaman Her zaman
Yarı yarıya

APPENDIX J: TURKISH SUMMARY

(Türkçe Özet)

Duygu Düzenleme

Duygu düzenleme, günlük deneyimlere daha toleranslı ve esnek bir şekilde çeşitli duygularla reaksiyon verebilme, aynı zamanda gerektiğinde kendiliğinden ortaya çıkan reaksiyonları erteleyebilme becerisi olarak tanımlanmaktadır (Cole, Michel, ve Teti, 1994). Thompson (1991), duyguları düzenleme sürecinin çeşitli özelliklerini belirtmiştir. Bunlardan biri duygusal gelişiminin önemli bir parçası olarak görülen, çocukların büyüdükçe duyguları ile kendi kendine başa çıkma becerisi kazanmasıdır. Bir başka özelliği ise, sosyal işlevsellikte ortaya çıkan bireysel farklılıkların gelişimine farklı bir bakış açısı sağlamasıdır. Bu demek oluyor ki, duygu düzenlemesi bireyin sosyal çevresi ile nasıl iletişim kurduğunu yansıtır. Thompson (1994)'a göre, 'duygu düzenleme, kişinin amacına ulaşması için, duygusal tepkileri, özellikle de onların yoğun ve geçici özelliklerini gözlemek, değerlendirmek ve düzenlemekten sorumlu dışsal ve içsel süreçleri kapsar' (sayfa 27-28). Zeman, Cassano, Parrish ve Stegall (2006)'e göre, bir çocuğun kişisel amaçları yönünde davranışlarını yönetirken duygusal veriyi tanıma, anlama ve birleştirme becerisi duygu düzenleme için gereklidir. Duyguların düzenlenmesi, içsel sistemleri, davranışsal bileşenleri ve dışsal bileşenleri içeren farklı sistem ve bileşenlerin yönetilmesini ve organize edilmesini kapsar. Çocukların bir duyguyu düzenleme becerisi, sosyal çevre ile önceki etkileşimlerine ve bunların gelişimsel değerlerine bağlıdır (Zeman ve ark., 2006). Çevresel gereklilikler karşısında esnek ve uyumlu tepkiler verebilme becerisinin, bu gerekliliklerin nasıl değerlendirildiği ile ilişkili olduğu öne sürülmüştür (Smith, Haynes, Lazarus, & Pope, 1993) Başka bir deyişle, olayların sadece önemi değil, bireylerin o olayla ilgili değerlendirmeleri de duygu düzenleme süreci için kaçınılmaz bir özelliktir. Ayrıca, kişinin, o koşul içerisindeki amaçları da duygu düzenlemesini açıklarken dikkate alınmalıdır (Cole ve ark., 1994).

Ergenlik Döneminde Duygu Düzenleme

Ergenlik dönemi, gençlerin fiziksel ve hormonal değişiklikler, kimlik oluşumu ve romantik ilişkilerin devamlılığını sağlama gibi yeni sorunlarla karşılaştıkları bir süreçtir. Bu nedenle ergenler, derin ve değişken duygu durumları deneyimlerler (Larson & Lampman-Petratis, 1989). Kişilerin duygularını düzenleme becerileri orta çocukluktan ergenliğe doğru artar ve duygu düzenleme kararları bir motivasyon işlevi, duygu çeşidi ve sosyal durum faktörü gibi daha da farklılaşmaya başlar (Zeman & Garber, 1996). Ergenler, daha erken yaştakilere oranla psikolojik olarak daha karmaşık, farklılaşmış ve daha bütünleşmiş inançlar ağı oluştururlar. Buna ek olarak, kişisel duygu teorisi bu sistemin başka unsurları ile şekillenir ve gelişen kendini anlama durumuna önemli katkı sağlar (Thompson, 1991). Ergenlik dönemi, süreçleri ve duygu düzenleme bağlantılarını keşfetmek açısından fırsat yaratan bir dönem olmasına rağmen, ebeveynlerin duyguları sosyalize etmeleri üzerine yapılan çalışmalar öncelikle çocukluk dönemine odaklanmış ve bu nedenle bu kavramın ergenlik dönemindeki hali hakkında çok az bilgi mevcuttur. Sosyal ortamdaki değişikliğin, duygu düzenleme sürecinde akranlara olan güveni arttırdığı, ebeveynlere olan güveni ise azalttığı bilinmektedir. Ayrıca, duygusal ve davranışsal özerkliği oturtmaya başlamak, ergenlerin aileleri ile daha çatışmalı ve duygusal olarak daha mesafeli ilişkiler geliştirmelerine neden olur (Steinberg & Morris, 2001). Bilişsel düzeydeki gelişimlerinden dolayı ergenler, umutsuzluk ve ilk romantik aşk/kayıp gibi belirli duygular deneyimlediklerinden (Steinberg & Silk, 2002), ebeveynlerin bu süreçteki duygusal desteği ve rehberliği halen etkilidir. Fakat ergenlerin artan bağımsızlıkları nedeniyle, ebeveynler, çocukları kendilerine ulaşmak ve onlarla duygusal meseleleri tartışmak konusunda rahat olmadıkları sürece, çocuklarının duygusal dünyaları hakkında daha az bilgi sahibidirler. Kendi duygularını kabul eden ebeveynler, ergenlerin duyguları ile başa çıkmak için kendilerini bir kaynak olarak görüp onlara ulaşmak konusunda rahat hissedecekleri bir ortam oluşturabilirler. Özellikle anneler ergenlik dönemindeki çocukları ile duygusal açıdan daha destekleyici bir ilişki oturtmak konusunda daha iyidirler ve bunu yaparken de, çocuklarını ergenlik süresince olumsuz sonuçlardan korurlar.

Ergenlerin Duygu D zenlemeleri ile İliřkili Etkenler

Arařtırmalar, ebeveynlerin ocuklarının duygularına verdikleri duygusal tepkilerin, onların sonraki farkındalıęını etkileyeceęini ve duygusal uyarılmalarını d zenleyeceęini g stermektedir ( rn., Eisenberg, Cumberland, & Spinrad, 1998; Schultz, Izard, Ackerman, & Youngstrom, 2001). Genel olarak, ocukların duygularını kabul eden, onların duygularını ifade etmelerine aık evreler, duygu geliřimine olumlu katkıda bulunur (Denham, Zoller, & Couchoud, 1994; Dunn & Brown, 1994).

Morris, Silk, Steinberg, Myers, & Robinson (2007) duygu d zenleme geliřimini etkileyen   ailesel ortam  zellięi olduęunu  ne s rd kleri bir model oluřturmuřlardır. Bu modele g re, aile ortamında ortaya ıkan g zlemler, duyguların sosyalleřmesine iliřkin belirli anne baba tutumları ve davranıřları ve ailenin duygusal iklimi, baęlanma iliřkisinin nitelięinde, ebeveynlik tarzında, ailedeki ifade tarzında, evlilik iliřkisinin duygusal nitelięinde de yansıtıldıęı gibi, ocukların duygu d zenleme becerilerini veya duygusal s relerini  nemli  l de etkiler. ocuklar, hangi duyguların kabul edilebilir ve ifade edilebilir olduęunu ve bu duyguları nasıl y neteceklerini ebeveynlerini model alarak  ęrenirler (Denham, Mitchell-Copeland, Strandberg, Auerbach & Blair, 1997). Ayrıca, ailedeki duygusal atmosfer ocuktaki duyguları da řekillendirir. Saarni, Mumme ve Campos (1998)'a g re, aile ortamında duyguları yakalamak, erken ocukluk d neminde ortaya ıkmaya bařlar ve geliřmeye devam eder. Buna paralel olarak, eęer ebeveynler engelleyici durumlarda ocuklara y ksek derecede  fke g sterirlerse, ocukların duygusal tepkileri g zlemlene becerileri azalır. Fakat g zlemsel  ęrenmenin etkilerini duyguların sosyalle edildięi s reten ve ailenin duygusal ikliminden ayırmak da zordur.

Gottman, Katz ve Hooven (1996)'a g re, duygu baęlantılı ebeveyn davranıřları ve duygularla iliřkili birtakım inanlar ocuęun duygu d zenleme becerileri ile baęlantılıdır. Meta-duygu felsefesi tanımı, insanların inanlar sistemine ve hem kendi duyguları hem de ocuklarının duygularına iliřkin hislerine karřılık gelir ve iki kategoriye ayrılır. İlki, duyguların ifade edilmesinin desteklendięi,

ebeveynlerin kendi duygularının farkında olduđu ve çocuklarına kendi duyguları konusunda yardımcı olmak için istekli ve başarılı oldukları, böylelikle çocuklarının duygusal iyilik halleri ve onların kalıcı duygusal tarzları ile bağlantılı oldukları duygu-koçluğu felsefesi; ikincisi ise çocukların duygularının yoksayıldığı, inkâr edildiği ve görmezden gelindiği ihlal edici felsefedir. Yani, bu felsefeye sahip ebeveynler, çocuklarının negatif duygularını çocuk için zararlı ve tehlikeli bulurlar ve bundan mümkün olduğunca çabuk kurtulmaya çalışırlar.

Roberts ve Strayer (1987)'e göre, ebeveynler tarafından çocuklarının olumsuz duygularının bastırılması, çocukların bu deneyimleri hafızalarında saklamalarına ve benzer durumlar ortaya çıktığında bu duygulardan yararlanmalarına neden olur. Ayrıca, ebeveynlerin çocuklarının duygularını kontrol altına almasının, çocukların sosyal etkileşimlerinde uygun duygusal davranışı öğrenme ve içselleştirme fırsatlarını elinden aldığı da savunulmuştur. Aksine, olumsuz duyguların ifadesinin ebeveynler tarafından desteklenmesi ve çocukların duygusal sıkıntılarının çözümünde onlara yardımcı olunması, çocuğun bu tür zorluklarla daha başarılı bir şekilde başetmesi için stratejiler geliştirmesine yardımcı olmaktadır (McDowell & Parke, 2000).

Ebeveynlerin, çocuklarının olumsuz ve olumlu duyguları karşısında gösterdikleri belirli tepkiler, çocuğun duygu düzenleme becerilerini etkiler. Örneğin, ebeveynlerin cezalandırıcı veya olumsuz tepkileri çocuğun duygusal uyarılmasını arttırabilir ve ona, olumsuz duyguyu anlamak ve uygun bir şekilde ifade etmek yerine o duygudan kaçınmayı öğretir (Eisenberg ve ark., 1998). Başka bir deyişle, çocuklar, duygularını bastıran veya duygularına olumsuz, ilgisiz tepkiler veren ebeveynlere sahiplerse, kaçınma stratejilerini kullanmayı öğrenirler (Eisenberg, Fabes, Carlo, & Karbon, 1992). Bunun tersine, ebeveynlerden çocuklarının duygularına karşılık gelen olumlu tepkiler veya çözümcül yaklaşımlar ise yapıcı başa çıkma becerilerinin oluşumu ile ilişkilidir. Bağlanma sınıflandırmaları ve okul öncesi çocukların duygusal ifadeleri üzerinde anne kontrolü arasındaki ilişkiyi inceleyen çalışma, anne kontrolüne daha çok maruz kalan çocukların duygularını ifade etmede ve öfkeyi göstermekte, normal düzeyde control altında tutulan çocuklara oranla, daha

yetersiz kaldıklarını ortaya koymuştur (Berlin & Cassidy, 2003). Çocukların duygularını ifade etmesinde ebeveynlerin tepkilerine ek olarak, ebeveynler çocuklarına duygu düzenleme stratejilerini öğretmeye de çalışabilirler. Morris, Silk, Steinberg, Aucion ve Keyes (2007), çocukların hayal kırıklığına neden olacak bir hediye ile ödüllendirildikleri bir durumda ebeveynlerin bilişsel olarak yeniden çerçeveleme sürecindeki yardımlarının etkilerini analiz etmişlerdir. Sonuç olarak, durumun artık hayal kırıklığı yaratacak bir durum olarak yorumlanmadığı ve ebeveynlerin ilgiyi ödülden uzaklaştırma girişimlerinin daha az üzüntü ve öfke ile ilişkili olduğu bulunmuştur.

İlişkinin kalitesi ve aile üyelerine karşı gösterilen olumlu veya olumsuz duygunun miktarında yansıtılan duygusal iklim, çocukların duygu düzenleme becerilerinde kaçınılmaz etkilere sahiptir (Darling & Steinberg, 1993). Benzer şekilde, Halberstadt ve Eaton (2003), aile hayatının duygusal ikliminin, duygu düzenleme becerisinin erken yaşlarda oluşumunu etkilediğini ve böylelikle duygusal olarak olumlu ev ortamının çocuklarda, hostilite ve öfke içerene oranla, daha yapıcı duygusal düzenleme becerilerini ortaya çıkardığını öne sürmüşlerdir. Cummings ve Davies (1996), olumsuz veya zorlayıcı aile ortamında büyüyen çocukların, kendini daha kabul görür ve ilgilenilmiş hissedene ve duygularını ifade etmekte daha özgür hissedene, daha olumlu, tahmin edilebilir ve tutarlı aile ortamlarındaki çocuklara kıyasla duygusal olarak daha tepkisel olduklarını söylemişlerdir. Bir başka deyişle, aile ortamının duygusal iklimi, tahmin edilebilir ve istikrarlı olduğu, ebeveynlerin beklentileri açık ve makul olduğu, ailede olumlu duygular ifade edildiği sürece çocuğun duygu düzenleme becerilerinin gelişimine katkıda bulunur. Eisenberg ve arkadaşları (1998), ebeveynler kabul edici ve destekleyici şekilde tepki verdiklerinde, çocukların daha yapıcı duygusal düzenleme becerileri geliştirdiklerini ortaya koymuşlardır.

Ergenlerin Duygu D zenlemeleri Konusundaki Beyanlarda Ergenler ve Anneleri Arasındaki Farklılıklar

Çocuğun davranışsal ve duygusal problemlerini belirlemede çocuk ve onun ebeveynleri ve uygun diğerkişilerden bilgi toplama yaygın bir uygulamadır (Kendall & Flannery-Schroeder, 1998). Bu çok verili yaklaşım, çocuk hakkında farklı bakış açılarında ve değışik durumlarda tek bir bilgi kaynağından edinilemeyen bilgilere ulaşılmasını sağlar (Hughes & Gullone, 2010). Fakat çok verili bu yaklaşım bilgi kaynakları arasındaki farklılıklarla sonuçlanabilir. Bu nedenle bu farklılıkların anlamı ve bunların nasıl birleştirileceğinin araştırılması gerekir (Hughes & Gullone, 2010). Bunu yaparken, bilgi kaynakları arasındaki farklılığın mutlaka bir bozukluğa işaret etmediğini, karışık bir gerçeklikle ilgili öznel ve kısmi gerçeklikleri de yansıtabileceğini akılda tutmak önemlidir (Berg-Nielsen, Vika & Dahl, 2003). Achenbach, McConaughy ve Howell (1987), çocuk ve ergenlerin davranışsal ve duygusal problemlerinin karşılıklı korelasyonunu içeren detaylı bir meta-analizini yapmışlar ve ebeveynler arasındaki anlaşmanın genellikle yüksek olmasına rağmen ($r = .59$), ebeveynler ve çocuklar arasındaki fikir birliğinin düşük olduğu ($r = .25$) sonucuna varmışlardır. Ayrıca, Eiser ve Morse (2001) çeşitli ölçüm boyutlarında çocuk ve ebeveyn arasındaki aynı fikirdeliği tanımlayan çalışmaları taramışlar ve fiziksel vazifeleri tamamlama gibi gözlemlenebilir konularda daha fazla fikir birliği; duygusal ve sosyal işlevsellikle ilgili gözlemlenemeyen durumlarda da daha az fikir birliği bulmuşlardır.

Ebeveyn ve çocuk beyanları arasındaki farklılıklar, çocukların bilişsel ve ifadesel dil becerilerindeki kısıtlılıklar, ebeveynlerin çocukların semptomları ile ilgili farkındalığı ve ebeveynlerin kendi psikolojik durumları gibi çeşitli etkenlerle açıklanabilir (Berg-Nielsen ve ark., 2003; Grills & Ollendick, 2002). Çocukların gelişimsel statüleri, bu tür ölçümlere geçerli ve güvenilir şekilde yanıt verme becerilerinde kritik bir role sahiptir. Kendinin farkında olma ve kendi duygularını görüntüleyebilme becerisi karmaşık bilişsel becerilerin gelişimine bağlıdır (Zeman, Klimes-Dougan, Cassano & Adrian, 2007). Önceleri yapılmış araştırmalar, altı yaşından küçük çocukların kendilerini görüntüleme becerilerinin olmadığını (Ollendick & Hersen, 1993), bu nedenle ebeveynlerin, küçük çocukların davranışları

ile ilgili çocuklarınınkinden daha geçerli ve objektif veriler sağladıklarını ortaya koymuştur (Morris ve ark., 2007). Ayrıca, çocukların, kendiliğinden veya aynı anda deneyimlenen çoklu duyguları tanıma becerileri orta çocukluk dönemine kadar tam anlamıyla gelişmez (Harter & Whitesell, 1989). Fakat orta çocukluk dönemindeki çocuklar ve ergenlerin, artan duygusal ve kodlama becerileri, genişleyen duygusal kelime hazinesi ve gelişen duygusal farkındalık becerileri göz önüne alındığında, kendi duygusal deneyimleri ile ilgili etkili ve güvenilir bilgiler vermeleri beklenir (Zeman ve ark., 2007). Ayrıca, başkalarının içsel duygusal durumlarını gözlemlemek mümkün olmadığından (Eiser & Morse, 2001) çocuklara duyguları ile nasıl başa çıktıkları konusundaki düşünce ve hislerini direk sormak, çocukların duygusal durumları ile ilgili daha doğru bilgiler verebilir (Bowie, 2010).

Önceki çalışmalar ergenlerin ebeveynlerinden daha fazla davranışsal ve duygusal sıkıntı beyan ettiklerini (Sourander, Helstela & Helenius, 1999; Verhulst & Van der Ende, 1992) ve bu farklılığın kızlar için erkeklerden daha fazla olduğunu ortaya koymuştur. Bir başka ifade ile, ebeveynlerden saklanabilen problemlerin ebeveynler tarafından tanınmadığı ve kızlar için erkeklere göre bu durumun daha fazla ortaya çıktığı sonucuna varılmıştır (Sourander ve ark., 1999). Çocuklar büyüdükçe, ebeveynler çocuklarının nasıl hissettiği ve davrandığı konusunda daha az farkındalık sahibi olabilirler. Ayrıca, zihinsel durum ve stres seviyesi gibi durumsal faktörler de ebeveynin çocuğunun problemleri konusundaki algısını etkileyebilir (Berg-Nielsen ve ark., 2003).

Ergenlik döneminde farklı kaynaklardan bilgi almak ve bilgi kaynakları arasındaki farklılığın sebeplerini araştırmak önemlidir (Hughes & Gullone, 2010). Ergenler ebeveynlerine kıyasla daha fazla problem beyan ederler (Sourander ve ark., 1999; Verhulst & Van der Ende, 1992). Bu noktada, psikiyatrik değerlendirmeye ihtiyacı olan pek çok ergen gerekli desteği görmez çünkü problemleri yetişkinler tarafından fark edilmez (Sourander ve ark., 1999).

Duygu Düzenlemede Yaşanan Sorunlar ve Psikolojik Problemler

Duygu düzenleme acıları durdurmak anlamına gelmez. Duygu düzenleme kişinin işleyişini organize eden ve yaşam koşullarına uyumunu artıran çeşitli

düzenlemeler içerir. Ayrıca, yalnızca durumların yoğunluk veya sıklığını azaltma anlamına da gelmez. Bir aktiviteyi gerçekleştirmek, diğerleri ile iletişim kurmak ve diğerlerini etkilemek için duyguları oluşturma ve sürdürme kapasitesine ihtiyaç duyulur. Böylece, iyi uyum sağlamış bireylerin duygularını düzenleme becerilerine sahip olmaları, ihtiyaç olduğunda duyguların yoğunluğunu hafifletmeleri, süresini kısaltmaları ve gerektiğinde duygusal durumların gücünü artırmaları beklenir. Başka bir deyişle, duygu düzenleme için sadece güçlü duyguların hafifletilmesi değil, kendiliğindenlik ve doğrudanlık da gereklidir. Tersine, bağlamsal durumlara göre duygusal deneyim ve ifadeyi düzenlemedeki zorluk ve duygusal uyarılmanın, düşüncelerin, davranışların ve etkileşimlerin düzen ve kalitesi üzerindeki etkilerini kontrol etmedeki güçlük duygu düzenlemede zorluk yaşandığı anlamına gelir (Cole ve ark., 1994).

Cicchetti, Ganiban ve Barnett (1991), duygular ve onlarla bağlantılı davranışların düzenlenmesi becerisini edinmenin gelişimin temel taşı olduğunu öne sürmüşlerdir. Fakat bazı koşullar duygu düzenleme örüntülerinin tehlikeye girmesine veya işleyişinin bozulmasına neden olabilir ve bu tarz örüntüler psikopatoloji semptomlarını oluşturabilir veya destekleyebilir. Ruh sağlığı sorunlarının kavramsallaştırılması ve ayrıştırılmasındaki duygusal zorlukların prevalansı, DSM-III-R sınıflama sisteminde verilmiştir. Yani, duygulanımın uygunsuzluğu, kronik kaygı veya gerginlik, duygulardaki küntleşme veya duygulardan kaçınma, duygulanımın sınırlandırılması, duygusuzluk ve hiddet arasında beklenmedik dalgalanmalar, sevinç veya moral bozukluğu, bir duygunun baskınlığı ve diğer bir duygunun yokluğu ve sürekli olumsuz duyguların bulunması klinik bozukluklarla ilgili en temel duygusal özelliklerdir (Cole ve ark., 1994). Özellikle, madde bağımlılığı (Hayes, Wilson, Gifford, Follette & Strosahl, 1996), yaygın anksiyete bozukluğu (Mennin, Heimberg, Turk & Fresco, 2002), travma sonrası stres bozukluğu (Cloitre, 1998) ve borderline kişilik bozukluğu (Linehan, 1993)'nu kapsayan klinik bozukluklarda duygu düzenlemedeki eksikliklerin rolü olduğu hem bilimsel hem de teorik literatürle desteklenmiştir.

Psikopatoloji ve terapotik deęişimin klinik modelleri hem içsel olarak hem de dışsal olarak, duygunun problemlili kısımlarına odaklanır. Uyum ve tedavi başarısının çoęunlukla farkındalıęa ve duygusal durumları kontrol edebilmeye baęlı olduęu varsayılır (Safran & Greenberg, 1991). Yani, birçok terapi duygusal örüntüleri ve onların tarihsel kökenlerini anlamayı, duyguları tanımayı, öğrenmeyi, bunları uygun şekilde ifade etmeyi ve problemlili duygusal örüntüleri yaşantılayarak onları deęiştirmeyi amaçlar. Örneęin, geleneksel psikanalitik görüş duygular düzenlemedeki bireysel farklılıkların kişilięi ve psikopatolojiyi şekillendirdięini öne sürer. Kaygı, umutsuzluk ve hayal kırıklıęı gibi erken çocukluk dönemi duyguları kişi tarafından düzenlenir. Eęer düzenlemeye yönelik girişimler esnek deęilse veya zamanla deęişmiyorsa kişilięi kısıtlar ve semptomlar üretir (Cole ve ark., 1994). Ayrıca, bilişsel-davranışçı yaklaşım, davranış ve düşüncelerin duyguları düzenlemedeki rolü üzerinde durur. Öğrenilmiş davranışlar, tutumlar, inanç sistemleri ve yorumlama biçimleri adaptif olmayan duygusal semptomların gelişmesi ve kalıcı hale gelmesine neden olur. Tedavi, olumsuz duygusal durumların azaltılması üzerinde durur (Greenberg & Safran, 1987).

Duygu düzenlemenin klinik kavramsallaştırması çok önemli olmasına rağmen, duygular düzenlemede yaşanan sıkıntılar ile ilgili tanımlamalar daha nadir ve çeşitlidir. Dodge ve Garber (1991)'a göre duygular düzenlemede yaşanan sıkıntılar, bilginin işlemlenmesi ve olaylar arasındaki çatışma anlamına gelir. Daha geniş olarak, birey için bazı durumlarda uyumsuz olan duygular, bilişsel veya davranışsal sonuçlar üreten duygular düzensizlięi, duygular gelişimin gelişimsel ödevlerini karşılamadaki başarısızlık olarak tanımlanmıştır (Dodge & Garber, 1991). Düzensizlięin birçok yönü olduęu öne sürülmüştür. Cole ve arkadaşları (1994), bu yönleri aşırı ve yetersiz düzenleme olarak iki form ile sınırlandırmaya çalışmışlardır. Hem aşırı hem de yetersiz duygular düzensizlięi problemlere yol açabilir (Malatesta & Wilson, 1988). Örneęin, suçluluk duygularını düzenlemede yetersiz kalma depresyona yol açabilirken, suçluluk duygularının aşırı düzenlenmesi de ileride paranoya veya sosyopati deneyimlerine sebep olabilir (Walden & Smith, 1997). Buna ek olarak, duyguların tamamına erişmenin duygular düzenlemenin bir özellięi olduęu öne sürülür çünkü duygular niteliksel olarak adaptiftir, bireyleri sosyal ve

bireysel yaşamı destekleyen davranışlara hızlıca girişmeleri için hazırlar. Böylece, eğlence, öfke, üzüntü ve suçluluk, gurur gibi sosyal duygular, optimal düzeyde işlev görmek için gereklidir (Barret & Campos, 1987). Fakat, belirli bir durum için tipik ve uygun görülen bir duygunun erişilmez olması, bazı temel ve adaptif işlevlerin bloke olduğu sinyali verir. Uygun bir durumdaki tipik duyguya erişmedeki başarısızlık duygu düzenlemede yaşanan güçlük olarak değerlendirilir (Cole ve ark., 1994). Ayrıca, belirli duygulara erişmedeki başarısızlık, düzensizliği tanımlamada kritik olabilir.

Çocuklar duygusal uyarılma ile başa çıkmayı destekleyici bir ebeveyn-çocuk ilişkisi içerisinde öğrenebilirler (Hardy, Power & Jaedicke, 1993). Fakat, kötü muamele gören çocuklar, duygusal olarak uyarım gücü yüksek durumlarla başa çıkmayı öğrenmelerine yardım edecek desteği almazlar (Cole ve ark., 1994). Yani, ebeveyn-çocuk ilişkisinde tipik olmayan deneyimlere maruz kalmak, çocuğun duygusal ifade ile başa çıkma amaçlarını, beklentilerini ve duygusal uyarılmayı yönetme stratejilerini değiştirerek çocuğun duygusal gelişimine olumsuz etkide bulunabilir (Shipman ve Zeman, 1999). Ebeveynlerin, ergenlerin yaşantılarında etkili olmaya devam ettiklerini ve ebeveynlerin duygusal sosyalleşme uygulamalarının ergenlerin psikolojik uyumları üzerinde zararlı etkileri olduğunu söylemek mümkündür. Ebeveynler, ergenlerin özerklik ve süpervizyon ihtiyaçlarını dengelemelidirler. Ayrıca, ebeveynlerle özerk ilişkiler kurmadaki zorluklar depresif semptomlara yol açarken, ebeveynlerle bağları korumadaki zorluklar bilinçaltındaki çatışmaların dışa vurumu ile bağlantılıdır (Allen, Hauser, Eickholt, Bell, & O'Connor, 1994). Bu nedenle, duygularını düzenlemede destek için ebeveynlerine aşırı bağımlı kalan ergenler içselleştirilmiş problemler yaşama riskini taşıyabilirler. Buna karşı, ebeveynlerinden duygusal destek almayı reddeden ergenler dışsal problemler yaşama riski taşıyabilirler. Duygu düzenleme, problem davranışlarda anahtar bir bileşendir, örneğin davranış problemlerinin süpervizyon eksikliğinden kaynaklı artışı duygu düzensizliği ile ilişkilidir (Frick & Morris, 2004). Buna ek olarak, ergenlik bilişsel olarak ergenlerin ebeveynlerinin duygu sosyalizasyon davranışlarını derinde tanımlamaya yetecek kadar karmaşık oldukları bir süreçtir. Stocker, Richmond ve Rhoades (2007), ergenlik döneminde ebeveynlerin duygu

sosyalizasyonlarını tanımlamak amacıyla bir araştırma yapmışlar ve bunun ergenlerin içsel ve dışsal semptomları ile ilişkisini incelemişlerdir. Ebeveynin duygusal ifadesi olarak tanımlanan duygu sosyalizasyonları ve duygusal koçluğun ergen örneklemindeki içsel ve dışsal semptomlarla farklı açılardan bağlantılı olduğu bulunmuştur.

Depresyon gibi içsel rahatsızlıklar, üzüntü gibi olumsuz duyguları düzenleme becerisindeki eksiklikleri veya olumlu duyguları kalıcı hale getirmedeki başarısızlıkları içerir (Cole ve ark., 1994). Yani, depresif çocuklar ve ergenler diğer çocuk ve ergenler tarafından olumsuz duygulanımı düzenlemek amacıyla kullanılan, problem çözme ve bilişsel yeniden yapılandırma gibi becerilerden yoksun olabilirler (Dodge & Garber, 1991). Diğer yandan, dışsal rahatsızlıklar davranışsal düzensizlikle kendini gösterir, özellikle öfkenin bu tür rahatsızlıkların bir özelliği olduğu öne sürülür (Bradley, 2000). Silk, Steinberg ve Morris, ergen örnekleminde, duygu düzenleme ve uyum arasındaki ilişkiyi incelemişler ve duygularını düzenlemede sorun yaşayan ergenlerin hem içsel hem dışsal problemlere daha yatkın olduklarını bulmuşlardır. Başka bir deyişle, duygusal yoğunluk ve sorumluluk ne kadar çoksa, depresfi semptomlar ve davranış problemleri de o kadar fazladır.

Çalışmanın Amacı

Ebeveynlerin, çocuklarının duygu düzenleme becerilerini, kendi duygu düzenleme becerileri ile benzer bir şekilde değerlendirdikleri düşünülmektedir. Bu nedenle bu çalışmanın amacı öncelikle ergenlerin duygu düzenlemeleri konusunda ergen ve anne beyanları arasındaki farkı araştırmaktır. İkinci olarak ergenlerin duygu düzenlemeleri ile ilişkili faktörler araştırılmıştır. Bu faktörler annenin duygu düzenleme becerileri, psikolojik sorunları, kişilik özellikleri, çocuk yetiştirme davranışları ve ergenlerin kişilik özellikleri olarak belirlenmiştir.

Çalışmanın Önemi

Duygu düzenleme becerileri üzerine yapılan çalışmaların kısıtlılığı, yapılan çalışmaların ise erken ve orta çocukluk dönemini kapsadığı ve ergenlik döneminin göz ardı edildiği görülmektedir. Oysaki ergenlik dönemi, fiziksel ve hormonal

değişiklikler, kimlik arayışları, duygusal yakınlaşma ihtiyacı gibi birçok farklı alanda çatışmanın yaşandığı hassas bir dönemdir. Dolayısıyla duygu düzenleme becerilerinin, ergenlerde ne şekilde olduğunun incelenmesi ve bu dönemde yaşanacak olası sıkıntılar ile ilişkisinin ortaya konması önem arz etmektedir. Bunun yanında, daha önce de bahsedildiği gibi duygusal uyarılmaların düzenlenmesi, erken dönemlerde genel olarak ebeveynler tarafından sağlanır. Ebeveynler, duyguların yaşanması ve ifade edilmesi konusunda kendi kişisel inanç ve kültürel değerlerini çocuklarına aktararak, onların duygusal deneyimlerinin şekillenmesinde rol-model olurlar. Bu nedenle, çocuğun kendi başına duygularını düzenleme konusunda başarılı olabilmesi için ebeveynlerinin ona gerekli koşulları sağlamış olmaları beklenmektedir. Literatüre bakıldığında, ergenlerin duygu düzenleme becerilerinin gelişiminde ebeveynlerin etkisini inceleyen çalışmaların kısıtlı olduğu görülmektedir. Bu bağlamda, bu tez kapsamında ergenlerin duygu düzenlemeleri ile ilişkili faktörlerin incelenmesi amaçlanmaktadır.

YÖNTEM

Örneklem

Araştırmanın verileri, Ankara İl Milli Eğitim Müdürlüğü'nden alınan izin doğrultusunda, toplam 8 okulda üçer adet 9. sınıf ziyaret edilerek toplanmıştır. Araştırmaya lise 1. sınıfa devam eden toplam 595 ergen (yaşort = 15.19, S = 0.49) ve 365 anne (yaşort = 41.86, S = 5.02) katılmıştır. Ergenlerin 300'ü kız (% 50.4) ve 295'i erkek (% 49.6) öğrenciden oluşmaktadır. Veri toplamak için iletişim kurulan dört Anadolu Lisesi'nden toplam 249 (% 41.8) ve dört düz liseden toplam 346 (% 58.2) ergene ulaşılmıştır.

İşlem

Araştırmaya başlamadan önce örneklem için belirlenen okulların listesi ve araştırma ile ilgili bütün bilgiler (proje önerisi ve ölçekler) Milli Eğitim Bakanlığı'na gönderilerek gerekli yasal izinler ve Orta Doğu Teknik Üniversitesi İnsan Araştırmaları Etik Kurulu'ndan Etik kurul onayı alınmıştır. Okul yöneticileri ve öğretmenlerle toplantılar düzenlenerek araştırma amacı anlatılmış ve veri toplaması

için planlamalar yapılmıştır. Veri toplama süreci, ilgili okullarda çalışan psikolojik rehberlik ve danışma uzmanı öğretmenlerle yakın işbirliği içerisinde yürütülmüştür. Veriler öğrencilerin devam ettiği sınıflarda proje asistanı ve bir anketör tarafından sınıf öğretmeni nezaretinde toplanmıştır. Anket uygulaması bir ders saati içerisinde tamamlanmıştır. Daha önce belirlenen gün ve ders saatlerinde annesi tarafından çalışmaya katılmasına izin verilen öğrencilerden veri toplanmıştır. Ergenlerden veri toplandıktan sonra, annelerinin dolduracağı anketler kapalı zarflarda ergenlere verilerek geri getirmeleri gereken tarihler belirtilmiştir. Anneleri tarafından doldurularak kapalı zarf içinde ergenler vasıtasıyla geri gönderilen anketler sınıf öğretmenleri tarafından biriktirilmiş ve proje asistanı tarafından okullara gidilerek teslim alınmıştır.

Ölçme Araçları

Ergenler ve anneleri için iki farklı anket bataryası oluşturulmuştur. Ergenler için oluşturulan anket bataryasında Demografik Bilgi Formu, Duygu Düzenlemede Güçlükler Ölçeği, annelerini değerlendirmek üzere Ebeveyn Yetiştirme Davranışları Ölçeği, Güçler ve Güçlükler Ölçeği, Çocuklar için Depresyon Ölçeği, Temel Kişilik Özellikleri Ölçeği ve Pozitif ve Negatif Duygu Ölçeği yer almaktadır. Anneler için oluşturulan anket bataryasında ise Demografik Bilgi Formu, kendileri ve çocukları için dolduracakları Duygu Düzenlemede Güçlükler Ölçeği, kendilerini değerlendirmek üzere Ebeveyn Yetiştirme Davranışları Ölçeği, Temel Kişilik Özellikleri Ölçeği ve Kısa Semptom Envanteri yer almaktadır.

BULGULAR

Proje Değişkenleri Arasındaki Korelasyonlar

Bu bölümde, araştırmada kullanılan değişkenler arasındaki korelasyonlar incelenmiştir. İlk olarak, ergen beyanına dayanan değişkenler arasındaki, ikinci olarak anne beyanına dayanan değişkenler arasındaki, son olarak da, ergen beyanına dayanan değişkenler ile anne beyanına dayanan değişkenler arasındaki korelasyonlar incelenmiştir.

Ergenden Alınan Temel Değişkenler Arasındaki Korelasyonlar

Ergen beyanı dikkate alındığında, ergenlerin duygu düzenleme konusunda yaşadıkları zorluğun, gelişime açıklık ($r = -.25, p < .001$), geçimlilik ($r = -.15, p < .001$), sorumluluk ($r = -.28, p < .001$) ve dışa dönüklük ($r = -.36, p < .001$) kişilik özellikleri ile olumsuz yönde ilişkili olduğu, bu karşı olumsuz değer ($r = .26, p < .001$) ve duygusal tutarsızlık ($r = .53, p < .001$) kişilik özellikleri ile olumlu yönde ilişki olduğu görülmüştür. Buna ek olarak ergenlerin duygu düzenleme konusunda yaşadıkları zorluğun, ergenin annesinden algıladığı red ($r = .37, p < .001$) ve aşırı koruma ($r = .22, p < .001$) ile olumlu yönde ilişkili olduğu, ilgi ve sıcaklık ($r = -.24, p < .001$) ile olumsuz yönde ilişkili olduğu bulunmuştur. Son olarak ergenlerin duygu düzenleme konusunda yaşadıkları zorluğun yaşadıkları psikolojik sıkıntılarla ilişkisine bakıldığında, depresyon ($r = .61, p < .001$) ve negatif duygu durumu ($r = .54, p < .001$) ile olumlu yönde ilişkili olduğu, pozitif duygu durumu ile ($r = -.21, p < .001$) de olumsuz yönde ilişkili olduğu bulunmuştur.

Anneden Alınan Temel Ölçümler Arasındaki Korelasyonlar

Anne beyanı dikkate alındığında, annelerin duygu düzenleme konusunda yaşadıkları zorluğun, çocuklarının duygu düzenleme konusunda yaşadıkları zorluğu değerlendirmeleri ($r = .63, p < .001$) ile olumlu yönde ilişkili olduğu görülmüştür. İkinci olarak annelerin duygu düzenleme konusunda yaşadıkları zorluğun, gelişime açıklık ($r = -.28, p < .001$), geçimlilik ($r = -.23, p < .001$), sorumluluk ($r = -.27, p < .001$) ve dışa dönüklük ($r = -.36, p < .001$) kişilik özellikleri ile olumsuz yönde ilişkili olduğu, bu karşı olumsuz değer ($r = .27, p < .001$) ve duygusal tutarsızlık ($r = .43, p < .001$) kişilik özellikleri ile olumlu yönde ilişki olduğu görülmüştür. Buna ek olarak annelerin duygu düzenleme konusunda yaşadıkları zorluğun, çocuklarına gösterdikleri red ($r = .43, p < .001$) ve aşırı koruma ($r = .29, p < .001$) ile olumlu yönde ilişkili olduğu, ilgi ve sıcaklık ($r = -.36, p < .001$) ile olumsuz yönde ilişkili olduğu bulunmuştur. Son olarak annelerin duygu düzenleme konusunda yaşadıkları zorluğun yaşadıkları psikolojik sıkıntılarla ($r = .50, p < .001$) ilişkisine bakıldığında, olumlu yönde ilişkili olduğu bulunmuştur.

Genel olarak deęerlendirildięinde, beklendięi gibi duygu dzenlemede yařanan zorluklar olumsuz deęiřkenlerle olumlu ynde iliřkili bulunurken, olumlu deęiřkenlerle olumsuz ynde iliřkili bulunmuřtur. Özellikle annenin ocuęunun duygu dzenlemede yařadığı zorlukları algıırken kendi duygu dzenlemede yařadığı zorluęun önemli derecede etkili olduęu bulunmuřtur ($r = .63, p < .001$).

Ergenler ve Annelerinden Alınan Temel Deęiskenler Arasındaki Korelasyonlar

Ergen beyanı ile anne beyanına dayanan deęiřkenler deęiřen dzeylelerde iliřkili bulunmuřtur. Buna gre ergen ve anne beyanı arasındaki korelasyon annenin gsterdięi ilgi ve sıcaklık iin .40, red davranıřı iin .37 ve ařırı koruma iin .48 olarak bulunmuřtur. Özellikle annenin sergiledięi ařırı koruma davranıřı aısından anne ve ergenin grece daha mutabık olduęu dřnlebilir.

Bunun yanında, ergenin kiřilik zelliklerinin annesinin kiřilik zelliklerinden ne kadar etkilendięini anlamak iin anne ve ergen kiřilik zellikleri arasındaki korelasyona bakılmıřtır. Buna gre annenin dıřa dnklę ile ergenin dıřa dnklę arasındaki korelasyon .19, annenin sorumluluęu ile ergenin sorumluluęu arasındaki korelasyon .21, annenin geimlięi ile ergenin geimlilięi arasındaki korelasyon .24, annenin duygusal tutarsızlıęı ile ergenin duygusal tutarsızlıęı arasındaki korelasyon .30 ve annenin olumsuz deęer algısı ile ergenin olumsuz deęer algısı arasındaki korelasyon .18 olarak bulunmuřtur.

Son olarak ergenin duygu dzenlemede yařadığı zorluk aısından ergenin kendini deęerlendirmesi ile annenin ocuęunun duygu dzenlemesini algısı arasındaki korelasyona bakıldıęında .37 olarak bulunmuřtur.

Yordayıcı Analizler

Bu blmde ergenin duygu dzenleme konusunda yařadığı zorlukları yordayan faktrlerin arařtırılması amalanmıřtır. Bu nedenle, ergenlerin duygu dzenlemede yařadığı zorlukları yordayan faktrler, ergen beyanı ve anne beyanı iin iki farklı ařamalı regresyon analizi kullanarak sınanmıřtır. Regresyonların ilk basamaklarında cinsiyet, okul tr, anne eęitim, baba eęitim ve ailenin geliri kontrol deęiřkenleri olarak kullanılmıřtır. İkinci basamakta ise anlamlı bulunan demografik

bilgiler kontrol edildikten sonra annenin duygu düzenleme konusunda yaşadığı zorluğu, kişilik özelliklerini ve psikolojik sorunlarını kapsayan anne özellikleri analize sokulmuştur. Anlamli bulunan anne özellikleri de kontrol edildikten sonra algılanan ve sergilenen ebeveyn stilleri (red, aşırı koruma, ilgi-sıcaklık) analize sokulmuştur. Son basamakta ise, anlamli ebeveynlik stilleri kontrol edildikten sonra ergenlerin kişilik özellikleri analize sokulmuştur. Tüm bu karşılaştırmalarda hiyerarşik yöntem (stepwise) kullanıldığı için, sadece sözü edilen basamaklardaki anlamli değişkenler denkleme girmiştir.

Ergen Beyanına göre Ergenin Duygu Düzenleme Konusunda Yaşadığı Zorlukları Yordayan Faktörler

Ergen beyanına göre ergenin duygu düzenleme konusunda yaşadığı zorlukları yordayan faktörler aşamalı regresyon ile sınanmıştır. Buna göre, demografik faktörlerden sadece okul türünün, ergen beyanına göre, ergenin duygu düzenlemede yaşadığı zorluğu yordadığı bulunmuştur. Buna göre, düz liseye giden ergenlerin ($\beta = -.17$, $t [266] = -2.80$, $p < .01$) Anadolu Lisesi'ne giden ergenlere kıyasla duygu düzenleme konusunda daha fazla zorluk yaşadıkları bulunmuştur. Okul türü toplam varyansın % 3'ünü açıklamıştır. ($F [1, 266] = 7.85$, $p < .01$). Bu faktör kontrol edildikten sonra anne özelliklerinden, annenin kendi duygu düzenlemesi konusunda yaşadığı zorluğun ($\beta = .21$, $t [265] = 3.57$, $p < .001$) ve yine annenin olumsuz değer algısının ($\beta = .13$, $t [264] = 2.12$, $p < .05$), ergenin duygu düzenlemede yaşadığı zorluğu yordadığı bulunmuştur. Annenin kendi duygu düzenlemede yaşadığı zorluk açıklanan varyansı % 7'ye çıkarmıştır (Fdeğişim $[1, 265] = 12.77$, $p < .001$) ve annenin olumsuz değer algısının da analize girmesiyle açıklanan varyans % 9'a (Fdeğişim $[1, 264] = 4.49$, $p < .05$) çıkmıştır. Anne özellikleri kontrol edildikten sonra ebeveyn stillerinden, algılanan red ($\beta = .35$, $t [263] = 5.87$, $p < .001$) ve algılanan aşırı koruma ($\beta = .19$, $t [262] = 3.14$, $p < .001$) davranışlarının ergenin duygu düzenlemede yaşadığı zorluğu yordadığı bulunmuştur. Algılanan red açıklanan varyansı % 19'a çıkarmıştır (Fdeğişim $[1, 263] = 34.41$, $p < .001$) ve algılanan aşırı korumanın da analize girmesiyle açıklanan varyans % 22'ye çıkarmıştır (Fdeğişim $[1, 262] = 9.86$, $p < .01$). Son olarak ebeveyn davranışları

kontrol edildikten sonra ise, ergenin kişilik özelliklerinin, duygu düzenleme konusunda yaşadıkları zorluk üzerindeki etkisine bakıldığında, duygusal tutarsızlık ($\beta = .39$, $t [261] = 7.40$, $p < .001$) yaşayan ergenlerin duygu düzenleme konusunda yüksek düzeyde zorluk yaşadıkları bulunmuştur. Diğer taraftan, gelişime açıklık ($\beta = -.30$, $t [260] = -6.28$, $p < .001$), sorumluluk ($\beta = -.18$, $t [259] = -3.37$, $p < .001$), ve dışa dönüklük ($\beta = -.11$, $t [258] = -2.02$, $p < .001$) kişilik özelliklerine sahip olan ergenlerin duygu düzenleme konusunda daha düşük düzeyde zorluk yaşadıkları bulunmuştur. Duygusal tutarsızlık açıklanan varyansı % 36'ya çıkarmıştır (Fdeğişim $[1, 261] = 54.72$, $p < .001$). Ergen temel kişilik özelliklerinden gelişime açıklık alt ölçeğinin analize girmesiyle açıklanan varyans % 44'e (Fdeğişim $[1, 260] = 39.40$, $p < .001$), sorumluluk alt ölçeğinin analize girmesiyle açıklanan varyans % 47'ye (Fdeğişim $[1, 259] = 11.37$, $p < .001$) ve son olarak dışa dönüklük alt ölçeğinin analize girmesiyle açıklanan varyans % 48'e çıkmıştır (Fdeğişim $[1, 258] = 4.10$, $p < .01$) çıkmıştır. Tüm bu değişkenler (10 adet) toplam varyansın % 48'sini açıklamaktadır. Ergen beyanına göre açıklanan varyanstaki artışlar incelendiğinde, ergenlerin kişilik özelliklerinin, özellikle duygusal tutarsızlığın, duygu düzenleme konusunda yaşadıkları zorlukları yordayıcı gücü dikkat çekicidir.

Anne Beyanına göre Ergenin Duygu Düzenleme Konusunda Yaşadığı Zorlukları Yordayan Faktörler

Anne beyanına göre çocuğunun duygu düzenleme konusunda yaşadığı zorlukları yordayan faktörler aşamalı regresyon ile sınanmıştır. Buna göre, demografik faktörlerden sadece ailenin gelirinin, çocuğunun duygu düzenlemede yaşadığı zorluğu yordadığı bulunmuştur. Buna göre, gelir düzeyi düşük ailelerde ($\beta = -.19$, $t [267] = -3.22$, $p < .001$) ergenlerin duygu düzenleme konusunda daha fazla zorluk yaşadıkları algılanmıştır. Aile geliri toplam varyansın % 4'ünü açıklamıştır. ($F [1, 267] = 10.35$, $p < .01$). Bu faktör kontrol edildikten sonra anne özelliklerinden, duygu düzenleme konusunda yüksek düzeyde zorluk yaşayan anneler ($\beta = .60$, $t [266] = 12.26$, $p < .001$) ve psikolojik sorunları olan anneler ($\beta = .20$, $t [265] = 3.78$, $p < .001$), çocuklarının duygu düzenleme konusunda daha yüksek düzeyde zorluk yaşadıklarını belirtmişlerdir. Buna karşı dışa dönüklük ($\beta = -.11$, $t [264] = -2.09$, $p < .01$) çıkmıştır.

.05) kişilik özelliğine sahip anneler, çocuklarının daha düşük düzeyde zorluk yaşadıklarını belirtmiştir. Annenin duygu düzenlemede yaşadığı zorluk açıklanan varyansı % 39'a çıkarmıştır (Fdeğişim [1, 266] = 150.33, $p < .001$). Annenin psikolojik sorunları analize girdiğinde açıklanan varyans % 42'ye (Fdeğişim [1, 265] = 14.26, $p < .001$), dışa dönüklük alt ölçeği analize girdiğinde açıklanan varyans % 43'e çıkmıştır (Fdeğişim [1, 264] = 4.37, $p < .05$). Anne özellikleri kontrol edildikten sonra ebeveynlik stillerinden, anneden yüksek düzeyde red algıladıklarında ($\beta = .14$, $t [263] = 2.98$, $p < .001$) ve anneler düşük düzeyde ilgi-sıcaklık sergilediklerinde ($\beta = -.13$, $t [262] = -2.48$, $p < .05$), çocuklarının duygu düzenleme konusunda yüksek düzeyde zorluk yaşadıklarını belirtmişlerdir. Algılanan red açıklanan varyansı % 45'e çıkarmıştır (Fdeğişim [1, 263] = 8.86, $p < .01$). Annenin gösterdiği ilgi ve sıcaklık analize girdiğinde ise açıklanan varyans % 46'ya çıkmıştır (Fdeğişim [1, 262] = 6.13, $p < .05$), Son olarak ebeveyn davranışları da kontrol edildikten sonra ise, ergenin kişilik özelliklerinin, duygu düzenleme konusunda yaşadıkları zorluk üzerindeki etkisine bakıldığında, anneler dışa dönüklük ($\beta = -.10$, $t [261] = -2.18$, $p < .05$) kişilik özelliklerine sahip olan çocuklarının duygu düzenleme konusunda daha düşük düzeyde zorluk yaşadıklarını belirtmişlerdir. Ergen temel kişilik özelliklerinden dışa dönüklük açıklanan varyansı % 47'ye çıkarmıştır (Fdeğişim [1, 261] = 6.76, $p < .05$). Tüm bu değişkenler (8 adet) toplam varyansın % 47'sini açıklamaktadır. Anne beyanına göre açıklanan varyanstaki artışlar incelendiğinde, annelerin kendi duygu düzenlemelerinde yaşadıkları zorlukların, duygu düzenleme konusunda çocuklarının yaşadıkları zorlukları yordayıcı etkisi dikkat çekicidir.

Ergenlerin Psikolojik Sıkıntılarını Yordayan Faktörler

Bu bölümde ergenin psikolojik sıkıntılarını yordayan faktörlerin araştırılması amaçlanmıştır. Regresyonun ilk basamağında cinsiyet, okul türü, anne eğitim, baba eğitim ve ailenin geliri kontrol değişkenleri olarak kullanılmıştır. İkinci basamakta ise anlamlı bulunan demografik bilgiler kontrol edildikten sonra annenin duygu düzenleme konusunda yaşadığı zorluğu, kişilik özelliklerini ve psikolojik sorunlarını kapsayan anne özellikleri analize sokulmuştur. Anlamlı bulunan anne özellikleri de kontrol edildikten sonra algılanan ve sergilenen ebeveyn stilleri (red, aşırı koruma,

ilgi-sıcaklık) analize sokulmuştur. Bir sonraki basamakta, anlamlı ebeveynlik stilleri kontrol edildikten sonra ergenlerin kişilik özellikleri analize sokulmuştur. Son basamakta ise, anlamlı bulunan ergen kişilik özellikleri kontrol edildikten sonra anne beyanına ve ergen beyanına göre ergenlerin duygu düzenlemede yaşadıkları zorluklar analize sokulmuştur. Tüm bu aşamalarda hiyerarşik yöntem (stepwise) kullanıldığı için, sadece sözü edilen basamaklardaki anlamlı değişkenler denkleme girmiştir. Elde edilen sonuçlara göre, demografik faktörlerden sadece gittiği okul türünün ergenin depresyonunu yordadığı bulunmuştur ($\beta = -.21$, $t [262] = -3.43$, $p < .001$). Buna göre, düz liseye giden ergenler, Anadolu Lisesi'ne gidenlere kıyasla daha fazla depresif semptom göstermişlerdir. Ergenin gittiği okul türü toplam varyansın % 4'ünü açıklamıştır. ($F [1, 262] = 11.79$, $p < .001$). Bu faktör kontrol edildikten sonra anne özelliklerine bakıldığında, annelerin duygusal olarak tutarsız ($\beta = .20$, $t [261] = 3.30$, $p < .001$) ve uyumsuz ($\beta = -.14$, $t [260] = -2.27$, $p < .05$) olduğu durumlarda ergenler depresif sorunlar yaşadıklarını belirtmişlerdir. Annenin duygusal tutarsızlığı açıklanan varyansı % 8'e çıkarmıştır (Fdeğişim $[1, 261] = 10.86$, $p < .001$). Annenin psikolojik sorunları analize girdiğinde açıklanan varyans % 10'a (Fchange $[1, 260] = 5.17$, $p < .05$). Anne özellikleri kontrol edildikten sonra ebeveynlik stillerinden, anneden düşük düzeyde ilgi ve sıcaklık algıladıklarında ($\beta = -.29$, $t [259] = -4.95$, $p < .001$) ve yüksek düzeyde koruma davranışı algıladıklarında ($\beta = .23$, $t [258] = 3.96$, $p < .001$), çocuklarının depresif belirtilerinin arttığı bulunmuştur. Algılanan düşük ilgi ve sıcaklık açıklanan varyansı % 18'e çıkarmıştır (Fdeğişim $[1, 259] = 24.45$, $p < .001$) Annenin gösterdiği aşırı koruma analize girdiğinde ise açıklanan varyans % 22'ye çıkmıştır (Fdeğişim $[1, 258] = 15.64$, $p < .01$). Ebeveyn davranışları kontrol edildikten sonra, kişilik özelliklerinin, ergenlerin yaşadığı depresyon üzerindeki etkisine bakıldığında, dışa dönük ($\beta = -.36$, $t [257] = -6.80$, $p < .001$), sorumluluk sahibi ($\beta = -.32$, $t [256] = -6.19$) ve gelişime açık ($\beta = -.11$, $t [257] = -1.99$, $p < .05$) ergenlerin depresif belirtilerinin düşük olduğu bulunmuştur. Buna karşılık, duygusal tutarsızlık ($\beta = .18$, $t [255] = 3.28$, $p < .001$) kişilik özelliğine sahip ergenlerin daha çok depresif belirti gösterdikleri bulunmuştur. Ergen temel kişilik özelliklerinden dışa dönüklük açıklanan varyansı % 34'ye (Fdeğişim $[1, 257] = 46.26$, $p < .001$), sorumluluk % 43'e (Fdeğişim $[1, 256] = 38.36$, $p < .001$), duygusal tutarsızlık %

45'e (Fdeğişim [1, 255] = 10.78, $p < .001$) ve gelişime açıklık % 46'ya (Fdeğişim [1, 254] = 3.97, $p < .05$) çıkarmıştır. Son olarak, ergenlerin temel kişilik özellikleri kontrol edildikten sonra, anne ve ergen beyanına göre duygu düzenlemede yaşadıkları zorlukların, ergenlerin depresif belirtileri üzerindeki etkisine bakıldığında, sadece ergen beyanına göre duygu düzenlemede yaşadıkları zorlukların ($\beta = .40$, $t [253] = 7.11$, $p < .001$) ergenlerin depresif belirtilerini yordadığı bulunmuştur. Duygu düzenlemede yaşanan zorluk açıklanan varyansı % 55'e çıkarmıştır (Fdeğişim [1, 253] = 50.50, $p < .001$) Tüm bu değişkenler (10 adet) toplam varyansın % 55'ini açıklamaktadır.

TARTIŞMA / SONUÇ

Yordayıcı Analizler

Çalışmada ergenin duygu düzenlemesi konusunda yaşadığı zorlukları yordayan faktörlerin incelenmesi amaçlanmış ve bu nedenle ergenlerin duygu düzenleme konusunda yaşadığı zorlukları yordayan faktörler hem ergen beyanı hem de anne beyanı için iki farklı aşamalı regresyon analizi kullanılarak sınanmıştır. Bu bölümde, analizlerden elde edilen bulgular ergen beyanı ve anne beyanı için ayrı ayrı tartışılacaktır.

Ergen Beyanına Göre Ergenin Duygu Düzenleme Konusunda Yaşadığı Zorlukları Yordayan Faktörler

Ergen beyanına göre, ergenlerin duygu düzenleme konusunda yaşadığı zorlukları yordayan faktörler aşamalı regresyon analizi kullanılarak sınanmıştır. Bulgular, aşamalı olarak ilk üç stepte yer alan faktörler (örn., kontrol değişkenleri, anne özellikleri, ebeveyn stilleri) kontrol edildiğinde bile ergenlerin dört temel kişilik özelliğinin (örn., duygusal tutarsızlık, gelişime açıklık, sorumluluk ve dışa dönüklük) duygu düzenleme becerileri için önemli olduğunu göstermiştir. Araştırma bulguları literatür ile tutarlıdır. Örneğin, McCrae ve Costa (2003) duygusal tutarsızlığın temelinde öfke, üzüntü, utanç, suçluluk, iğrenme gibi olumsuz duyguların olduğunu savunmaktadır. Bu nedenle duygusal tutarsızlık yaşayan ergenler duygu düzenleme konusunda daha çok zorluk yaşarlar (Elliott ve ark., 1994; Soldz ve Vaillant, 1999).

Bununla birlikte, dışa dönüklük de duyguların anlaşılması ve düzenlenmesi ile ilgilidir (Chan ve Caputi, 2000). Aynı şekilde Mann ve arkadaşları (1994, 1995) dışa dönüklük, geçimlilik ve gelişime açıklıklık gibi temel kişilik özelliklerinin varolan duyguyu kabul etmeme olarak tanımlanan aleksitimi ile ters ilişkili olduğunu bulmuşlardır. Sorumluluk temel kişilik özelliğine gelince, Tellegen (1988) sorumluluğu doğru zamanda uygun şekilde davranma becerisi olarak tanımlamaktadır ve bu da duygu düzenleme becerisi için çok gerekli bir özelliktir. Son olarak, Leary ve Hoyle (2009) duygu, davranış ve hislerdeki farklılığı açıklayan, duruma bağlı olmayan yatkınlık (dispositional) faktörlerinden (örn., kişilerarası, duygusal, bilişsel ve motivasyonel) bahsetmektedir. Onlara göre dışa dönüklük ve geçimlilik kişilerarası yatkınlık, duygusal tutarsızlık duygusal yatkınlık, gelişime açıklık bilişsel yatkınlık ve sorumluluk da motivasyonel yatkınlık boyutu altında yer almaktadır. Bu çalışmadan elde edilen bulgulara göre, duygu düzenleme konusunda yaşanan zorluk temel kişilik özelliklerinin yer aldığı her yatkınlık boyutu ile ilişkilidir. Buradan yola çıkarak, duygu düzenleme becerisinin sadece duygusal yatkınlık boyutundaki temel kişilik özellikleri ile değil, diğer yatkınlık boyutlarındaki kişilik özellikleri ile de ilişkili olduğunu söyleyebiliriz (örn., kişilerarası, bilişsel ve motivasyonel yatkınlık).

Çalışmanın bulguları aynı zamanda algılanan ebeveyn red ve aşırı koruma davranışının da duygu düzenleme konusunda yaşanan güçlükle ilişkili olduğunu göstermektedir. Geçmiş çalışmalar, çocukların duygu düzenlemeleri konusunda başarılı olabilmeleri için ebeveynlerinin onlara ihtiyaç duydukları yakınlığı ve özerkliği bir arada sağlamaları gerektiğini savunmaktadır (Southam-Gerow ve Kendall, 2002). Bir başka deyişle, eğer ebeveyn çocuğun ihtiyacı olan yakınlığı kuramazsa çocuk reddedilmiş hisseder. Aksine, eğer ebeveyn çocuğun ihtiyacı olan özerkliği ona sağlayamazsa bu kez de çocuk aşırı bağımlı biri olur. Bu bulgulara ek olarak, araştırma bulguları, annenin kendi duygu durumlarını düzenleme konusunda yaşadığı zorluğun da çocuğunun duygu düzenleme konusunda yaşadığı zorluğu önemli ölçüde yordadığını göstermiştir. Daha önce de ifade edildiği gibi annenin duygu düzenleme becerisi çocuğun duygu düzenleme becerisini geliştirmesinde çok önemli bir yere sahiptir.

Anne Beyanına Göre Ergenin Duygu Düzenleme Konusunda Yaşadığı Zorlukları Yordayan Faktörler

Araştırma bulguları, ergen beyanına dayanarak, ergenlerin duygu düzenleme konusunda yaşadıkları zorlukları yordayan faktörler sorgulandığında daha çok ergenin kendisi ile ilişkili faktörlerin (örn., temel kişilik özellikleri, algılanan ebeveyn yaklaşımları) en önemli yordayıcı faktörler olduğunu göstermiştir. Aksine, anne beyanına dayanarak ergenlerin duygu düzenleme konusunda yaşadıkları zorlukları yordayan faktörler sorgulandığında ise daha çok anne ile ilişkili faktörlerin en önemli yordayıcı faktörler olduğu görülmektedir.

Annelere göre, temel kişilik özelliklerinden sadece dışa dönüklük özelliği çocuklarının duygu düzenlemede yaşadığı zorlukla ilişkilidir. Hâlbuki ergenler duygusal tutarsızlık, gelişime açıklık, dışa dönüklük ve sorumluluk gibi dört temel kişilik özelliğinin duygu düzenleme konusunda yaşadıkları zorlukla ilişkili olduğunu belirtmişlerdir. Çalışmalar, dışa dönüklüğün birinci derecede önemli kişilik özelliği olarak ortaya çıktığını göstermektedir (McCrae ve Costa, 2003; Digman, 1999) ve dışa dönüklüğün en temel özelliği sosyal ilişkilerde kendini göstermesidir. Bu nedenle, annelerin çocuklarının kişiliğinin sadece sosyal ilişkilerle ilgili olan kısmını yakalayabildiklerini ve onların duygu düzenlemeleri için çok önemli olduğunu düşündüklerini söyleyebiliriz. Bir başka deyişle, dışa dönüklük dışarıdan kolayca gözlenebilen bir özellik olduğu için başkaları tarafından fark edilmesi kolay olabilmektedir.

Bunun yanında anneler, çocuklarına gösterdikleri ilgi ve sıcaklığın onların duygu düzenlemede yaşadıkları zorlukla ters ilişkili olduğunu belirtmişlerdir ki bu bulgu da literatür ile tutarlıdır (Darling ve Steinberg, 1993; Gottman ve ark., 1996). Araştırma bulguları arasında ilginç olan bir nokta, annelerin, çocuklarının duygu düzenlemeleri konusunda yaşadıkları zorluk konusunda algıladıkları ebeveyn reddinin önemli olduğunu belirtirken, ebeveyn aşırı koruma davranışının ergenlerin duygu düzenlemede yaşadıkları zorlukla alakasız olduğunu belirtmeleridir. Oysaki ergen beyanına göre hem ebeveyn reddinin hem de aşırı korumanın, ergenlerin duygu düzenlemede yaşadıkları zorlukla ilintili olduğu görülmektedir. Bu durum

Türk kültürü gibi toplulukçu kültürlerde aşırı koruma davranışının ebeveynler tarafından sağlıklı bir ebeveyn stili olarak kabul ediliyor olmasıyla açıklanabilir. Örneğin; Türk kültüründe ve benzeri diğer toplulukçu kültürlerde çalışmaları olan Kağıtçıbaşı (2005), ebeveyn kontrol ve sıcaklığının birbirinin karşısında değil birbirini tamamlayan boyutlar olarak ele alınmasını önermektedir. Bu nedenle Kağıtçıbaşı, Batı kültüründe çocuklar üzerinde olumsuz etkileri görülen aşırı koruma vb. bazı kontrol davranışların Türk kültüründe aynı derece olumsuz etkileri olmayacağını ileri sürmektedir. Ancak görünen o ki bu çalışmaya katılan ergenler aşırı koruma davranışından şikâyetçidirler ve duygu düzenleme becerileri üzerinde olumsuz etkisi olduğunu düşünmüşlerdir.

Geçmiş çalışmalar, ebeveynlerin, çocuklarının sosyalleşmesine etkili ve yeterli bir katkı sağlayabilmeleri için önce kendi duyguları ile etkili bir şekilde başa çıkabilme becerisine sahip olmaları gerektiğini göstermektedir (Dix, 1991). Bunun yanında, araştırmalar ebeveynin kendi duygularının farkında olması ile çocuklarının duygularının farkında olması arasında yüksek bir korelasyon olduğunu göstermektedir (Gottman, Katz, Hooven, 1997). Buna dayanarak Gottman ve arkadaşları (1997) ebeveynin, çocuklarının duygularını farketmesinin yolunun önce kendi duygularını fark etmesinden geçtiğini savunmaktadır. Literatür ile uyumlu olarak bu çalışmada da ebeveynlerin kendi duygu düzenleme becerilerinin, çocuklarının duygu düzenleme becerilerini değerlendirmelerinde ne kadar önemli bir rol oynadığı görülmektedir. Bu bulgu ergen beyanı ile de tutarlıdır öyle ki ergenler duygu düzenleme becerileri konusunda annelerinin duygu düzenleme becerilerinin önemli bir rolü olduğunu bildirmişlerdir. Ancak, ergen beyanı ile anne beyanı arasındaki fark şudur. Anneler, çocuklarının duygu düzenlemede yaşadıkları zorluk konusunda, kendilerinin duygu düzenleme konusunda yaşadıkları zorluğun varyansın % 35'ini açıkladığını söylerken, ergenler annelerinin duygu düzenleme konusunda yaşadıkları zorluğun varyansın % 4'ünü açıkladığını belirtmişlerdir. Buradan yola çıkarak, annelerin, çocuklarının duygu durumlarını değerlendirirken, kendi duygu durumlarının etkisinde kaldığını ve böyle olunca da gerçeklerden uzaklaşmış olabilecekleri düşünülmektedir.

Ergenlerin Psikolojik Sıkıntılarını Yordayan Faktörler

Araştırma bulguları, ergenin yaşadığı depresif belirtileri yordayan faktörler sorgulandığında, ergenin gittiği okul türünün, annenin temel kişilik özelliklerinin ve ebeveynlik stillerinin, ergenin temel kişilik özelliklerinin ve duygu düzenlemede yaşadığı zorluğun önemli yordayıcı faktörler olduğunu göstermiştir. Gidilen okul türüne bakıldığında, düz liseye giden ergenlerin depresif belirtiler gösterdikleri öte yandan Anadolu Lisesi'ne giden ergenlerin böyle bir risk taşımadıkları görülmektedir ancak düz liseye gitmek tek başına bir risk oluşturmamaktadır. Gidilen okul türü, ergenin akademik başarısının, ebeveynlerinin sosyo ekonomik düzeylerinin, ergene sunulan imkânların da göstergesidir. Bunları kontrol etmeden, tek başına okul türü ile depresyon arasında ilişki olduğundan söz etmek yanıltıcı olur. Ancak, bu çalışma özellikle düz liselerde okuyan ergenlerin maruz kaldığı sıkıntılara işaret etmektedir. Araştırma bulguları, ergenin depresif belirtiler göstermesi konusunda annenin kişilik özellikleri ve ebeveynlik stilleri açısından risk faktörlerin neler olduğu konusunda bilgi vermektedir. Annenin duygusal tutarsızlığı ergenin duygu durumunu olumsuz etkileyeceği için depresif belirtiler göstermesi ile ilişkilidir. Araştırma bulgularında ilginç olan bir nokta annenin hem düşük ilgi ve sıcaklığı hem de aşırı koruyucu olması ergenin gösterdiği depresyonla ilişkili bulunmasıdır. Anne tarafından reddedilmiş algılanmak ise depresyonla ilişkili bulunmamıştır. Bu bulgular araştırma hipotezleri ile tutarlıdır. Araştırmada ergenin algıladığı aşırı korumanın depresyonla, algıladığı reddin ise saldırganlıkla ilişkili olmasının beklendiği ifade edilmiştir. Algılanan aşırı korumanın depresyonla ilişkili olduğu bulunmuştur. Bu bulgular, ergenlerin hem ilgisizlikten şikâyet ettiklerini hem de aşırı koruma istemediklerini ve bu sebeple ebeveynlerinin bu ikisi arasındaki dengeyi kurlmaları gerektiğini göstermektedir. Ergenlerin kişilik özellikleri değerlendirildiğinde dışadönüklük, sorumluluk ve gelişime açıklık gibi olumlu kişilik özelliklerinin depresyonu önlemek için koruyucu faktör olduğu, buna karşılık duygusal tutarsızlık gibi olumsuz kişilik özelliklerinin ise depresyon için risk faktörü olduğu bulunmuştur. Demek oluyor ki ergenlerin kişilik özellikleri depresif belirtiler sergileme riskinin ne kadar az ya da çok olacağı konusunda bilgi vermektedir. Bu nedenle olumsuz kişilik özelliklerine sahip ergenlerin gerek aileleri

ve gerek öğretmenleri tarafından daha sıkı takip edilmesi ve ihtiyaçlarının dikkate alınması konusunda duyarlı olunması gerekmektedir. Son olarak araştırma bulguları duygu düzenleme konusunda yaşanan zorluğun depresyon için çok önemli bir risk faktörü olduğunu ortaya koymuştur. Bu bulgu geçmiş çalışmalar ile tutarlıdır. Yapılan birçok çalışma, depresyonun duygu düzenlemede yaşanan zorluk neticesinde oluştuğunu belirtmektedir (Campbell-Sills & Barlow, Brown, & Hofmann, 2006; Kring & Werner, 2004). Bu bakış açısına göre kişinin duygu durumunu adaptif bir şekilde modüle edememesi neticesinde depresif semptomlar ortaya çıkmaktadır (Cole et al., 1994).

SINIRLILIKLAR

Çalışmanın dikkate alınması gereken sınırlılıklarından bir diğeri örnekleme ulaşma yöntemi nedeni ile örneklemin görece yanlı olmasıdır. Uygulama etiği dikkate alınarak veri toplamadan önce annelerinden çocukları için imzalı izin istenmiştir. Yöntem kısmında belirtildiği üzere, etik kurallar gözetilerek annelere çalışmaya katılım onay formu gönderilmiş ve sadece annelerinin kabul ettiği ergenler çalışmaya dahil edilmiştir. Sonuçta annelerin % 61.34'ü anket formlarını doldurup geri göndermiştir. Bu nedenle örnekleme türdeşliği (homojenliği) artmış ve muhtemelen benzer profile sahip aileler çalışmaya katılmış olabilir. Bu da örneklemeindeki varyansın azalmasına yol açmış olabilir. Bir başka deyişle onay sürecinde meydana gelen seçim, verilerin pozitif yönde yanlılaşmasına neden olmuş olabilir.

Örnekleme kaybının etkisini incelemek amacıyla ergen verisi kullanılarak ek analizler yapılmıştır. Bu amaçla, örneğin, annesi anket dolduran ve doldurmayan çocukların temel değişkenlerden aldıkları puan ortalamaları karşılaştırılmıştır. Bu karşılaştırmalar aslında annesi araştırmaya katılan ve katılmayan ergenler arasında değişkenlerin biri hariç hiç birinde farklılık olmadığını göstermiştir. Yalnızca ergenlerin algıladıkları ilgi ve sıcaklık annesi anket dolduranlardan doldurmayanlardan daha yüksek bulunmuştur ($t(580) = 2.18, p < .05$).

Bir diđer sınırlılık, ele alınan deęişkenler farklı kaynaklardan ölçülmesine rağmen, ilişkilerin sadece kesitsel (cross-sectional) yöntemle incelenmiş olmasıdır. Özellikle, projede idildięi gibi nedensellik öngören deęişkenlerin boylamsal yöntemlerle incelenmesi gerekmektedir. Araştırmadaki kesitsel sınırlılıęa bir diđer alternatif de farklı yaş gruplarındaki ergenlerin karşılaştırması olabilir. Son olarak, araştırma kapsamında sadece ergenlerin annelerine ulaşılmıştır. Bunun en önemli nedenlerinden biri literatürde de belirtildięi gibi ergenlik döneminde ergenlerin anneleri ile olan paylaşımlarının babalarına kıyasla daha fazla olmasıdır. Ancak yine de ergenlerin duygu düzenleme becerilerinin gelişmesinde babalarının rolünü incelemek resmin bütününe görmek açısından önemlidir. O nedenle sonraki çalışmalarda babaların duygu düzenleme becerilerinin, çocuklarının duygu düzenleme becerileri üzerindeki etkisinin araştırılması gerekmektedir.

APPENDIX K: CURRICULUM VITAE

PERSONAL INFORMATION

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EDUCATION

Degree	Institution	Year of Graduation
PhD	METU Clinical Psychology	2012
Visiting Researcher	University of Toronto, Toronto- Canada	2011
MS	METU Clinical Psychology	2007
BS	METU Psychology	2004

FOREIGN LANGUAGES

Advanced English,

PUBLICATIONS

Grusec, J.E., & Sarıtaş, D., Daniel, E. (in press). What Defines an Effective Parenting? In S. Landry & C. Cooper (Eds.), *Wellbeing: A Complete Reference Guide*. Wiley-Blackwell, John Wiley & Sons: UK.

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CONFERENCE PRESENTATIONS

Sarıtaş D. & Gençöz T. “Higher-Order Factors of Young Schema Questionnaire among Turkish Adolescents” 10th European Congress of Psychology, Prague, Czech Republic, July 2007.

Sarıtaş D. & Gençöz T. “Parental Acceptance-Rejection and Psychological Distress of Adolescents: The Mediator roles of Early Maladaptive Schemas” 5th World Congress of Behavioral and Cognitive Therapies, Barcelona, Spain, July, 2007.

Sarıtaş D. & Gençöz T. “Mediating Roles of Young Schema Domains in the Relationship of Perceived Maternal Rejection with Anger, Depression, and Anxiety: A Study Conducted with Turkish University Students” 38th EABCT Annual Congress, Helsinki, Finland, September, 2008.

Sarıtaş D. & Gençöz T. “Higher Order Factor Structure of Young Schema Questionnaire: A comparison Between High School and University Students”. 15th National Psychology Congress, Istanbul, Turkey, September, 2008

Sarıtaş D. & Gençöz T. “Parental Acceptance–Rejection (PARQ) and its Relation to Anger and Anxiety: A Comparison between High School and University Students” World Congress of Behavioral and Cognitive Therapies, Boston, ABD, June, 2010.

Sarıtaş D. & Gençöz T. “How Mothers Perceive Emotion Regulation Difficulties in Their Adolescent Children”. 7th International Congress of Cognitive Psychotherapy, Istanbul, Turkey, June, 2011.

Sarıtaş D. & Gençöz T. “Psychometric Properties of the Difficulties in Emotion Regulation Scale (DERS) in a Turkish Adolescent Sample”. 12th European Congress of Psychology, Istanbul, Turkey, July, 2011.

Sarıtaş D. & Gençöz T. “The Role of Several Factors in the Prediction of Emotion Regulation Difficulties Among Adolescents”. 12th European Congress of Psychology, Istanbul, Turkey, July, 2011.

Vinik J., **Sarıtaş D.**, & Grusec J. E. “Domains of Socialization in Four Cultural Groups”. Biannual Meeting of International Society for the Study of Behavioral Development, Edmonton, Alberta, Canada, July, 2012.

Sarıtaş D., Vinik J., & Grusec J. E. “What factors contribute to Unsuccessful Value Acquisition?” Society for Research in Child Development, Seattle, USA, April, 2013. (submitted paper)

APPENDIX L: TEZ FOTOKOPİSİ İZİN FORMU

ENSTİTÜ

Fen Bilimleri Enstitüsü	<input type="checkbox"/>
Sosyal Bilimler Enstitüsü	<input checked="" type="checkbox"/>
Uygulamalı Matematik Enstitüsü	<input type="checkbox"/>
Enformatik Enstitüsü	<input type="checkbox"/>
Deniz Bilimleri Enstitüsü	<input type="checkbox"/>

YAZARIN

Soyadı : Sarıtaş
Adı : Dilek
Bölümü : Psikoloji

TEZİN ADI (İngilizce) : PSYCHOLOGICAL WELL-BEING OF ADOLESCENTS: MATERNAL REARING BEHAVIORS, BASIC PERSONALITY TRAITS, AND EMOTION REGULATION PROCESSES

TEZİN TÜRÜ : Yüksek Lisans Doktora

1. Tezimin tamamından kaynak gösterilmek şartıyla fotokopi alınabilir.
2. Tezimin içindekiler sayfası, özet, indeks sayfalarından ve/veya bir bölümünden kaynak gösterilmek şartıyla fotokopi alınabilir.
3. Tezimden bir bir (1) yıl süreyle fotokopi alınmaz.

TEZİN KÜTÜPHANEYE TESLİM TARİHİ: