

Emotional Regulation and QOL among Young Adults

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Abstract: Emotional regulation plays a crucial role in shaping the QOL among young adults by influencing their mental, physical, and social well-being. The goals of this research are to determine which emotional regulation techniques are associated with higher QoL, to isolate those strategies that have a beneficial impact on well-being and evaluate the mediation function of emotional regulation in dealing with stressful life events. A cross-sectional survey of 150 young individuals (ages 18–35) was used in this quantitative correlational study. QOL was measured with the "WHO-QOL BRE" F, and techniques for cognitive reappraisal and expressive suppression were evaluated using the "Emotion Regulation Questionnaire" (ERQ). The findings revealed a significant positive correlation ($r = 0.445$, $p < 0.01$) between emotional regulation and QOL, supporting the hypothesis that better emotional regulation leads to improved well-being. Regression analysis further confirmed that emotional regulation accounts for 19.8% of the variance in QoL ($R^2 = 0.198$, $p < 0.001$), highlighting its substantial impact. These findings align with prior research operating that adaptive emotion regulation strategies, particularly cognitive reappraisal, enhance overall life satisfaction, while excessive expressive suppression may contribute to emotional distress. The study underscores the importance of promoting emotional regulation training as an intervention to improve young adults' well-being. Future research should explore longitudinal effects and intervention-based approaches to strengthen emotional resilience in this population.

Keywords: Emotional regulation, QOL, expressive suppression, young adults, cognitive reappraisal, well-being

1. Introduction

One of the most basic psychological processes, emotional regulation enables people to control and appropriately react to their emotional experiences. To accomplish one's objectives and keep the peace in one's social circle, one must be able to control the length, frequency, and intensity of one's emotional expressions. Cognitive reappraisal and suppression are examples of antecedent-focused methods for emotional regulation, as proposed by Gross (1998). While healthy regulation promotes mental health and resilience, unhealthy techniques may exacerbate mental health issues including anxiety and depression. (Aldao, 2010). Many things, including one's biology, psychology, and social environment, impact one's capacity to control their emotions. Brain regions including the prefrontal and cortex amygdala are involved in emotional regulation, according to neuroscientific research. Cognitive control and emotional regulation are responsibilities of the prefrontal cortex, while the amygdala analyzes emotional inputs and initiates physiological reactions. The significance of emotional regulation in mental health has been underscored by the fact that affective illnesses have been associated with dysregulation in these brain circuits. (Ochsner & Gross, 2005). The effects on mental health of various methods of controlling emotions are unique. One method of controlling one's emotional response to a circumstance is cognitive reappraisal. Enhanced emotional resilience and decreased stress levels are two good mental health outcomes linked to this approach (Troy et al., 2010). On the other side, there is evidence that response-focused tactics, such as expressive repression, may lead to elevated physiological stress levels and less social support. (Butler et al., 2003). Suppression may prevent emotional catharsis and lead to long-term emotional exhaustion (Gross & Levenson, 1997). Cultural and environmental factors also play a critical role in shaping emotional regulation strategies. Research suggests that collectivist cultures, which emphasize social harmony, often promote suppression as a socially acceptable form of

regulation, whereas individualistic cultures encourage cognitive reappraisal and emotional expression (Matsumoto, Yoo, & Nakagawa, 2008).

2. Literature Review

The term "emotional regulation" describes the ways in which people manage and shape their emotional reactions in order to attain their goals. (Gross, 2015). It is a crucial aspect of psychological well-being and social functioning, enabling individuals to manage their emotions effectively in various situations. Emotional regulation encompasses a range of strategies, including cognitive reappraisal, expressive suppression, attentional deployment, and 4 behavioral adjustments (Aldao, Nolen-Hoeksema, & Schweizer, 2010). Understanding emotional regulation mechanisms can provide insights into mental health, interpersonal relationships, and overall life satisfaction. The process model put out by Gross (1998) is among the theories of emotional regulation that have been extensively researched. The concept divides methods for controlling one's emotions into two groups: those that center on antecedents and those that center on responses. Strategies that target the antecedents of an emotion include cognitive reappraisal, scenario alteration, attentional deployment, and situation selection (Gross & Thompson, 2007). In contrast, techniques that center on responses take place after an emotional reaction has already taken place; for example, expressive suppression entails repressing visible manifestations of emotion. While expressive repression may lead to negative consequences including heightened stress and less social support, cognitive reappraisal is often linked to favorable psychological outcomes, according to research (John & Gross, 2004). Different people and different situations call for different approaches to emotional management. Better emotional resilience and overall health have been associated with cognitive reappraisal, which is changing one's perception of an emotional input (Troy, Wilhelm, Shallcross, & Mauss, 2010). Conversely, research

has linked emotional numbness and suffering to suppressed expressions of emotion (Cutuli, 2014). Additionally, genetic, neurological, and environmental variables have all been linked to variations in the ability to regulate one's emotions (Gyurak, Gross, & Etkin, 2011). For example, research using "functional magnetic resonance imaging" (fMRI) has pinpointed the prefrontal cortex as a critical area of the brain that controls emotional processing by influencing the activity of the amygdala (Ochsner & Gross, 2005). Developmental research indicates that emotional regulation begins in early childhood and continues to evolve throughout life. Infants primarily rely on caregivers for external emotional regulation, such as soothing behaviors and environmental modifications (Thompson, 1994). As children grow, they develop self-regulatory abilities, influenced by parental modeling, social interactions, and cognitive maturation (Morris, 2007).

Adolescence represents a critical period for emotional regulation development due to neurobiological changes and increased social and academic demands (Ahmed, Bittencourt-Hewitt, & Sebastian, 2015). Effective emotional regulation during adolescence has been linked to better academic performance, stronger peer relationships, and lower risk of mental health disorders (Compas, Jaser, Bettis, Watson, Gruhn, & Dunbar, 2017). Emotion dysregulation is a core feature of various psychological disorders, including "anxiety, depression, borderline personality disorder (BPD)", and post-traumatic stress disorder (PTSD) (Berking & Wupperman, 2012). Individuals with BPD, for instance, often exhibit heightened emotional sensitivity and difficulty modulating intense emotional responses, leading to impulsive behaviors and interpersonal difficulties (Linehan, 1993). Similarly, depression has been linked to maladaptive emotional regulation strategies, like avoidance and rumination, which exacerbate negative affect and prolong distress (Joormann & Stanton, 2016). Interventions aimed at improving emotional regulation, such as "cognitive-behavioral therapy (CBT)" and "dialectical behavior therapy (DBT)", have shown success in mitigating symptoms of emotional dysregulation (Gross, 2002). The use of mindfulness-based treatments (MBIs) to better control one's emotions has also grown in favor.

According to Chambers, Gullone, and Allen (2009), practicing mindfulness is paying attention in the here and now without passing judgment on what one is experiencing. Hölzel et al. (2011) found that regular mindfulness practice increases activity in the prefrontal cortex, which in turn helps with emotional regulation and decreases the prevalence of automatic, maladaptive responses. Research indicates that those who consistently practice mindfulness report better emotional stability, reduced stress levels, and enhanced general well-being (Keng, Smoski, & Robins, 2011).

3. Method

Research Design

The association between emotional control and QOL among young people is investigated in this study using a quantitative and correlational research approach. The quantitative approach allows for numerical data collection

and statistical analysis, ensuring objectivity and precision in measuring key variables. The correlational design is employed to determine whether emotional regulation strategies influence the overall QOL and to assess the strength and direction of this relationship. The research is also cross-sectional, meaning that it only gathers data at one moment in time. This method is useful because it allows us to learn how young individuals now regulate their emotions and rate their QOL without having to conduct long-term research. Additionally, controlling for demographic factors (e.g., age, gender, educational background) ensures a more comprehensive analysis of how emotional regulation strategies affect different groups within the young adult population.

Hypothesis

H1: There is a positive correlation between Emotional regulation and QOL among young adults.

H2: There is an impact of emotional regulation on QOL among young adults.

Variables

Dependent Variables: QOL Independent Variables: Emotional regulation

Sampling

A purposive sampling method is used to select 150 young adults aged 18-35 years, ensuring that participants meet the study's criteria. This sampling technique is appropriate because it focuses on individuals who can provide meaningful insights into the research objectives. A target sample of 150 university participants from Delhi NCR is established. A total of 50 physical forms were distributed and 100 were administered online.

Inclusion Criteria:

People who are between the ages of 18 and 35.

Individuals who can understand and respond to the questionnaire in English.

People who want to take part in the research and provide their permission to do so.

Exclusion Criteria:

Individuals with diagnosed severe psychiatric disorders that may interfere with their ability to complete the survey.

Participants outside the defined age range.

Incomplete survey responses.

Measures of the study

To assess the relationship between emotional regulation and QOL among young adults, this study utilizes well-validated psychological scales. These measures confirm the reliability and accuracy of data collection, allowing for an in-depth understanding of how different emotional regulation strategies influence well-being.

WHO-QOL BREF The "World Health Organization Quality of Life Scale"

(WHO-QOL BREF)" is used to measure the overall QOL. This tool provides a comprehensive assessment of how individuals perceive their health, emotional balance, interpersonal interactions, and external living conditions. Each domain is scored separately, allowing for a detailed

analysis of how emotional regulation strategies impact different aspects of well-being. The WHO- QOL BREF is widely recognized for its high reliability and validity and has been used in various psychological and health-related research studies. Emotion Regulation Questionnaire (ERQ)-Gross & John 11 This tool helps determine how young adults regulate their emotions and whether these strategies contribute positively or negatively to their QOL. The ERQ is a well-established measure in psychological research, known for its strong psychometric properties. Gender, age, occupation, education, and socioeconomic position are some of the key pieces of background information gleaned from a demographic questionnaire. This information helps identify any demographic variations in emotional regulation and QOL, providing deeper insights into the study's findings. By using these standardized measures, the study ensures a systematic and objective approach to evaluating emotional regulation and its impact on the QOL in young adults. The combination of WHO-QOL BREF and ERQ allows for a multi dimensional analysis, ensuring a robust examination of the research hypotheses. Data analysis The collected data will be analyzed using SPSS software. The study employed Descriptive Statistics to summarize demographic details and key variables, providing a clear overview of the sample characteristics. Pearson's Correlation Analysis was conducted to determine the strength and direction of the relationship between emotional regulation and QOL. Additionally, Regression Analysis was utilized to assess the predictive effect of emotional regulation strategies on QOL, thereby offering insights into how variations in emotional regulation may influence overall well-being.

4. Result

Table 1: Age of respondents

Age					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	18-24	129	89	89	89
	25-30	12	8.3	8.3	97.2
	31-35	4	2.8	2.8	100
	total	150	100	100	

The majority of respondents (89.0%) fall within the 18-24 age group, indicating that the sample is predominantly composed of young individuals. A smaller proportion, 8.3%, belongs to the 25-30 age range, while only 2.8% of participants are aged between 31-35.

The cumulative percentage shows that by the time we account for all age groups, we reach 100% of the respondents. This suggests that the survey is largely focused on a younger demographic, with minimal representation from older age brackets.

Table 2: Gender of respondents

Gender					
		Frequency	Percent	Valid percent	Cumulative percent
Valid	Female	129	89	89	89
	Male	15	10.3	10.3	99.3
	Other	1	0.7	0.7	100
	total	150	100	100	

The sample is heavily skewed towards female respondents, who make up 89.0% of the total participants. Males constitute only 10.3%, and a very small fraction (0.7%) identifies as "Other." The cumulative percentage indicates that by including all gender categories, the total reaches 100%. This distribution highlights a significant gender imbalance in the dataset, suggesting that the responses are predominantly from females, with relatively fewer male and non-binary participants.

Table 3: Descriptive Statistics of variables

Descriptive Statistics					
	N	Minimum	Maximum	Mean	Std. deviation
QOL	150	58	119	86.2345	11.25032
ERQ	150	25	67	46.1241	8.34822
Valid N (listwise)	150				

The dataset consists of 150 valid responses. The Quality of Life (QOL) scores range from a minimum of 58.00 to a maximum of 119.00, with an average (mean) score of 86.23 and a SD of 11.25. This implies that while there is some variation in QOL scores, most values are relatively close to the mean. For the Emotional Regulation Questionnaire (ERQ), the scores range between 25.00 and 67.00, with a mean of 46.12 and a SD of 8.35. The smaller SD compared to QOL indicates that ERQ scores are somewhat more tightly clustered around the mean. Overall, both measures exhibit a reasonable spread of values, reflecting individual differences in QOL and emotional regulation among respondents.

Table 4: Correlation analysis

Correlations			
		QOL	ERQ
QOL	Pearson correlation	1	.445**
	Sig. (2-tailed)		0.000
	N	150	150
ERQ	Pearson correlation	.445**	1
	Sig. (2-tailed)	0.000	
	N	150	150

**."Correlation is significant at the 0.01 level (2-tailed)."

H 1: There is a positive correlation between Emotional regulation and QOL among young adults. "The Pearson correlation coefficient between QOL and Emotional Regulation (ERQ) is 0.445, representing a moderate positive correlation. This means that as emotional regulation improves, the QOL tends to increase among the respondents. The significance value (Sig. = 0.000) is well lower the 0.01 threshold, verifying that this correlation is statistically significant. Given this evidence, we can conclude that There is a positive correlation between Emotional regulation and QOL among young adults."

5. Findings and Discussion

The analysis reveals a moderate positive correlation ($r = 0.445$, $p < 0.01$) between ERQ and QOL among young adults. This indicates that individuals with better emotional regulation tend to experience a higher QOL. The significant p-value (0.000) confirms that this relationship is not due to

random chance but is statistically meaningful. This aligns with existing psychological research suggesting that individuals who effectively manage their emotions tend to experience less stress and greater overall well-being. The regression analysis further supports this relationship, demonstrating that emotional regulation accounts for 19.8% of the variance ($R^2 = 0.198$) in QOL. While this suggests that ERQ plays a meaningful role in influencing QOL, it also indicates that other factors contribute significantly to QOL, such as physical health, social support, and environmental factors. The F-statistic (35.330, $p = 0.000$) from the ANOVA test confirms that the emotional regulation is a valid predictor of QOL. These results highlight the significance of teaching young people how to control their emotions so that they may live better lives. Young individuals who effectively regulate their emotions may be better equipped to handle stress, maintain positive social relationships, and navigate challenges more effectively. This insight can be particularly useful for mental health practitioners, educators, and policymakers seeking to design interventions aimed at improving emotional well-being. However, the relatively modest R^2 value suggests that while emotional regulation is an important factor, it is not the sole determinant of QOL. To fill gaps in our knowledge of the factors that impact young people's QOL, future studies may investigate resilience, social connections, self-efficacy, and mental health issues. Moreover, longitudinal studies could provide deeper insights into how emotional regulation impacts well-being over time. Both assumptions were supported by the results, which show that emotional control significantly improves QOL. The need of teaching young individuals stress management skills, cognitive reappraisal, mindfulness, and other emotional regulation tools cannot be overstated. People in this age bracket might gain a lot from educational and mental health programs that include more research and real-world applications.

6. Conclusion

Emotional control has a substantial effect on young people's QOL, according to this study's results. There is a moderate positive association ($r = 0.445$, $p < 0.01$) between Emotional Regulation (ERQ) and Quality of Life (QOL), according to the statistical study. This means that people who are good at controlling their emotions usually have a better QOL. Furthermore, the regression model indicates that emotional regulation explains approximately 19.8% of the variance in QOL, emphasizing its crucial role in shaping overall well-being. These results align with offered investigation that underscores the importance of emotional regulation in various aspects of life, including mental health, academic success, and interpersonal relationships. Prior studies, such as those by Manju and Basavarajappa (2016) and Maity and Sahai (2018), have also demonstrated that individuals with better emotional regulation strategies experience higher self-efficacy, optimism, and overall psychological well-being. The ability to regulate emotions effectively helps young adults navigate stress, build resilience, and maintain a balanced approach to life's challenges. While emotional control is certainly important, there are other factors that contribute to one's quality of life. Social support, financial security, physical health, and one's immediate environment are just a few of the many factors that affect an individual's

degree of well-being. Although emotional regulation is a significant predictor, it is not the only one, according to the quite small R^2 value (0.198). To get a better grasp of the elements that impact young people's QOL, future studies might investigate how emotional regulation interacts with other internal and external variables. In conclusion, this study provides strong empirical evidence that enhancing emotional regulation skills can significantly improve the QOL in young adults. Mental health professionals, educators, and policymakers should consider integrating emotional regulation training into educational curricula, workplace wellness programs, and mental health interventions. By fostering emotional resilience and promoting adaptive coping strategies, young adults can improve their well-being and lead more fulfilling lives. Further research should explore longitudinal effects and interventions that enhance emotional regulation for sustained well-being.

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