

Comparison of Emotion Regulation Strategies, Worry, Meta-Mood and Cognitive Failures in Individual with and without Generalized Anxiety Disorder

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Abstract

The aim of this study was to compare emotion regulation strategies, worry, meta-mood and cognitive failures in patients with GAD and healthy individuals. The statistical population included all male and female patients with GAD that was referred to psychiatric centers in the city of Ardabil. The study sample consisted of 47 patients with generalized anxiety disorder based on psychiatrist's diagnosis and 47 normal individuals based on clinical interview who were selected by convenience sampling. The tools were the cognitive emotion regulation questionnaire-version short, Penn state worries questionnaire, trait meta-mood scale and cognitive failure's questionnaire. To analyze the data, MANOVA was used. The results showed that the average scores of the negative emotion regulation strategies, worry and cognitive failures in patients with GAD were significantly more than the normal individuals. The average scores of the positive emotion regulation strategies and meta-mood in patients with GAD were significantly lower than the healthy individuals. These findings suggest that emotion regulation strategies, worry, meta-mood and cognitive failures can be applicable in the pathology and prevention of generalized anxiety disorder.

Keywords: Generalized anxiety disorder, emotion regulation strategies, meta-mood, worry, cognitive failures

Introduction

The prevalence of generalized anxiety disorder is reported to be 23.7%, which is up to twice as high in women than in men (Ahmad, et al., 2018). Considering the more emotional problems in people with generalized anxiety disorder (Fitzgerald, et al., 2017), the Menin and Fresco (2013) emotion dysregulation model seeks to explain the pathology of this disorder. Another problem with people with pervasive anxiety disorder is worry. One of the models in which the emotional consequences of generalized anxiety disorder are considered is the coping avoidance pattern of worry Newman and Llera (2014). According to this model, people with generalized anxiety disorder create worry to avoid negative emotional confrontation. In addition, people with generalized anxiety disorder have difficulty meta-mood (Killgore et al., 2016). Meta-mood refers to the ability to be aware of and manage emotions and is an aspect of emotional intelligence. Also, due to cognitive problems in people with generalized anxiety disorder, there is a lot of evidence on the role of cognitive failures in anxiety

disorders. Due to the problems in the frontal lobe of the brain of people with generalized anxiety disorder and its relationship with cognitive and emotional dysfunction (Wang, et al., 2018), also due to the high prevalence of generalized anxiety disorder and their vulnerability, as they are associated with pervasive anxiety disorder, it can help professionals and therapists to better understand their problems. The results of the present study can be used in the pathology and prevention of generalized anxiety disorder and pave the way for future research. Therefore, the aim of this study was to compare emotion regulation strategies, worry, meta-mood and cognitive failures in individual with and without generalized anxiety disorder.

Method

This descriptive study was a causal-comparative study. The statistical population included all male and female patients with GAD that was referred to psychiatric centers in the city of Ardabil. The study sample consisted of 47 patients with generalized anxiety disorder based on psychiatrist's diagnosis and 47 normal individuals based on clinical interview who were selected by convenience sampling. Data were collected by using the cognitive emotion regulation questionnaire-version short, Penn state worries questionnaire, treat meta-mood scale and cognitive failure's questionnaire. The criterion for selecting patients was the diagnosis of generalized anxiety disorder with the help of a psychiatrist. Criteria for admission to the group of patients, not having a concomitant disorder of substance and alcohol abuse, no history of other mental disorders and having a minimum cycle of higher education. Finally, the data were analyzed by multivariate analysis of variance using SPSS22 software.

Research Tools

The cognitive emotion regulation questionnaire (CERQ-Short): This short form of 18 items was developed by Garnefski, et al. (2006), reporting with Cronbach's alpha coefficient of 0.80. In the present study, Cronbach's alpha coefficients were 0.87 for positive strategies and 0.79 for negative strategies.

Trait Meta-Mood Scale(TMMS): Salovey, et al. (1995) made this 30 items which had 3 subscales of pay attention to emotion, emotional transparency and emotion recovery, reported Cronbach alpha coefficients of 0.82, 0.87 and 0.86. In present study for total score was 0.74.

Penn. State Worry Questionnaire(PSWQ): This 16 items Questionnaire was designed by Meyer, et al. (1990) measuring severe worry, reported Cronbach alpha coefficient of 0.88. In the present study, Cronbach's alpha coefficient was 0.65.

Cognitive Failures Questionnaire(CFQ): Broadbent, et al. (1982) designed 25 items questionnaire with 4 subscales of disturbance, memory problems, inadvertent mistakes and forgetfulness with Cronbach alpha coefficient CFQ was 0.79. In present study it was 0.74.

Results

Table 1 shows the comparison of the mean and standard deviation of research variables in people with and without generalized anxiety disorder.

Table1. Mean and standard deviation of variables in individual with and without GAD

Variables	GAD		Normal Individual	
	Mean	SD	Mean	SD
Negative emotion strategies	24.21	2.74	13.27	4.32
Positive emotion strategies	13.25	4.19	26.63	5.17
Worry	59.95	3.70	43.61	6.13
Meta Mood	85.25	10.68	104.45	8.08
Cognitive Failures	75.46	12.63	42.38	13.05

Table 2 shows that there is a significant difference between people with generalized anxiety disorder and normal people in terms of dependent variables. That is, 88.6% of the variance related to the difference between the two groups is due to dependent variables. The results of multivariate analysis of variance and F values showed that in individual with generalized anxiety disorder, negative strategies for emotion regulation ($F= 21.41$), anxiety ($F= 24.45$) and cognitive failures ($F= 15.58$) are more than normal individual. Also, the F-values of positive emotion regulation strategies ($F = 18.96$) and meta-mood ($F = 96.39$) are significantly lower in individual with generalized anxiety disorder than normal individual ($P < 0.001$). ETA squared values show that positive emotion regulation strategies explain 67%, negative emotion regulation strategies 70%, worry 73%, meta-mood 42% and cognitive failures 62% of the variance related to intergroup differences.

Table2. Results of multivariate analysis of variance in individual with and without GAD

Dependent variable	SS	DF	MS	F	P	Eta
Negative emotion strategies	2810.59	1	2810.59	21.41	0.001	0.70
Positive emotion strategies	4208.94	1	4208.947	18.96	0.001	0.67
Worry	6274.72	1	6274.72	24.45	0.001	0.73
Meta Mood	8655.36	1	8655.36	96.39	0.001	0.42

Cognitive Failures	25723.67	1	25723.67	15.58	0.001	0.62
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Conclusion

The results of the present study showed that in patients with generalized anxiety disorder, negative emotion regulation strategies are more than normal people and positive emotion regulation strategies are less than normal individual. Worry and cognitive failures in patients with generalized anxiety disorder are significantly higher than in normal individuals. Also, meta-mood in patients with generalized anxiety disorder is significantly lower than normal people. People with generalized anxiety disorder do not have the ability to deal with everyday events, expand their insights, and develop a positive attitude about events and emotions due to cognitive and emotional problems. Therefore, they have less power to overcome negative-emotional experiences that may contribute to the exacerbation and persistence of the clinical features of this disorder. Available sampling, lack of control over variables such as socio-economic status and the scarcity of research samples were some of the limitations of this study.

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Conflicts of interest

The authors declared no conflict of interest.

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