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Viewing Meaning in Life in Three Generations: A Qualitative Study in Turkey

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ABSTRACT

The aim of this study was to understand meaning in life as a phenomenon in three different stages of life. Accordingly, this study aimed to investigate the similarities and differences in the way those in emerging, middle and late adulthood from different families view and experience meaning in life. In the 14 Turkish families who participated in this study, the children were in emerging adulthood, the parents in middle adulthood and the grandparents in late adulthood. The data were collected through one-on-one semi-structured interviews. Based on the questions of the semi-structured questionnaire, five main themes were identified, and the data were analyzed in view of these five themes. The main themes identified were: sources of meaning, meaningful life experiences, search for meaning, goals in life and present meaning. The emerged categories were presented separately for three developmental stages. The results were discussed in light of the literature and some suggestions were made for future research.

Issues such as meaning in life or the meaning of life have been the subject of philosophical thought and theology for centuries. With the observations of the Austrian psychiatrist Victor Frankl (1946/1984) in the Nazi concentration camps, this concept began to be studied in the field of mental health. Meaning in life, which is the subject of positive psychology, is the way people make sense of their lives, different from the absolute meaning of life (Duckworth et. al, 2005; Stillman et al., 2009). It can also be expressed as the degree to which people perceive meaning, value and mission in their lives (Steger et al., 2009).

Since Frankl, meaning in life has been conceptualized by researchers in various ways and has been studied together with different variables, following the development of measurement tools for the concept. When looking at some of the variables with which meaning in life is positively correlated, many positive variables can be found such as positive emotions (Chamberlain & Zika, 1988; Steger et al., 2006), psychological well-being (Steger & Frazier, 2005), hope (Mascaro & Rosen, 2005) and life satisfaction (Park et al., 2010). In light of these relationships, the importance of meaning in life from a positive psychological point of view stands out. It has also been reported that those who experience higher meaning in life show lower depression along with higher self-confidence (Steger et al., 2006; Zika & Chamberlain, 1992) and are better off even in poor health conditions than those who experience lower meaning in life (Dezutter et al., 2013; Sherman et al., 2010).

The contribution of theoretical explanations and various measurement tools based on self-report method is indisputable. However, a problem that this method poses is the issue of the reliability of self-reporting, especially when it comes to meaning in life. While people may cheerfully express that their lives are full of

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meaning, they can do this without evaluating the nature of a meaningful life or their own sources of meaning (Lambert et al., 2013). In fact, it has been suggested that while some sources provide more satisfaction than others (Peterson & Park, 2014), measurement tools rarely get beyond the question, “Is there meaning in this person’s life or not?” (Schnell, 2009).

Another seeming problem is that not much is known about the relationship between one’s meaning in life and developmental stage. As individuals are viewed from a holistic perspective, it is difficult to consider a complex concept such as meaning in life separately from their current developmental stage. Despite individual differences, each stage of life has its own characteristics (Feldman, 2012).

The number of studies that focus on meaning in life from a developmental point of view is limited and different findings can be observed. In addition to the studies that show higher presence of meaning in older age (Meier & Edwards, 1974; Reker, 2005), there are also findings that observe lower presence of meaning (Pinquart, 2002; Ryff & Essex, 1992). The theory of meaning in life that the existing measurement tools embrace can be considered as an important factor in these different findings. In fact, it has been argued that observing low meaning in older age in Ryff’s (1989) Psychological Well-Being Scale may be possible but misleading because meaning here is measured through purpose and one’s goals are likely to decline in older age (Steger et al., 2009). Moreover, it is known that emerging adulthood (ages 18-25) is characterized by discovery and development of identity, career and social roles (Arnett, 2000; Erikson, 1968). For these reasons, it can be expected that search for meaning would be higher in emerging adulthood and even more adaptive than in other stages of life. In fact, it has been shown that higher search for meaning is associated with lower well-being in later ages compared with emerging adulthood (Steger et al., 2009).

Despite potential differences between age groups, it has been stated that meaning in life is important for all developmental stages, starting from adolescence (Brassai et al., 2011; Reker, 2005). Concepts such as meaning, purpose and sources of meaning in life are important in terms of psychological well-being and life satisfaction, but it seems that quantitative methods fail to shed light on how people experience meaning in life. Moreover, the fact that many studies have been based on Western and undergraduate samples provides limited light on the phenomenon. Therefore, it seems necessary to examine meaning in life through qualitative studies, as suggested by previous research (see Demirbaş Çelik, 2016; Hill et al., 2013), and to do research that touches on different developmental stages and cultural contexts.

In the light of all this, the aim of the present study was to examine the views and experiences of individuals from three different Turkish generations in the same family concerning meaning in life. Qualitative research method is particularly likely to provide the opportunity to examine the phenomenon in a more flexible, realistic and rich way. With the qualitative research method, it is possible to go beyond the question “Is there meaning in one’s life or not?” and to shed light on many aspects of the phenomenon as to what meaningful life experiences look like, which elements play a role in adding meaning to life, what kind of goals there are in a meaningful life or what the nature of searching for meaning is. The present study is thought to be unique in that, while addressing all these aspects, it also does this by offering developmental comparisons with three different generations in Turkey. Although the qualitative method does not allow a statistical comparison between groups, it is possible to describe the reflections of the phenomenon in different stages of life through thematic comparisons. In addition, the fact that the individuals of different stages in the study come from the same family (an emerging adult being the child, a middle adult being the parent and a late adult being the grandparent of each family) makes the comparative inferences more valid by keeping the sociocultural structure relatively equal.

It is hoped that the study would (1) contribute to theoretical knowledge by describing the views and experiences of individuals from three different generations, that is, emerging adulthood, middle adulthood and late adulthood; (2) help develop a deeper understanding of meaning in life as a phenomenon and thus guide prevention and intervention studies in positive psychology; and (3) pioneer future studies, especially in Turkey on meaning in life.

Method

Participants

Criterion sampling method was used in the present study. The criterion was that the child in the family would be 18-25 years old (emerging adulthood), the parents 40-65 years old (middle adulthood), and the grandparents 65 years and older (late adulthood). Snowball sampling method was used to reach families that had met the required criteria. The snowball technique is used in situations in which it is difficult to reach the participants who meet the criteria determined by the researcher (Patton, 2005).

A total of 42 people from 14 families in the province of Izmir took part in the study. 27 participants were women and 15 were men. Of emerging adults, there were five women and nine men. Of middle adults, there were 10 females and four males. Lastly, of late adults, there were 12 females and two males. The average ages for the emerging, middle and late adults were respectively 21, 48 and 71. Detailed demographic information for each family is presented below in Table 1.

Table 1. Demographic Data of Study Participants

Family	Age	Gender	Education	Income	Family	Age	Gender	Education	Income
1	21	Male	Uni.	Middle	8	20	Female	Uni.	Middle
	50	Female	High S.	Middle		48	Female	Uni.	Middle
	72	Male	Primary S.	Middle		74	Male	Primary S.	Middle
2	18	Male	High S.	Middle	9	24	Male	Uni.	Middle
	49	Female	Middle S.	Middle		48	Male	High S.	Middle
	68	Male	Primary S.	Middle		77	Female	Primary S.	Middle
3	20	Male	Uni.	Middle	10	18	Female	High S.	Middle
	45	Female	Middle S.	Low		46	Female	High S.	Middle
	65	Female	Primary S.	Middle		70	Female	Primary S.	Middle
4	23	Male	Uni.	Middle	11	18	Female	High S.	Middle
	57	Male	High S.	Middle		43	Female	Uni.	Middle
	76	Female	Primary S.	Middle		64	Female	Primary S.	Low
5	23	Male	Uni.	Middle	12	20	Female	Uni.	Middle
	54	Female	High S.	Middle		45	Female	High S.	Middle
	74	Female	Primary S.	Middle		74	Female	Primary S.	Middle
6	21	Male	Uni.	Middle	13	22	Male	Uni.	Middle
	45	Female	Middle S.	Middle		47	Male	High S.	Middle
	75	Female	Literate	Middle		72	Female	Literate	Middle
7	18	Male	Uni.	Middle	14	23	Female	Uni.	Middle
	42	Female	Uni.	Middle		48	Male	High S.	Middle
	65	Female	Uni.	Middle		72	Female	Literate	Middle

Preparing The Interview Form

The study data were obtained through semi-structured interviewing method. The required ethics approval application was made to and obtained from the Research Ethics Committee of Dokuz Eylül University for the project “Viewing Meaning in Life in Three Generations: A Qualitative Study” (Üç Kuşakta Yaşamda Anlama Bakış: Nitel Bir Çalışma [Protocol no: 11]). The questions prepared to be used in the semi-structured interview form were created based on literature review and were also tested with pilot interviews. In addition, with the aim of improving the relevance and intelligibility of the interview questions, the draft interview form was sent to 10 academicians who completed their doctorate in guidance and counseling. The questions were revised according to their feedback, and then the form was finalized. The interview questions were as follows:

1. What generally comes to your mind when you think of the meaning of life?
2. What are the things that are currently giving meaning to your life?
3. Do you remember a specific moment when you found your life the most meaningful? How would you describe this moment? What was it that made this moment this meaningful?
4. Do you find yourself in search for meaning at times? In what situations? Can you talk about these times?
5. What goals do you have in your life right now? Both in the short run and long run?
6. If you were to evaluate the current level of meaning in your life, what would you like to say?

Data Collection

A certain day and time suitable for the families was determined for the interviews, and the interviews were carried out in the families' home environment. The participants were notified of the content, purpose and confidentiality principles of the research both verbally and in written form prior to the interviews and their written consent was obtained. Then, demographic information was collected, and interviews were conducted. The interviews were recorded by the first author using a smart phone, and these recordings were later transcribed. During the interview, participants were asked semi-structured interview form questions. Attention was paid to asking open-ended questions in the order determined for the reliability of the research, and interviews were completed between 10-30 minutes. All the data were collected in 2019-2020 before the COVID-19 outbreak.

Data Analysis

A phenomenological approach was used to analyze the data. The goal with this approach was to understand meaning in life as a phenomenon. For this purpose, sources and experiences that make participants' lives meaningful, their experiences with search for meaning, their life goals and current levels of meaning were investigated.

The transcribed data were analyzed via NVivo 11. At the very beginning of the data analysis process, a family was selected and analyzed independently by both the first author and the second author (first author's thesis supervisor). Before the analysis process, the five main themes that had been created according to the interview questions were determined by the authors and the first coding was done accordingly. Two different analyses based on a certain family (three participants in total) were compared with one another on NVivo 11, and inter-rater reliability was calculated. This calculation was made on NVivo 11, and Cohen's kappa (k) coefficient was found to be .80. Considering that values of .80 and above indicate strong inter-coder reliability, the reliability between coders in the study was quite good (McHugh, 2012).

Content analysis and descriptive analysis methods were used in analyzing the research data. Content analysis is mainly used in phenomenological designs, in which themes that may be hidden in the data are revealed and interpreted (Yıldırım & Şimşek, 2018). Descriptive method, on the other hand, involves organizing and tabulating the data (Glass & Hopkins, 1984). In order to increase reliability, the data were analyzed and

quantified on a frequency basis, and the obtained data were presented with direct quotations. Quotations were emphasized in italics and the participant from which the quotations are made was indicated in parentheses (e.g., P6.3.2). The first number in the code names refers to the family, the second refers to the generation (1 = late adulthood, 2 = middle adulthood, and 3 = emerging adulthood), and the third refers to the gender (1 = female and 2 = male). When names of certain people had been mentioned by any participant, these names were removed for confidentiality purposes and replaced by words such as my friend, son or daughter, depending upon how that person relates to the participant.

Results

The interview questions of the study were taken as themes, and the data were coded accordingly. The first two questions were handled within one theme and the remaining five questions were handled within five themes, and a total of five general themes were presented. These general themes are: sources of meaning, meaningful life experience, search for meaning, goals in life and present meaning. Salient categories that emerged were identified under these general themes. The five themes and the salient categories of the study can be seen below with their frequencies in Table 2. The salient categories are listed in descending order according to their frequency of utterance. Those with the same frequency of utterance are listed alphabetically.

Table 2. Main Themes And Salient Categories Of The Study Across Generations

Theme	Emerging Adulthood	Middle Adulthood	Late adulthood
1. Sources of meaning	Family (9), activities (8), friends (8), happiness (8)	Family (22), happiness (8), health (7)	Family (24), happiness (10), health (9)
2. Meaningful life experience	Success (5), personal growth (4), happiness (4), being with loved ones (4)	Having a child (9), freedom from hardship (4), happiness (4)	Being with loved ones (7), happiness (5), success (4)
3. Search for meaning	Existential inquiries (9), uncertainty of the future (6), being alone (5)	Frustration (7), contemplating the past (5), relational problems (4)	Frustration (6), absence of search (3), contemplating the past (3), being alone (3)
4. Goals in life	Career goals (24)	Goals for children (14), career goals (7), goals to restructure life (6)	Goals for children (9), physical health goals (8), decline in goals (8)
5. Present meaning	Half meaning (4), moderate meaning (3), low meaning (3), meaninglessness (2), high meaning (2)	High meaning (9), moderate meaning (4)	High meaning (7), half meaning (4), moderate meaning (3)

Note. Numbers between parentheses refer to the frequency of utterances/observations.

Theme 1: Sources of Meaning

The answers given by individuals regarding the meaning of their lives and what adds meaning to their lives were gathered under the theme of sources of meaning.

Emerging Adults.

Family. Family emerged as the most uttered source of meaning among emerging adults. Here, a married individual referred to his spouse, and the remainder emphasized their parents and siblings.

“When it comes to the meaning of life, family comes to my mind. Sharing love, respect, happiness and beautiful moments within family tie ...” (P3.3.2)

Activities. Secondly, the emerging adults mentioned activities as a source of meaning. Under this category were activities such as sports, music and movies.

“Music is giving meaning to my life right now. I'm young anyway. I am a 19-year-old university student. As with every university student, I, too, can say music.” (P3.3.2)

Friends. Another category that shared the second place for emerging adults was friends. Here, other than family members and romantic partners, the social environment of the participants was included.

“My social environment also gives me meaning. Because my circle of friends in general is very wide. Spending time with them makes me very happy.” (P13.3.2)

Happiness. Happiness also appeared as the second salient category that has the same frequency with activities and friends.

“If you have things in your life that you love, if you do things that make you happy, life is then meaningful for you.” (P10.3.1)

Middle Adults.

Family. As with emerging adults, family is the most salient source of meaning for middle adults as well. Here, most of the participants firstly mentioned their own children and then their spouses. Limited emphasis was placed on their parents and siblings.

“Of course, my family is my priority. My wife, my daughter... They are the things that give meaning to me... Their happiness makes me happy, too. Their being healthy makes me healthy, too.” (P8.2.1)

Happiness. Secondly, middle adult participants talked about happiness as a source of meaning.

“When I think of the meaning of life, what comes to my mind is to be happy and to be able to make people around you happy.” (P4.2.2)

Health. Another category that emerged along with happiness was health. One participant expressed his emphasis on health as follows:

“Life means a lot to me as long as I know that I am healthy or when I know that the people around me are healthy.” (P10.2.1)

Late Adults.

Family and happiness. Late adults emphasized their children and grandchildren while talking about family and stated that they generally experienced happiness through family members. Therefore, it can be said that the categories of family and happiness emerged together for late adults and were seen as the primary sources of meaning.

“A healthy life with my children and their being around me... I am happy with my family and children around me. I am happy with their presence.” (P4.1.1)

Health. Another source of meaning that was mentioned almost as much as happiness by late adults was health.

“When it comes to the meaning of life, health comes first to me. It is very important for people of our age.” (P5.1.1)

Theme 2: Meaningful Life Experience

The categories under this theme were identified by analyzing participants' experiences. Here, the aim was to mention the themes within the experiences of participants rather than the experiences themselves. However, common experiences that emerged quite frequently (such as having a child) have been presented in the table as a different category, and they were also treated under other categories like freedom from hardship and happiness. When participants mentioned more than one experience, all of these were included in the analysis.

Emerging Adults.

Success. A male emerging adult (P9.3.2) who emphasized his experience of success described the most meaningful moment of his life with the following sentences:

“It may be that moment when I got into this engineering program at university. Because I had not studied that hard since childhood until then. I only studied for this exam. That exam was actually worse than I expected, but when I got that result... That moment is one of those moments that I will never forget, that gives me meaning.”

When asked what made this moment so meaningful, the participant answered:

“I had always been unsuccessful until that day. It was like having passed an exam for the first time other than the driving license test.”

Personal growth. Personal growth emerged as another meaningful life experience in emerging adults. Here, the participants talked about experiences that changed their perspective, brought them awareness, and enabled them to learn some personal lessons.

A male participant (P7.3.2) mentioned some of his academic and romantic experiences that he had in the second year of high school. Despite their negativity, the participant stated that these experiences made great contributions to his character:

“At first, I started studying for the Mathematics Olympiad that year. That is why I am absolutely sure that that year contributed to my thinking. I also loved one person. It ended a little unhappy. I learned a lot. I felt that I was maturing myself, too. It created an awareness. I learned that people shouldn't be trusted that much. I used to see everyone as myself, but I learned that everyone is different.”

Happiness and being with loved ones. Happiness was another experience that emerged in meaningful life experiences. It seems difficult to say that the participants emphasized only happiness in their experiences, but it can be said that happiness frequently accompanied those meaningful experiences. Being with loved ones, which was identified as a different category, was mostly expressed with happiness and therefore, reported here under the same heading.

A male participant (P3.3.2) described an evening spent with family and relatives as follows:

“Everyone was happy. We didn't have any problems. Most of the financial problems in the whole family, among all my relatives, had been solved, and it was like a meal to celebrate it.”

Middle Adults.

Having a child, freedom from hardship and happiness. The experience that middle adults mentioned the most was having a child. Five out of 10 female participants and four out of four male participants stated this experience as the most meaningful experience of their lives. Having a child emerged alongside freedom from hardship and happiness. Participants' statements about the birth process revealed that the process was a crisis for some of the middle adults. It seemed that both the happiness of having a child and the end of this difficult process was quite meaningful for them.

“I could not give natural birth. It was always to and fro. We were going to the hospital all the time. And the hospital was far away. There was a distance of about 85 km. I wanted this process to end as soon as possible. Perhaps this could have triggered a little more. This trouble, this process ... We were going there every three days. We were constantly going for tests. Waiting to see if the baby is moving ... Of course, it makes one very happy to encounter such a beautiful thing as a result. I think that's the reason. The stress and boredom I was experiencing at that moment.” (P8.2.1)

Late Adults.

Being with loved ones and happiness. Late adult women mentioned that the most meaningful times of their lives were when they were together with their deceased husbands. Other answers included spending time with their family in childhood. The meaning in these experiences was also defined by the participants mostly through happiness.

A late adult female participant, who lost her spouse in the ninth year of her marriage, emphasized firstly the time spent with her husband, and another participant mentioned the time spent with her family in childhood:

“When I was with my husband... I lost him 28 years ago. I had very good days. The best twenty years of my life passed with him.” (P5.1.1)

“There are times in my first childhood. Those were special times for me. I had my mother and father... You are waiting for a mother who will come from work, prepare food for you, her love... They were very special days for me.” (P3.1.1)

Success. Another meaningful life experience that emerged for late adults was success. A female participant (P1.1.1), who had never attended school in her childhood, mentioned how she decided to go to a literacy course at the age of 59 and managed to receive a certificate. Seeing this as one of her most meaningful experience, the participant expressed her success and happiness as follows:

“My child, I have never studied. I went to school at the age of fifty-nine and got a certificate. It is my most meaningful day. I can start studying even now if I want to. I love it so much. It is the most meaningful thing. I got a certificate for reading and writing. I was very happy to have gotten it. I said I will do it and I went and did it. I went and got it when I was fifty-nine.”

Theme 3: Search for Meaning

Another phenomenon addressed in the present study was search for meaning. Participants were asked whether they would find themselves in search for meaning at times. 37 of the 42 participants said that they sometimes did find themselves in search for meaning.

Emerging Adults.

Existential inquiries and being alone. The emerging adults' experiences of search for meaning largely coincided with the existential inquiry category. The moments when they question their world views, fail to reach any conclusions and thus fail to find an absolute meaning were covered under this category. The category of being alone, as another salient category, emerged mostly simultaneously with existential inquiries. So, the emerging adults experienced search for meaning when they got into existential inquiries, and according to their statements, these inquiries usually occurred when they were alone.

“Yes, I find myself (in search of meaning). Like every human being, I think about why we exist, what the meaning of this struggle is, (since) we will die anyway, why we are working... When we come to the question “What is the purpose for our living?”, it always comes to a dead end. I can't find a solution, a way out. We put in so much effort... (It is) all wasted actually. As they say, this world is mortal... I don't know the why either, but we keep going.” (P6.3.2)

Uncertainty of the future. Emerging adults also talked about how uncertain their future looks. The answers addressed in this category had more to do with what awaits them in the future rather than questioning man's existence.

"You want to have a profession, you want to put your life in order, but none of them are clear in front of us. I'm making an effort, but will I be able to get there? ... One wants to see the result." (P6.3.2)

Middle Adults.

Frustration. The most salient category in middle adult's search experiences was frustration. Here, participants talked about their expectations that could not be met.

"You know, you labor or you try hard for something, or I don't know, something about your child... You try really hard, you sacrifice but you, you know, don't get rewarded. Like there is no result." (K7.2.1)

Contemplating the past. Middle adult participants also mentioned that from time to time, they reviewed their past and tried to envision what their current lives would be like, if they had taken some different steps. Participants, who were not fully satisfied with a certain point of their past, referred to these retrospective moments as an experience of searching for meaning.

"Well, when I look into the past, one experiences an "I wish" moment, even if it is just a little "I wish." After reaching a certain age, you think of the past. Sure, today is fine, too, but then I think like, if I had done this or that, maybe things would have been different." (P2.2.2)

Relational problems. Another salient category in middle adults' experience of searching for meaning was relational problems. Here, the participants talked about their problems with family and colleagues.

"I don't like being criticized for not being like others. Because I can't be like someone else. I am who I am. I want them to accept me as I am. Sometimes I have such problems in my workplace with my manager... Sometimes I have them with my child, too." (P8.2.1)

Late Adults.

Frustration. Like middle adults in the study, late adults also seemed to experience frustration when they were in search for meaning. Here, participants' experiences of sadness, distress and unhappiness were collected under this category. A female late adult (P12.1.1), who used to live in the same building with her daughter and grandchildren for a long time, told that her daughter's family moved to another place and that this distance saddened her.

"My grandchildren used to live upstairs. They moved out and left here. I got saddened by their leave at one stage. This makes me meaningless. Like why did this happen? I wish we lived closer. I wish we visited one another at nights, too..."

Absence of search. Another category under search for meaning was identified as absence of search. 5 out of 42 participants stated that they did not experience any search for meaning, and three of these were late adults.

"No, I lived life to the fullest." (P8.1.2)

"I am actually... Well, I am a positive person. You know, I'm healthy... You know... I always think of turning bad things into good." (P7.1.1)

Contemplating the past and being alone. Like middle adults, late adults also described contemplating their past as a meaning seeking experience. Participants seemed to experience these moments while they were alone.

"Sometimes, when financial means are short, I say like... would it be different if we had done this or that? Could we at least offer our children other opportunities?" (P3.1.1)

Theme 4: Goals in Life

Since goals play an important part in meaning in life, participants were asked about their short-term and long-term goals with the aim of investigating meaning qualitatively across generations. Here, answers were quite varied and expressed clearly by the participants. Their responses were analyzed with a descriptive perspective.

Emerging Adults.

Career goals. Both the short-term and long-term goals of the emerging adults were mostly career related. Participants mentioned goals such as: to complete their education, to do their desired profession, to settle abroad or to start a master's degree.

"My goal is to improve my GPA and start in a good company. Then I will do my master's degree. I will decide on the field I want to work in and then if it is a company that has branches abroad, I want to go work abroad." (P8.3.1)

Middle Adults.

Goals for children. Middle adults mostly emphasized their goals for their children. Children's happiness, being supported in their future dreams, completing their education, having a job and similar answers are in the category of goals for children.

"In truth, my short-term goals are a happy family and the continuation of the happiness of the family. To be able to guarantee the future of my children... And their success, of course. I have nothing else." (P2.2.2)

Career goals. Another category that stood out in the second generation was career goals. Participants especially mentioned their retirement plans at this point. Other goals expressed by the participants were to have a profession other than retirement plans and to advance in the occupation.

"I want to retire. My goal ahead of me is to retire." (P8.2.1)

Goals to restructure life. The third category, which emerged in relation to children and career-related goals, was the goals of middle adults to restructure their lives. The participants stated that after their children gained their independence, they would focus more on themselves, travel around and live a life away from the city with their spouses.

"As soon as my sons are able to go their own way, my whole thing... the meaning of my life then will be my wife and me. I will take time for both of us. Then, I'm going to say, 'to myself' a little bit." (P4.2.2)

Late Adults.

Goals for children. As in middle adults, the first goal category identified in the late adult group was goals for children as well. Compared to emerging adults and middle adults, the participants here in particular emphasized their "wishes" rather than goals. Their children and grandchildren seemed to be the base of their wishes. Goals such as witnessing the happiness of one's own children (and grandchildren), being visited by them, spending time with them, not being dependent or burden on them and the like were addressed in this category.

"(My goal is) to see my children happy, to watch their lives getting better all the time." (P7.1.1)

"Just that my children be happy. I want nothing else. Just that they care about me, too." (P14.1.1)

Decline in goals. Another salient category in the late adult group was decline in goals. When the participants were asked about life goals, they stated that they did not have many goals at this stage of life.

"I can no longer have goals. Why? (Because) I have achieved my goals. I'm seventy-four already. I have nowhere to go from now on." (P8.1.2)

"Oh son... How old are we now? What goals?" (P12.1.1)

Physical health goals. Another goal category that did not emerge in the other groups was physical health goals. Late adults thirdly mentioned goals about their health.

“My goal is health. That I can keep doing my physical exercises for a few more and have good health.” (P5.1.1)

“Well, it is health. That is what I ask from God.” (P2.1.1)

Theme 5: Present Meaning

Participants' views on their present level of meaning were discussed under this theme. Participants sometimes rated their opinions with adjectives, sometimes made Likert-type statements, and sometimes gave answers based on percentages. The answers were gathered on a common ground and presented under the categories of meaninglessness, low meaning, half meaning, moderate meaning and high meaning.

Emerging Adults. More than half of the emerging adults (nine out of 14) viewed their lives as half meaningful, lowly meaningful, or meaningless.

Half meaning. The reason why the first category was presented with the word “half” is that the participants stated that they had some meaning in their lives, but it was incomplete until some things happened.

“I don't think it's exactly meaningful actually. I mean, there are people who give meaning to my life, but I think it will be much more meaningful when I fully get a job, make a life for myself and take my own economic freedom.” (P10.3.1)

Moderate meaning. A male participant (P5.3.2) who emphasized his future plans and current situation stated that he found his life meaningful:

“Of course, my life has meaning. I am happy now. I have future plans. School will end. I will move and I will live abroad...”

Low meaning. Another male participant (P7.3.2), who approached the topic with existential questioning, stated that his own life did not mean much when viewed from a cosmic perspective. The statement of the participant considered under the low meaning category was as follows:

“(My life) doesn't make much sense right now. Because when we look at it considering all humanity, I wonder what humanity would lose if I was not there... So my life is a little bit meaningless.”

Meaninglessness. Another female participant (P12.3.1), who was coming from a similar perspective, stated that her life had no meaning:

“I think, my life is very meaningless. It can be meaningful when you look at it with all its goals and efforts, but I'd say it has no meaning looking from the outside.”

High meaning. Another emerging adult (P3.3.2), referring to the importance of the decisions he was about to make at this stage of his life, told that this stage and therefore his entire life were very meaningful for him:

“It is really meaningful for me right now. Because I'm laying the foundation of my life. In the slightest mistake, I would throw away all the next 40 years – if I'll have them, of course. I'm not sure if my peers think that way about it. But this stage is very important for me.”

Middle Adults. When middle adults' responses were analyzed, it was observed that nine out of 14 participants considered their lives highly meaningful, four moderately meaningful and one meaningless.

High meaning. Most of the participants stated that they viewed their lives highly meaningful and referring to their sources of meaning, they generally emphasized family and happiness here as well.

“My life is very meaningful right now... I think I now live a much better life than I imagined. I wouldn't have imagined a life like this. I have comfort. Comfort in an economical sense and also, I am very comfortable in my family relationships. I have a husband who loves me and understands me. I have a child that I value very much.” (P8.2.1)

Moderate meaning. The participants who did not emphasize high meaning but viewed their lives as meaningful were included in the category of moderate meaning.

“Right now, I am pretty close to the last steps. I am at a point where I can understand that life has a meaning, that it is something worth living.” (P3.2.1)

Late Adults. Late adults' answers on their present meaning in life were gathered under the categories of high meaning, half meaning and moderate meaning. While seven out of 14 participants found life highly meaningful, four participants saw in it a half meaning and the remaining three found it moderately meaningful.

High meaning. Like middle adults, the late adult group also generally found life meaningful. Parallel to sources of meaning, participants sometimes emphasized their children, grandchildren and health.

“(My life is) quite meaningful for me. I'm fine, healthy, happy. Of course, there are things I feel sad about, but this is life. I think, God willing, everything will pass with goodness and beauty. I have children. I must always be there for them. I praise God for the fact that I live.” (P7.1.1)

Half meaning. Some late adults, on the other hand, referring to their family and health problems, stated that their lives were meaningful to some extent. In order to preserve the name of the category in emerging adulthood, these answers were also handled under “half meaning.” As a matter of fact, participants mentioned some shortcomings here as well.

“These days I just want to have a calm mind. I mean this is what I want. I don't want sadness. But it is impossible not to be sad right now. Grandchildren and so on... Calmer, happier... This is what I am looking for but it's hard to find. So, I would say (I have) medium level (of meaning). It's neither bad nor good.” (P13.1.1)

Moderate meaning. Other late adults, on the other hand, responded that their lives were meaningful, even though they did not specify high level of meaning.

“Every day has its own beauty. Every morning has its own sunrise. I think every age in life has its own beauty. I am happy with my old age. If I am healthy, if I am walking, you should be thankful for all of this.” (P1.1.1)

Discussion

The above-mentioned findings for three different generations under five main themes (that is, sources of meaning, meaningful life experiences, search for meaning, goals in life and present meaning) showed both commonalities and distinctions from a developmental point of view. Therefore, they were discussed separately.

Common Categories

The salient categories which emerged commonly in all developmental groups were relationships, happiness and success. This observation seems to be consistent with other studies in the literature. Relationships (Debats, 1999; Bhattacharya, 2011; Hill et al., 2013), happiness (Reker & Wong, 1988; Robak & Griffin, 2000) and success (O'Connor & Chamberlain, 1996; Hill et al., 2013; DeWitz, 2014) are variables that have been shown in many different qualitative and quantitative studies on meaning in life. In particular, positive relationships and concepts such as environmental control, autonomy, and efficacy that can be considered under the category of success play a part in different well-being theories (see Deci & Ryan, 2000; Ryff, 1989; Seligman, 2018) and theories of meaning in life (see Baumeister, 1991).

What was particularly interesting here was that these relationships were largely family relationships. Although not as frequent in the emerging adult group as in the middle and late adult groups, all three groups stated that family was the primary source of meaning for them. Again, when examined from a developmental perspective,

different studies on meaning in life have shown that relationships with spouses and children and relationships with parents and relatives are at the forefront in middle adulthood (Fave et al., 2013; O'Connor & Chamberlain, 1996). In addition, a study conducted with people over 65 years of age (Krause, 2007) found that emotional support from family among different types of social support was associated with higher meaning in life. However, that family was seen as the primary source of meaning in emerging adulthood along with other stages may indicate cultural emphasis. In this developmental stage that is characterized by identity discovery and close relationships (Erikson, 1968), self-focus becomes prominent (Arnett, 2000). Therefore, it seems a little unlikely that emerging adults will see their families as the primary source of meaning. However, this study was performed in a Turkish context, where familial and social ties are strong and collectivistic characteristics are stronger (Hofstede, 2001). However, both quantitative (Lambert et al., 2010; Lambert et al., 2012) and qualitative studies in the American context (Hill et al., 2013) also suggest that family remains an important source of meaning in emerging adulthood. Researchers argued that individuals in this transitional period may be returning to their families repeatedly to find support and direction (Lambert et al., 2010).

Another important finding was that happiness emerged both as a source of meaning and as an emotion accompanying meaningful life experiences. Previous research has shown that happiness is related to meaning in life in all three developmental periods (see Dezutter et al., 2013; Robak & Griffin, 2000; Steger et al., 2006; Zika & Chamberlain, 1992). However, while meaning in life is a eudaimonic variable, happiness is a hedonic variable, and the overlaps and differences of these concepts are still debated. The study seems to support the discussion that meaning in life will almost always bring happiness (Reker & Wong, 1988). By explaining the relationship between meaning in life and positive affect with learning, researchers argued that if the experience of meaning emerges with positive emotions over and over again, the connection between these two variables becomes strongly etched in memory via these learning experiences (Clare et al., 2000). In this way, thinking about one triggers thoughts about the other and the two become conceptually related (King et al., 2006). Moreover, since this study comes from a phenomenological point of view, it can be said that cultural understanding of meaning or happiness may change and the on-going debate on eudaimonic vs. hedonic well-being should include cultural context. The degree to which a variable is eudaimonic or hedonic could have more to do with experiential differences rather than conceptual differences.

Developmentally Distinct Categories

In addition to the findings mentioned above, the most important findings in this study were the seeming reflections of developmental stage on meaning in life.

Health as a source of meaning in middle and late adulthood. In the middle and late adult groups, health emerged as a source of meaning, different from the emerging adults. Given the characteristics of these stages, this observation is expected. In middle adulthood, which is defined as the period of gains and losses, the individual tries to adapt to various physical and psychological changes, while at the same time fulfilling his professional and family responsibilities (Lachman, 2004). Therefore, it is very important for middle adults to maintain their physical health to maintain their quality of life. Throughout late adulthood, health quality further decreases, and different health problems arise. In the light of all these, health becoming more important in one's meaning in life in older ages can be explained by the fact that older ages are when health problems begin to emerge. Previous research showed that a positive relationship between physical health and meaning in life exists (for a meta-analysis, see Czekierda et al., 2017) and that health plays a major role in older adults' life satisfaction and meaning in life (Arslan, 2004; Ebersole, 1998). Therefore, it can be argued that health is a component of meaning in life but will not be seen as a primary source of meaning until health issues arise.

Existential inquiries in emerging adulthood and search for meaning manifested with future anxiety. When emerging adults' meaning seeking experiences were examined, the salient categories were identified as existential inquiries, uncertainty of the future and being alone. These salient categories reflect the key characteristics of emerging adulthood. Questioning one's own world and shaping one's personality through personal convictions are some of the tasks performed in this stage (Santrock, 2011). It has been discussed that as a stage characterized by discovery of identity, emerging adulthood may also be linked to search for meaning in life (Steger et al., 2009). Participants seemed to struggle with holistic meaning (see Park, 2010) and therefore

were led to search for meaning. It can be said that a meaningful life is not only a purposeful life, but also a life that can be justly explained by one's worldview. This is especially relevant for emerging adulthood.

The second salient category in the emerging adults' search for meaning was uncertainty of the future. Uncertainty is another important factor in the lives of emerging adults (Arnett, 2006). In this transitional period, they experience many academic, social and personal changes, and these changes pose an uncertainty for the emerging adult. Participants seemed to experience these changes from various angles, and they were particularly concerned about whether their education will provide tangible feedback. Previous qualitative findings showed that the theme of uncertainty about the future emerged with the theme of meaninglessness (Bhattacharya, 2011). Hence, it can be argued that the ability to cope with uncertainty seems even more necessary in emerging adulthood. Indeed, many theorists agree that perceived loss of control will shake the individual's meaning in life (Baumeister, 1991; Deci & Ryan, 2000; Ryff, 1989).

Search for meaning manifested with relational problems in middle adulthood. Unlike late adults, another experience that middle adult associated with the search for meaning was their relational problems. As the categories of family, friends and being with loved ones, which emerge under the themes of sources of meaning and meaningful life experience, support the importance of relationships for a meaningful life, relational problems under the theme of search for meaning further strengthens the emphasis on relationships. According to the participants, while continual satisfaction in relationships makes life meaningful, having problems in relationships seems to lead the individual to search for meaning. This observation seems to be in line with previous research that showed that relationships are an important source of meaning for different age groups (Debats, 1999; Prager, 1996) and that lack of satisfaction in relationships is likely to lead to search for meaning (Steger et al., 2008). That middle adults described relational problems as an experience leading to search for meaning may be due to the quantity of relationships in this developmental stage. Especially in family context, a parent stays in contact with not only their children, but also their spouse and their own parents. Apart from this, the individual also maintains other relations in and outside the workplace. Therefore, compared to late adults, it seems more likely that a negativity in the relationships of middle adults who have many social roles will lead to a search for meaning.

Search for meaning in middle and late adulthood manifested with frustration and negative contemplation of the past. Unlike emerging adults, the first category that stood out in middle and late adults' experience of search for meaning was frustration. These two groups did not mention any existential inquiries or future anxiety, but rather the situations in which their expectations were not met. In other words, the participants seemed to search for meaning when their expectations about themselves, other people or life in general were not satisfied. This observation can be interpreted in opposition to the category of happiness in meaningful life experiences. It can be said that while positive emotions may lead one to see life more meaningful (King et al., 2006), negative emotions are likely to result in the opposite effect. Research showed that increasing sadness, fear and shame is indeed related to increasing search for meaning (Steger et al., 2006). It seems that various negative emotions can be experienced within the phenomenon of disappointment and therefore lead the individual to search for meaning.

Similar emotions seemed to be experienced also when the same participants review their own pasts. Within the category of contemplating the past, participants expressed their "I wish" moments. It is known that with aging, adults seem to focus more on the past (Santrock, 2011). When the statements of participants are examined, it can be seen that this retrospective look generally focuses on negative experiences. Participants associated the search for meaning in life particularly with past experiences that they were not satisfied with. Previous research seems to support this observation that search for meaning is associated with focusing on past negativity (Steger et al., 2008). Therefore, it can be argued that a meaningful life requires contentment not only with the present, but also with the past. As argued by Baumeister in his four needs for meaning (1991), it appears that for a meaningful life, one must be able to positively justify his own actions, and these actions also include past experiences.

Decreasing search for meaning in late adulthood, though sometimes manifested with loneliness. Some late adult participants (and two middle adults) stated that they never find themselves in search for meaning. This observation can be explained by maturation, in that, it is expected that the "why" questions forming one's

world view will be relatively completed throughout emerging adulthood (Kroger et al., 2010). In addition, there is more diversity of experiences in emerging adulthood than middle and especially late adults who have already accomplished certain goals in life (Ebner et al., 2006). Therefore, it can be said that they are less likely to view the future as that uncertain and less likely to experience future anxiety.

When asked about their search for meaning in life, the late adult participants also mentioned the times when they are alone. The late adults in this study mostly included either retired or widowed participants and therefore, it can be argued that they were more likely to search for meaning in these times compared to middle adults. And also, unlike emerging adults, it seems that loneliness itself created a problem for late adults, rather than the existential questions that being alone provokes. This observation further supports the important role relationships play in meaning in life, particularly in late adulthood where physical and social losses and loneliness become characteristics of the stage (Feldman, 2012).

Career goals in emerging adulthood. The emerging adults of the study seemed to have largely career goals. Given the developmental tasks of the stage and that all these participants continued their education, this observation is to be expected. In this stage of possibilities (Arnett, 2000), individuals tend to have many both short and long-term goals, many of which are career-related (Creed et al., 2009). However, this result can also be seen as extension of Turkey's current situation. Especially with the increase in population and the number of universities in the last twenty years in Turkey, unemployment is rising (Yeşilyaprak, 2016). According to the Turkish statistics in 2020 (the time of data collection), youth unemployment rate was about 25% (TÜİK, 2020). It is also helpful to note that career uncertainty is considered as a characteristic of the 21st century and therefore, in the midst of this uncertainty, it can be argued that emerging adults are likely to seek safety in the first place.

Goals for children in middle and late adulthood. The middle adults in the study mostly mentioned their goals for their children. In both sources of meaning and meaningful life experiences, it seemed that children of middle adults were at the center of their lives. Other goals that followed were career goals and goals to restructure their lives. These three elements seem to clearly reflect middle adult developmental tasks conceptualized by Havighurst (1972). To help young children become responsible and happy adults, to achieve and maintain vocational satisfaction, to nurture the marriage relationship and to develop appropriate leisure activities are the developmental tasks in middle adulthood (Sugarman, 2001). All the salient goals mentioned by the middle adults of this study remarkably coincided with these developmental tasks. Goals and concerns about the future of children and their career have also been supported by studies in various countries (Cross & Markus, 1991; Ulusoy, 2020).

Similar to middle adults, late adults also mentioned goals for their children (and grandchildren) as their primary goals. However, the participants took a more passive position in these goals. In general, middle adults talked about supporting the building of their children's future, whereas late adults talked about seeing the happiness of their own children and grandchildren. In other words, it can be said that middle adults described themselves in the role of a "helper", while late adults were more in the role of a "spectator." This observation seems to point to the changing life roles in personal goals across developmental stages. Research have shown that while goal orientation at younger ages moves toward personal development, at later ages this orientation focuses more on maintenance and reducing loss (Baltes, 1987; Ebner et al., 2006).

Decline in goals in late adulthood. Goals for maintenance and reducing loss can be seen in late adults' following salient goals that are identified as physical health goals and decline in goals. The participants mentioned that after this age, they no longer had many goals and basically just wanted to be healthy. This decline in goals that the participants expressed is an important finding. As argued, scales on meaning in life that contain goal-oriented items (e.g., Ryff, 1989) could yield developmentally problematic results (Steger et al., 2009), since in this stage of role loss (Feldman, 2012), individuals have fewer goals to achieve (Lawton, et al., 2002). This qualitative study seems to further support this discussion.

Low meaning in life in emerging adulthood. Only one-third of the participants in emerging adulthood stated that they had a really meaningful life, while the rest mentioned that they experience meaninglessness, low meaning or half meaning. Especially when compared with the responses of the participants in the other two

generations, emerging adults was the group that expressed the least meaning in the study. As can be seen in their expressions about their search for meaning, the emerging adults here told that they could not make sense of the world and its events, and that the future was very uncertain for them at the moment. This observation seems to point to the cognitive dimension of meaning in life that is emphasized theoretically (see Reker & Wong, 1988). Being able to comprehend life at a cognitive level and coming up with satisfactory answers with regards to why everything exists seem quite important for a meaningful life (Reker & Wong, 1988), which also has been conceptualized as holistic meaning (Park, 2010) and cosmic meaning (Yalom, 2018). In accordance, the expressions of the participants in this study about meaninglessness or low meaning revealed their difficulties in making sense of life from a cosmic perspective.

The dominance of expressions reflecting cosmic meaning issues in the emerging adult group indicates that it would be indeed helpful to approach the phenomenon from a developmental perspective. In this stage, individuals enter into a discovery (Arnett, 2000; Erikson, 1968), becoming preoccupied with their identity, careers and social roles and reevaluating the ready-made meaning systems coming from family and the society (Dezutter et al., 2013). It has been argued that search for meaning may be in a sense normative in emerging adulthood, leading them to a higher search in comparison to middle and late adults (Steger et al., 2009). The qualitative findings in the current study are thought to strengthen this debate.

Moreover, the uncertainty about achieving personal goals seemed to pose a problem for the participants. Therefore, in addition to cosmic meaning, a motivational fulfillment can be seen as another important factor in meaningful life. Since emerging adults tend to have many career goals, their experience of uncertainty and anxiety may lead them to experience a life that is not complete (as in half meaning). The concepts of competence and self-efficacy are likely to play a special role in the lives of emerging adults.

High meaning in life in middle and late adulthood. Middle adult and late adult participants mostly stated that their lives were very meaningful and emphasized their children (and grandchildren) and happiness. In terms of frequency, the middle adult group was the group that expressed the highest meaning in this study. Although it is not possible to indicate a statistical difference, there is a remarkable difference in the expressed meaning levels between these two generations (middle and late adults) and the third generation (emerging adults). The fact that the middle and late adults are likely have accomplished many social and professional goals and that certain goals are still present may provide satisfaction and meaning for the participants. The participants' sources of meaning and their goals in life seemed to support this observation. High meaning in life in older ages has also been shown by previous research (Heintzelman & King, 2014; Pinquart, 2002; Steger et al., 2009).

Summary

The present qualitative study showed that the participants in emerging, middle and late adulthood mostly and commonly emphasized relationships, happiness and success in both their sources of meaning and meaningful life experiences. As discussed above, these findings were in line with previous qualitative and quantitative research (Bhattacharya, 2011; Debats, 1999; De Vogler & Ebersole, 1981; Hill et al., 2013, Reker & Wong, 1988; Robak & Griffin, 2000, DeWitz, 2014; Hill et al., 2013; O'Connor & Chamberlain, 1996). The fact that these findings were obtained from participants from three different generations of the same family is thought to further strengthen the emphasis on these concepts.

However, it can be argued that the most important findings of this study were the reflections of developmental stage characteristics on meaning in life. In addition to the common salient categories, salient categories that differed across generations also emerged in this study and are as follows: an emphasis on health as a source of meaning in middle and late adulthood; emerging adults seeking meaning together with existential inquiries and uncertainty of the future and, in their own words, experience low meaning in their lives; middle and late adults experiencing lower search for meaning and stating that these searches are generally related to relational problems and past negativity; emerging adults having largely career-related goals, middle adults having goals for their children and late adults having likewise goals for their children/grandchildren and also decreasing goals; and finally, highest meaning shown firstly by middle adults and then late adults. Most importantly, having selected participants of different developmental stages from the same family should in a sense exclude many social, economic and cultural variables and allow making comments on a developmental basis.

Suggestions

Future research is needed to examine meaning in life, particularly using mixed designs, in which quantitative and qualitative methods are combined. As a matter of fact, one major limitation of the study is that the qualitative findings cannot be generalized. Also, for practical purposes, snowball sampling method was used to find families as participants who would meet the required criteria. One family mentioning another family as potential participants was likely to cause the participant group to be less heterogeneous and thus further complicate interpreting the findings. This could explain the reason for another limitation of the study, which was that the study was largely based on a single perceived socioeconomic status (that is, middle). Moreover, among the reached families, the majority of the late adults were female (11 out of 14 participants). It should also be noted that the study was conducted in the province of Izmir, that is, Western Turkey. Findings across the Turkish land could yield different results as Turkey hosts various cultural climates, of which Izmir is only one minority. Therefore, the results of this study should be considered within the context of the particular sample. So, future research can investigate meaning in life across socioeconomic statuses and genders as well as different cultural contexts.

Another limitation might have to do with accessing thoughts about meaning in life. Upon asking Question 1 in the interview form (“What generally comes to your mind when you think of the meaning of life?”), many participants had to take their time to answer it, explicitly indicating that this was not an easy question. It could be discussed whether a preparation phase prior to the interview would in fact confound or help the research.

In addition, many different variables such as family, worldview, efficacy, career concerns, health, and life goals seem to be important in meaning in life, all of which can be the focus of both psychological research and therapeutic practices. Finally, considering the reflections of developmental stage characteristics in this study, it would be helpful for future research on meaning in life to include developmental and especially longitudinal examinations.

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References

- Arnett, J. J. (2000). Emerging adulthood: A theory of development from the late teens through the twenties. *American Psychologist*, 55, 469-480. <https://doi.org/10.1037/0003-066X.55.5.469>
- Baltes, P. B. (1987). Theoretical propositions of life-span developmental psychology: On the dynamics between growth and decline. *Developmental Psychology*, 23, 611–626. <https://doi.org/10.1037/0012-1649.23.5.611>
- Baumeister, R. F. (1991). *Meanings of Life*. Guilford Press.
- Bhattacharya, A. (2011). Meaning in Life: A Qualitative Inquiry into the Life of Young Adults. *Psychological Studies*, 56(3), 280- 288. <https://doi.org/10.1007/s12646-011-0091-0>
- Brassai, L., Piko, B. F., & Steger, M. F. (2011). Meaning in life: Is it a protective factor for adolescents’ psychological health? *International Journal of Behavioral Medicine*, 18, 44-51. <http://dx.doi.org/10.1007/s12529-010-9089-6>
- Chamberlain, K. & Zika, S. (1988). Religiosity, life meaning and wellbeing: Some relationships in a sample of women. *Journal for the Scientific Study of Religion*, 27(3), 411-420. <https://doi.org/10.2307/1387379>
- Creed, P. A., Fallon, T., & Hood, M. (2009). The relationship between career adaptability, person and situation

- variables, and career concerns in young adults. *Journal of Vocational Behavior*, 74(2), 219-229. <https://doi.org/10.1016/j.jvb.2008.12.004>
- Cross, S. & Markus, H. (1991). Possible selves across the life span. *Human Development*, 34(4), 230–255. <https://doi.org/10.1159/000277058>
- Czekierda, K., Banik, A., Park, C. L., & Luszczynska, A. (2017). Meaning in life and physical health: Systematic review and meta-analysis. *Health Psychology Review*, 11(4), 387–418. <https://doi.org/10.1080/17437199.2017.1327325>
- De Vogler, K. L. & Ebersole, P. (1981). Adults' meaning in life. *Psychological Reports*, 49(1), 87–90. <https://doi.org/10.2466/pr0.1981.49.1.87>
- Debats, D. L. (1999). Sources of meaning: an investigation of significant commitments in life. *Journal of Humanistic Psychology*, 39(4), 30–57. <https://doi.org/10.1177/0022167899394003>
- Deci, E. L. & Ryan, R. M. (2000). The “what” and “why” of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 11(4), 227–268. https://doi.org/10.1207/S15327965PLI1104_01
- Demirbaş Çelik, N. (2016). Üniversite öğrencilerinin yaşamda anlam ve yaşam amaçları arasındaki ilişki. *Mediterranean Journal of Humanities*, 4(1), 133-141. <https://doi.org/10.13114/MJH.2016119294>
- DeWitz, S. J. (2004). *Exploring the relationship between self-efficacy beliefs and purpose in life* [Doctoral dissertation, The Ohio State University].
- Dezutter, J., Waterman, A. S., Schwartz, S. J., Luyckx, K., Beyers, W., Meca, A., ... Caraway, S. J. (2013). Meaning in life in emerging adulthood: A person-oriented approach. *Journal of Personality*, 82(1), 57-68. <https://doi.org/10.1111/jopy.12033>
- Duckworth, A. L., Steen, T. A., & Seligman, M. E. P. (2005). Positive psychology in clinical practice. *Annual Reviews of Clinical Psychology*, 1(1), 629-651. <https://doi.org/10.1146/annurev.clinpsy.1.102803.144154>
- Ebersole, P. (1998). Types and depth of written life meanings. In P. T. P. Wong & P. S. Fry (Eds.), *The human quest for meaning: A handbook of psychological research and clinical applications* (p. 179–191). Lawrence Erlbaum Associates Publishers.
- Ebner, N. C., Freund, A. M., & Baltes, P. B. (2006). Developmental changes in personal goal orientation from young to late adulthood: From striving for gains to maintenance and prevention of losses. *Psychology and Aging*, 21(4), 664–678. <https://doi.org/10.1037/0882-7974.21.4.664>
- Erikson, E. H. (1968). *Identity: Youth, and crisis*. Norton.
- Fave, A. D., Brdar, I., Wissing, M. P., & Vella-Brodrick, D. A. (2013). Sources and motives for personal meaning in adulthood. *The Journal of Positive Psychology*, 8(6), 517–529. <https://doi.org/10.1080/17439760.2013.830761>
- Feldman, R. S. (2012). *Discovering the life span* (2nd ed.). Pearson.
- Frankl, V. E. (1946/1984). *Man's search for meaning (Rev. and updated)*. Washington Square Press/Pocket Books.
- Glass, G. V., & Hopkins, K. D. (1984). *Statistical methods in education and psychology*. (2nd ed.). Prentice-Hall.
- Heintzelman, S. J. & King, L. A. (2014). Life is pretty meaningful. *American Psychologist*, 69, 561–574. <https://doi.org/10.1037/a0035049>
- Hill, C. E., Bowers, G., Costello, A., England, J., Houston-Ludlam, A., Knowlton, G., ... Thompson, B. J. (2013). What's it all about? A qualitative study of undergraduate students' beliefs about meaning of life. *Journal of Humanistic Psychology*, 53(3), 386–414. <https://doi.org/10.1177/0022167813477733>
- Hofstede, G. (2001). *Culture's consequences: Comparing values, behaviors, institutions, and organizations across nations*. Sage Publications.
- King, L. A., Hicks, J. A., Krull, J. L., & Del Gaiso, A. K. (2006). Positive affect and the experience of meaning in life. *Journal of Personality and Social Psychology*, 90(1), 179–196. <https://doi.org/10.1037/0022-3514.90.1.179>
- Krause, N. (2007). Longitudinal study of social support and meaning in life. *Psychology and Aging*, 22(3), 456–469. <https://doi.org/10.1037/0882-7974.22.3.456>
- Kroger, J., Martinussen, M., & Marcia, J. E. (2010). Identity status change during adolescence and young adulthood: A meta-analysis. *Journal of Adolescence*, 33(5), 683-98.

<https://doi.org/10.1016/j.adolescence.2009.11.002>

- Lachman, M. E. (2004). Development in midlife. *Annual Review of Psychology*, 55(1), 305-331. <https://doi.org/10.1146/annurev.psych.55.090902.141521>
- Lambert, N. M., Baumeister, R. F., Stillman, T. F., & Fincham, F. D. (2012). Family and meaning: Examining the four needs for meaning as mediators. *International Journal of Existential Psychology and Psychotherapy*, 4(1), 14.
- Lambert, N. M., Stillman, T. F., Baumeister, R. F., Fincham, F. R., Hicks, J. A., & Graham, S. M. (2010). Family as a salient source of meaning in young adulthood. *Journal of Positive Psychology*, 5, 367-376. <https://doi.org/10.1080/17439760.2010.516616>
- Lambert, N. M., Stillman, T. F., Hicks, J. A., Kamble, S., Baumeister, R. F., & Fincham, F. D. (2013). To belong is to matter: sense of belonging enhances meaning in life. *Personality and Social Psychology Bulletin*, 39(11), 1418-1427. <https://doi.org/10.1177/0146167213499186>
- Lawton, M. P., Moss, M. S., Winter, L., & Hoffman, C. (2002). Motivation in later life: Personal projects and wellbeing. *Psychology and Aging*, 17, 539-547. <https://doi.org/10.1037//0882-7974.17.4.539>
- Mascaro, N. & Rosen, D. H. (2005). Existential meaning's role in the enhancement of hope and prevention of depressive symptoms. *Journal of Personality*, 73(4), 985-1014. <https://doi.org/10.1111/j.1467-6494.2005.00336.x>
- McHugh, M. L. (2012). Interrater reliability: The kappa statistic. *Biochemia Medica*, 22(3), 276-282.
- Meier, A. & Edwards, H. (1974). Purpose-In-Life test: Age and sex differences. *Journal of Clinical Psychology*, 30, 384-386. [https://doi.org/10.1002/1097-4679\(197407\)30:3<384::AID-JCLP2270300351>3.0.CO;2-V](https://doi.org/10.1002/1097-4679(197407)30:3<384::AID-JCLP2270300351>3.0.CO;2-V)
- O'Connor, K. & Chamberlain, K. (1996). Dimensions of life meaning: A qualitative investigation at mid-life. *British Journal of Psychology*, 87(3), 461-477. <https://doi.org/10.1111/j.2044-8295.1996.tb02602.x>
- Park, C. L. (2010). Making sense of the meaning literature: An integrative review of meaning making and its effects on adjustment to stressful life events. *Psychological Bulletin*, 136(2), 257-301. <https://doi.org/10.1037/a0018301>
- Park, N., Park, M., & Peterson, C. (2010). When is search for meaning related to life satisfaction? *Applied Psychology: Health and Wellbeing*, 2(1), 1-13. <http://dx.doi.org/10.1111/j.1758-0854.2009.01024.x>
- Patton, M. Q. (2005). Qualitative research. In B.S. Everitt & D.C. Howell (Eds.). *Encyclopedia of statistics in behavioral science* (p. 1633-1636). Wiley. <https://doi.org/10.1002/0470013192.bsa514>
- Peterson, C. & Park, N. (2014). Meaning and positive psychology. *International Journal of Existential Psychology and Psychotherapy*, 5(1), 2-8.
- Pinquart, M. (2002). Creating and maintaining purpose in life in old age: A meta-analysis. *Ageing International*, 27(2), 90-114. <https://doi.org/10.1007/s12126-002-1004-2>
- Prager, E. (1996). Exploring personal meaning in an age-differentiated Australian sample: Another look at the Sources of Meaning Profile (SOMP). *Journal of Aging Studies*, 10(2), 117-136. [https://doi.org/10.1016/S0890-4065\(96\)90009-2](https://doi.org/10.1016/S0890-4065(96)90009-2)
- Reker, G. T. (2005). Meaning in life of young, middle-aged, and older adults: Factorial validity, age, and gender invariance of the Personal Meaning Index (PMI). *Personality and Individual Differences*, 38, 71-85. <http://dx.doi.org/10.1016/j.paid.2004.03.010>
- Reker, G. T. & Wong, P. T. P. (1988). Aging as an individual process: Toward a theory of personal meaning. In J. E. Birren & V. L. Bengtson (Eds.). *Emergent theories of aging* (p. 214-246). Springer Publishing Co.
- Robak, R. W. & Griffin, P. W. (2000). Purpose in life: What is its relationship to happiness, depression, and grieving? *North American Journal of Psychology*, 2, 113-120.
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069-1081. <https://doi.org/10.1037/0022-3514.57.6.1069>
- Ryff, C. D. & Essex, M. J. (1992). The interpretation of life experience and well-being: the sample case of relocation. *Psychology and Aging*, 7, 507-517. <https://doi.org/10.1037//0882-7974.7.4.507>
- Santrock, J. W. (2011). *Life-span development* (13th ed.). McGraw-Hill.
- Schnell, T. (2009). The Sources of Meaning and Meaning in Life Questionnaire (SoMe): Relations to

- demographics and well-being. *Journal of Positive Psychology*, 4, 483-499. <http://dx.doi.org/10.1080/17439760903271074>
- Sherman, A. C., Simonton, S., Latif, U., & Lew, B. (2010). Effects of global meaning and illness-specific meaning on health outcomes among breast cancer patients. *Journal of Behavioral Medicine*, 33(5), 364-377. <https://doi.org/10.1007/s10865-010-9267-7>
- Steger, M. F. & Frazier, P. (2005). Meaning in Life: One Link in the Chain from Religiousness to Well-Being. *Journal of Counseling Psychology*, 52(4), 574–582. <https://doi.org/10.1037/0022-0167.52.4.574>
- Steger, M. F., Frazier, P., Oishi, S., & Kaler, M. (2006). The meaning in life questionnaire: Assessing the presence of and search for meaning in life. *Journal of Counseling Psychology*, 53(1), 80-93. <https://doi.org/10.1037/0022-0167.53.1.80>
- Steger, M. F., Kashdan, T. B., Sullivan, B. A., & Lorentz, D. (2008). Understanding the search for meaning in life: Personality, cognitive style, and the dynamic between seeking and experiencing meaning. *Journal of Personality*, 76(2), 199–228. <https://doi.org/10.1111/j.1467-6494.2007.00484.x>
- Steger, M. F., Oishi, S., & Kashdan, T. B. (2009). Meaning in life across the life span: Levels and correlates of meaning in life from emerging adulthood to older adulthood. *The Journal of Positive Psychology*, 4(1), 43-52. <http://dx.doi.org/10.1080/17439760802303127>
- Stillman, T. F., Baumeister, R. F., Lambert, N. M., Crescioni, A. W., DeWall, C. N., & Fincham, F. D. (2009). Alone and without meaning: Life loses meaning following social exclusion. *Journal of Experimental Social Psychology*, 45(4), 686-694. <https://doi.org/10.1016/j.jesp.2009.03.007>
- Sugarman, L. (2001). *Life-span development: frameworks, accounts and strategies*. (2nd ed.). Psychology Press.
- TÜİK. (2020, January). *İşgücü İstatistikleri*. Retrieved from www.tuik.gov.tr
- Ulusoy, Y. (2020). Orta yaş dönemi bireylerin içinde buldukları yaş dönemlerine ilişkin algılarının incelenmesi. *Elektronik Sosyal Bilimler Dergisi*, 19(74), 587-601. <https://doi.org/10.17755/esosder.544967>
- Yalom, I. D. (2018). *Varoluşçu psikoterapi* (Z. Babayiğit, Trans.). Pegasus Yayınları.
- Yeşilyaprak, B. (2016). Mesleki rehberlik ve kariyer danışmanlığına giriş. In *Mesleki rehberlik ve kariyer danışmanlığı kuramdan uygulamaya* (8th ed., p. 1-41). Pegem Akademi.
- Yıldırım, A. & Şimşek, H. (2018). *Sosyal bilimlerde nitel araştırma yöntemleri*. (11th ed.). Ankara: Seçkin Yayınevi.
- Zika, S. & Chamberlain, K. (1992). On the relation between meaning in life and psychological well-being. *British Journal of Psychology*, 83(1), 133–145. <https://doi.org/10.1111/j.2044-8295.1992.tb02429.x>



A Field Study on the Causes and Psycho-Social Consequences of Social Network Fatigue: The Case of Türkiye

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ABSTRACT

Social network usage has started to decrease since 2011 for various reasons. Research in the literature has revealed the concept of social network fatigue, which has physical and psychological consequences due to different reasons. Recent studies have emphasized that social network fatigue is dangerous for users' individual well-being, and researchers have suggested further studies due to the newness of the concept. Based on the recommendations in the literature, this research was carried out with 1100 participants from all over Turkey in a quantitative design to determine the causes and psycho-social consequences of social network fatigue. Participants in the research information on social network fatigue, social network overload, social network victimization and socio-demographic characteristics was collected. In the research constructed with the stressor-strain-consequence (SSO) model it has been understood that social network overload and social network victimization are predictors of social network fatigue. In the study, the social network fatigue experienced by the participants it has been determined that it causes physical and psychological consequences such as sudden anger, physical fatigue, exhaustion, wear-out, anger, regret, dissatisfaction, boredom, overwhelm, restlessness and stress.

Meeting the social/psychological needs of the individual is a necessity, and people benefit from the new socialization opportunities offered by technology to meet these needs (Sarioğlu & Özgen, 2018). Since 2007 Facebook popular use of social networks with it made it necessary to determine who, in what way, how it affects and its results. The understanding that platforms have positive contributions to people in general, and that they are a great interaction tool, especially in terms of socialization, has been accepted in the first period of use (Solmaz, Tekin, Herzem & Demir, 2013; Çalışkan & Mencik, 2015). Recently, it is seen that the researches (Şahin & Gülnar, 2016; Gülnar & Acar, 2021; Kazaz & Acar, 2021) on platforms have shifted from the purpose and motivation of use in a more critical approach to the effects it creates in psycho-social areas. The rapidly increasing use of networks globally has created an agenda about new forms of communication that the traditional and their psychological/sociological effects on people (Şahin & Gülnar, 2016). According to Küçükali and Serçemeli (2019), the intensive use of social networks affects almost every aspect of social life such as health, education and labor relations are only a few of these parts. In addition to these, different psycho-social effects such as depression, stress, addiction, exhaustion and anxiety have also been emphasized in recent social network studies (Kumcağız, Özdemir & Demir, 2019).

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The psycho-social effects of the use of social networks, as stated earlier have caused users to move away from the platforms that the number of active users of Facebook decreased after MySpace in 2011 prompted market researchers to conduct field research and the result was described as “social network fatigue” (Goasduff & Pettey 2011; Rainie, Smith & Duggan 2013; Xiao & Mou, 2019). Since 2014 academic circles started to investigate the causes of social network fatigue and its effects/results on users. The general reasons for the declines in social networks are based on personal-psychological, such as mood personal use, personal preference, social welfare and environmental/external such as information, communication, socialization, system characteristics reasons (Maier, Laumer, Eckhardt, Andreas & Weitzel 2014; Ravindran, Kuan & Lian 2014; Bright, Klieser & Grau, 2015; Lee, Son & Kim, 2016; Cao & Sun, 2018). It has been suggested that social network overload, which is claimed to be the external/environmental determinant of social network fatigue (Cao & Sun, 2018; Lee et al., 2016; Shi, Yu, Wang, Cheng, Cao, 2020) causes negative effects in individuals. Yu et al. (2019) social network overload as defines it as an uncomfortable situation caused by many environmental stimuli and the user cannot cope with them. Guo et al. (2020) state that excessive social network loading may cause physical and psychological fatigue, stress and anxiety in users. Cao et al. (2019) recommend offers examining social network victimization as another environmental/external stimulus in future research, emphasizing that psycho-social individual effects may occur in users who are bullied on platforms. Social network victimization refers to the user who is negatively affected by the cyberbullying/bully and their situation (Dredge, Gleeson & Garcia, 2014; Ophir, Asterhan & Schwarz, 2019; Oksanen, Oksa, Savela, Kaakien & Ellonen, 2020). Social networks are accepted as the most important online environments where cyberbullying is done easily (Küçük & Şahin, 2015). It is accepted that social network overload and social network victimization cause negative individual effects on the user, physically and psychologically. However related studies (Xiao & Maou, 2019; Cao & Sun, 2018; Yu et al., 2019; Shi et al., 2020; Fu, Li, Liu, Pirkkalainen & Salo, 2020) state that the causes and psycho-social consequences of social network fatigue are too new to be discussed with clear judgments, and different studies are needed in different countries. From this point of view, this research is built was designed on the problem of the causes of social network fatigue in Turkey and its psycho-social consequences what it's are in a quantitative design.

Psycho-Social Effects of Social Networks on Users

People are psychosocially affected by social network use in 3 different ways; collectively, interpersonally and individually (Sürü, 2019). This effect can be explained in the following sub-headings:

Mass Impact of Social Networking

New communication technologies have been rapidly adopted by people and started to be used in every field (Gülner, 2016). According to Castells (2016), new communication technologies directed people in the early periods, but especially with the emergence of network societies, the masses began to dominate virtual environments. In the studies it has been emphasized that the mass effects of social networks have both positive and negative. It is stressed that the effects of social networks on the masses are generally concentrated on political events. Social networks, which are the communication tool of the 21 st century have been used as a key tool against power or administration, especially in political events, have provided the opportunity to become stronger. Social networks and especially activism movements have shifted to virtual environments (Konuk, 2019). Arab Spring can be given as an example first in virtual organizations realized with social networks. During the Arab Spring that started in 2010, social networks provided a two-way flow of information, and the masses organized on the platforms provided physical resistance in Tahrir Square. Platforms played a key role in the overthrow of oppressive regimes from the beginning to the end of the Arab Spring events. Social networks have helped the masses freely express their thoughts. Social networks were also used extensively in the Gezi Park events and the July 15 coup attempt in Turkey. Social networks have been accepted as the 5th power in Türkiye.

In another study (Şahin, Hamamcı & Türk 2022), not knowing what Covid-19 is increased users' fear levels, causing anxiety and depression. The findings of Gülner and Acar's (2021) research also showed parallelism

with the findings of Şahin et al. (2022). Kazaz and Acar (2021), emphasized that during the Covid-19 period, it was aimed to create mass fear in the process with fake news produced on platforms, especially on Twitter.

The Effect of Social Network Use on Interpersonal Relationships

Interpersonal communication, which is a form of communication between at least 2 people, starts in the close circle of the individual such as family, spouse, relatives. However, networks used in interpersonal communication with education, institutions and workplaces have changed the communication skills of the individual and offered a new/different alternative to face-to-face communication (Şahin & Gülnar 2016). The rapid change in technology has reduced the distance and people have started to prefer online communication to traditional communication (Ergen & Akçay, 2021).

In a study examining the effects of platforms in interpersonal communication (Gülnar & Öztat, 2020), the relationship between internet and social networks usage in family-to-face communication was determined. In a study conducted with 1108 married couples living in Konya, it was revealed that WhatsApp, one of the social network types, reduces the frequency of face-to-face communication. On the other hand, Kazaz and Gülnar (2016) revealed that face-to-face communication provided stronger bonds than internet communication. Aktaş and Çopur (2018) determined that the perceived stress level of women among couples using social networks is lower than that of men. In a study conducted by Gürkan and Demirel with 363 adolescents in 2021, it was determined that the family, friend and dating relationships of those who use social networks deteriorated and their social anxiety levels were high.

Individual Impact of Social Network Use

Studies have shown that the use of social networks has harmful effects as well as providing benefits to individuals. In the research carried out by Cerrah in 2016, it was determined that criticisms of social networks were gathered in 6 different categories. These also point to the dynamics of research in the psycho-social use of networks. According to Cerrah (2016), criticisms of social networks can be listed as follows

Uncontrollability. It is the lack of control and authority. This situation affects the instant dissemination of unrealistic information and triggers the formation of a harmful perception about the disseminated subject.

Multiple identity or without identity. It is the case that the platform user hides identity in real environments in networks or creates too many new identities by having more than one account. This situation may result in negative situations such as deterioration of mental health on users.

Elimination of privacy regarding private life. Other users can interfere with these areas and unethical behaviors can emerge.

Negative effects on family relations. Conflicts are experienced due to the use of social networks and this process results in infidelity or divorce.

Negative effects on people's psychology. Sleep disorders, anxiety, depression, unpleasant and aggressive behaviors occur with the use of social networks, especially with the increase in the duration and frequency of use.

Asocialization. There is a lot of sharing in online environments reduces the feeling of interacting with other people in physical life.

As social networks are constantly on the agenda and become an indispensable element of life, the most important of the individual results in the use of the platform is addiction (Ergen & Akacan, 2021). The most obvious result of information technologies is people's ever-increasing desire for network use. Bilgilier (2018) found a significant relationship between social media addictions and socio-demographic characteristics of students studying at the faculty of communication, emphasizing that social network addiction in female students resulted in loss of control. At the end of the study, the researcher listed some suggestions in order to reduce the social network addiction levels of the students. These taking up a hobby, cooperation between educational institutions and the media in conscious use of networks. In another study aimed at the individual

effects of social networks, Balcı and Baloğlu (2018) investigated the relationship between platform addiction and depression. In the research, participants it was determined that 10.9% of them had severe depression, 22.2% of the were addicted to social networks. As a result, it was determined that depression was a positive predictor of social network addiction, and it was emphasized that the level of depression did not differ according to gender.

The widespread use of the internet and social networks has brought along not only addiction but also stress, loneliness, and life satisfaction studies, which are indicators of mental health. It is seen that researchers have focused mainly on these issues in recent years. Gülnar (2016) revealed that there is a positive and significant relationship between the stress levels of the participants and their internet use. In addition, the positive relationship between general internet use and general stress level strengthened the existence of the relationship. Gülnar (2016) named this result obtained at the end of the research as techno-stress. However, stated that this type of stress can occur not only with the use of technological tools, but also with the overload of information in the tools.

Social networks are often criticized in the literature as users reflect themselves differently from what they are and distance them from the perception of reality (Sarioğlu & Özgen). Because it is thought that this perception of alienation may cause individual psycho-social effects such as addiction, stress and depression. In all the studies, it has been found that the negative aspects of social networks are now emphasized rather than the positive aspects, and as a result, it has mass, interpersonal and individual psychosocial effects.

Purpose of the Research

The main purpose of the research is to determine the causes and psycho-social consequences of social network fatigue. Researchers (Zhang, Zhao, Lu, Yaobin & Yang, 2016; Dhir, Yassotorn, Kaur & Chen, 2018; Cao & Sun, 2018; Whelan, Islam & Brooks 2019; Lin, Lin, Ture & Xu, 2020) founded that social network overload and social network victimization associated with social network fatigue. It has been revealed that it causes and makes unwanted situations evident in the user. Zhang et al. (2016); Dhir et al. (2018); Cao and Sun, (2018); Whelan et al. (2019) and Lin et al. (2020) pointed out that social network overload has effects on individuals in terms of stress, physical/psychological fatigue, and technostress. Cao et al. (2019) determined in their research that cyber victimization can also cause social network fatigue but drew attention to the need for more research. From this point of view, the following research questions and hypotheses were written:

Research Question 1: Is there a significant relationship between participants' social network overload and social network fatigue?

Research Question 2: Is there a significant relationship between participants' social network victimization and social network fatigue?

Research question 3: What are the consequences of participants' social network fatigue?

Method

The research is structured with a quantitative design that systematically examines facts and events according to certain principles and aims to reveal the relationships between variables. Depending on this purpose, the sub-headings will include the type of research, its universe/sample, data collection tools, findings and analysis.

Research Design

Research design was determined as explanatory (causal) research. Among the quantitative research designs, the relational survey model was used. Relational screening model is a quantitative research design that aims to determine the existence and degree of change between two or more variables (Bekman, 2022). Relational screening model studies, the existence of the relationship between dependent and independent variables is investigated. It is that all researches (Dhir et al., 2019; Cao et al., 2019; Fu et al., 2020 Malik, Dhir, Kahur, & Johri, 2020) conducted to determine the causes and effects of social network fatigue on individuals are carried out in the light of a model. Based on the results of the research findings the predictive model of this research was predicted as the stressor-strain-outcome model (SSO), and research questions were written. The model

developed by Koeske and Koeske (1989) was first adapted to social network fatigue studies by Dhir et al. (2018) in communication sciences. The stressor-compulsion-outcome model is explained as follows; (1) A stressor is basically all the external/environmental factors that are the source of stress in the person. (2) Strain is an emotional/physical behavioral change caused by stressors. (3) The result are strains that occur due to physical/mental strain behavior change caused by stressors. Thus, social network overload and social network victimization (stressor); social network fatigue (strain) and technostress/exhaustion (outcome).

Participants

In the study, the dataset collected from the participants was coded into the analysis program called SPSS 25. In the research firstly frequency and descriptive analysis techniques were used to describe the socio-demographic characteristics of the participants. It was understood that 55.5% of the participants were women, 44.5% were men, and the average age was $\bar{X}=31.16$. It was found that the education levels of the participants were elementary and secondary school 13.9%; high school 28.1%; 2-year college 10.0%; bachelor's degree 36.3%; higher degree 11.7%.

Cluster sampling technique was used to represent this study conducted by online survey method to 60.863.705 people aged 18 and over in Turkey and it was understood that at least 1067 people should be included in the study. However, despite the probability of participants giving incomplete answers, the sample was determined as 1100.

Data Collection Tools

The information about the scales used in the research is given below in the headings.

Social Network Fatigue (SNF) Scale. The social network fatigue (SNF) scale was created in its original form by Maier et al. 2012 from a total of 18 items. The highest or lowest score that can be obtained from the scale is not specified. As a result of the item loading it was determined that the scale items were collected in 4 sub-dimensions. These are social overload, emotional exhaustion, intention to satisfy and future use. The internal consistency ratios of it is calculated as the sub-dimensions of the Cronbach alpha; $\alpha=.94$; $\alpha=.97$; $\alpha=.88$; $\alpha=.86$. In the Turkish adaptation study conducted by Ünal (2019), she was determined that the scale, unlike Maier and others (2012) is collected in 5 sub-dimensions. These are listed as overload, emotional exhaustion (9 items), aggressiveness (3 items), satisfaction (3 items) and future use (3 items). In the research of Ünal (2019) calculated the internal consistency coefficients $\alpha=.86$; $\alpha=.92$; $\alpha=.81$; $\alpha=.90$ and $\alpha=.48$. It is also the Cronbach alpha coefficient of the scale in which it was determined $\alpha=.90$. In the original version of the scale, 7-point likert (1= completely disagree; 7= completely agree), in Ünal (2019) research 5-point likert (1= completely disagree; 5=completely agree) has been used. In addition, in this research listed as Cronbach alpha coefficients of the sub-dimensions of social network fatigue in the sub-dimension emotional exhaustion; $\alpha=.846$; aggressiveness $\alpha=.681$; satisfaction $\alpha=.849$ and intention of future use $\alpha=.647$. Cronbach's α coefficient level; $0 < R^2 < 0.40$ is not reliable; $0.40 < R^2 < 0.60$ is low reliability; $0.60 < R^2 < 0.80$ is quite reliable and $0.80 < R^2 < 1.00$ is high reliability (Uzunsakal & Yildiz, 2018). Based on this, social network fatigue emotional exhaustion ($\alpha=.846$) to satisfy with ($\alpha=.849$) high reliability of sub-dimensions; aggressive use ($\alpha=.681$) with the intention of future use ($\alpha=.647$), on the other hand, has been found to be quite reliable. The Cronbach alpha coefficient α for the reliability calculation for the 18 items of it was found to be $\alpha=.804$.

Excessive Social Network Uploading (ESNU) Scale. When the literature is examined, it is seen that different dimensions of the excessive social network loading scale have been developed by different researchers. The first scale development study on excessive social network loading was carried out by Maier and others in a random way in 2012 when the item pool was being created. Maier and others re-evaluated 6 items related to social network fatigue, which they developed in 2012, in the context of social load. Cronbach's Alpha coefficient of the social burden scale $\alpha=.90$. The highest or highest lowest that can be obtained from the scale is not specified, and no information about it is not given. Zhang et al. (2016) have improved the system and information loads in their research. Zhang et al. (2016) calculated Cronhs Alpha coefficient in their research; $\alpha=.81$, $\alpha=.86$; structure validity $\alpha=.88$, $\alpha=.90$. In 2018, Cao and Sun claimed that the burden of communication can also be added to excessive social network load. Structure validity of the communication load it was

determined as .94 and the sample of 5 items. It was determined that he explained .92. The adaptation of the scale to Turkish was made by Acar (2022). The scale consists of a total of 16 items and 4 different sub-dimensions. The overall Cronbach's α coefficient of the scale is .830. Cronbach's Alpha coefficient of the sub-dimensions; information overload (IO 3 items) $\alpha=.602$, loading of communication (CO 5 items) $\alpha=.580$, overload of sociability (SO 5 items) $\alpha=.672$ and the overload of the system (SYSO 3 items) is $\alpha=.563$ it is calculated as.

Social Network Victimization (SNV) Scale. The scale of Facebook victimization (SFV), developed by Kwan and Skoric in 2013, was designed to determine the level of students between the ages of 13 and 17 who are affected by virtual bullying behaviors they experience while using Facebook. The scale of Facebook victimization consists of a total of 17 items and one dimension. The Cronbach alpha coefficient of the scale is $\alpha=.89$. The highest or highest score that can be obtained from the scale is not specified, and no information about it is not given. The adaptation study of the scale of Facebook victimization into Turkish was carried out by Küçük and Şahin in 2015. Şahin and Küçük (2015) calculated as the Cronbach Alpha coefficient of the scale $\alpha=.91$. In this research, for the 17 items of the Cronbach Alpha coefficient calculated as $\alpha=.916$

Socio-Demographic Information Form. The questions in this part of the questionnaire were prepared by the researchers in order to describe the participants' age, gender, education information.

Data Analysis

Multiple regression analysis was used to test the hypotheses. Because multiple regression analysis was used in the study because the dependent variable (social network fatigue) was examined based on 2 independent variables (excessive social network uploading and social network victimization). Firstly, the Skewness and Kurtosis values of all 3 scales were examined separately. The standard deviation scores of the scales were also calculated. The obtained Skewness and Kurtosis values were calculated as follows, in order; social network fatigue: $-.059$; $.650$, excessive social network uploading: $.146$; $.965$, social network victimization: $.602$; $.410$. All results with Kurtosis and Skewness values between -1.5 and $+1.5$ indicate that the data set is distributed (Tabachnick & Fidell, 2013; Erbay & Beydoğan, 2017). According to these results, it is seen that all scales are in normal distribution. Thus, it has been understood that parametric tests can be used to explain research questions.

In the research, frequency and average techniques from descriptive statistical analyses were used to reveal the socio-demographic characteristics of the participants. In addition, correlation analysis was used to determine the direction, severity and meaning of the relationship between the variables. Decisional statistical analyses were also performed to determine the relationship between dependent and independent variables. These are one-way analysis of variance (ANOVA) and multiple regression analysis. ANOVA is performed to determine whether the difference between two Decoupled or multiple sample averages is significantly different from zero. In addition, the factors should also be in a normal distribution. Multiple regression analysis is a parametric analysis that allows estimating the dependent variable based on 2 or more independent variables (Gülnar, 2017).

Results

In the first stage, the correlation coefficients between the dependent and independent variables were examined. It is understood that there is a moderate relationship between social network fatigue and social network victimization ($r=.344$ $p > .05$) when the sub-dimensions of social network fatigue and excessive social network uploading are examined were moderately correlated social network fatigue and information overload ($r=.462$ $p > .05$); social network fatigue and loading of communication ($r=.477$ $p > .05$); social network fatigue and overload of sociability ($r=.284$ $p > .05$) and social network fatigue and the overload of the system ($r=.304$ $p > .05$). Thus, it was determined that there was a relationship between dependent and independent variables. After the correlation coefficients between the variables were determined, the multiple regression model summary below was examined. It is understood that 35% of the corrected R^2 value social network fatigue is explained by the independent variables social network overload and social network victimization. In order to determine autocorrelation between the independent variables, the Durbin Watson value was examined, and

since this value was found to be 1.972 between 1.5 and 2.5, it was understood that there was no correlation between the autocorrelation, in other words, the error term and the consecutive values.

The ANOVA test results were also evaluated to determine whether the multiple regression model was significant. As a result of the ANOVA test, the multiple regression model was found to be explanatory because the p significance level value corresponding to the F value was small (sig., .000, $p < .005$). It was understood that the independent variables explained the dependent variable in a meaningful way.

Table 1. Multiple Regression Model/Independent Variables

Model	Non-standardized Coefficients		Standardized Coefficients	Collinearity Statistics			
	b	Std. Error	Beta	t	sig.	Tolerance	VIF
(Constant)	1,396	,067		20,749	,000		
SNV	,089	,020	,125	4,547	,000	,774	1,292
IO	,184	,017	,298	10,956	,000	,791	1,264
CO	,174	,018	,267	9,462	,000	,739	1,354
SO	,070	,017	,111	4,132	,000	,810	1,235
SYSO	,041	,018	,060	2,224	,026	,801	1,249

The contributions of the independent variables in the multiple regression model to the model were examined. As seen in Table 1, there is a significant relationship (sig., .000, $p < .005$) between social network fatigue and social network victimization. Again, the sub-dimensions of social network fatigue and excessive social network uploading; information overload (sig., .000, $p < .005$); loading of communication, (sig., .000, $p < .005$); overload of sociability, (sig., .000, $p < .005$); It is seen that there is a significant relationship (sig., .000, $p < .005$) between overload of the system (sig., .026, $p < .005$).

From this point of view, it is understood that all sub-dimensions of excessive social network uploading, and social network victimization have a significant effect on social network fatigue. When the beta coefficients (β) were examined, it was revealed that the most effect on social network fatigue was performed by information overload ($\beta = .289$) and the least effect on overload of the system ($\beta = .060$). Finally, the existence of multicollinearity among the variables in the model and whether there is a correlation problem were examined. Thus, VIF value and tolerance values were examined.

If the VIF criterion value is greater than 10 and the tolerance value is less than 0.2, it is indicated that there is an important multicollinearity problem between the independent variables (Akdi, 2011). When Table 1 is examined, $VIF > 10$; it is seen that the tolerance value is less than < 0.2 . Thus, it is understood that there is no multicollinearity correlation problem between social network fatigue and social network victimization independent variables. So, it was determined that both independent variables in the model would remain in the equation. Thus, it was determined that all dimensions of social network overload and social network victimization were predictors of social network fatigue.

Discussions

In the study, the relationship of social network fatigue of participants with excessive social network loading and social network victimization was examined.

In the study, firstly, the causes of participants' social network fatigue were examined depending on the independent variable of excessive social network loading. The result of the research that excessive social network loading is an external has been compared to other studies (Zhang et al., 2016; Cao & Sun, 2018; Yu et al., 2019; Shi et al., 2020; Whelan, et al., 2019; Lin et al., 2020; Fu et al., 2020) it was also confirmed in this study.

In the research, the causes of the social network fatigue detected of the participants were also examined depending on the social network victimization independent variable. It has been found that this independent variable collected under one dimension is also an external premise that causes social network fatigue. This result supports the research of Cao et al. (2019).

As a result of the analyses conducted in this study, it has been found that excessive social network loading and social network victimization explain social network fatigue in a meaningful way. In addition, the research Maier et al. (2012), Lee et al. (2016), Cao and Sun (2018), Fu et al. (2019), Guo et al. (2020), Lin et al. (2021), Lin et al. (2020), Yu et al. (2019), Zhang et al. (2016), Shi et al. ((2020) showed similarities with the findings. In a more explicit expression, the results of the psychological and physical conditions that became evident as a result of the participants' social network fatigue were revealed. The results of social network fatigue and its effect on the participants are explained in three parts by combining the theoretical framework of the SSO model, based on all the empirical findings given above. **(1) Stressor.** The stressors of this research are social network overload and social network victimization were predicted, and the results obtained from the analysis findings also supported the theoretical framework of stressors in the SSO model. When both variables were examined, it was determined that users were exposed to a source of stress with external interventions without being under the control of their own subjective use. Information, communication activities, technical equipment of the system and socialization efforts on the platforms have been a source of stress for users. Zhang et al. (2016) and Yu et al. (2019) also examined social network fatigue within the framework of SSO stated that overloading of sociability, information and communication is a source of stressors. Based on all the empirical results obtained, social network overload in this research; Information overload, communication overload, sociability overload and system overload were the first stressor, and social network victimization was the second stressor. **(2) Strain.** In this study, it was understood that social network overload and social network victimization, that is, have been stressed social network fatigue as a form of strain. In the research, it was determined that there are physical/mental strains such as emotional exhaustion, aggressive behavior, satisfaction and future network use intention due to stressors. As in this study, Zhang et al. (2016), Ravindran et al. (2014), Fu et al. (2020) and Cheng, Liu, Li and Hu (2023) also found that participants faced network fatigue due to social network overload stressor in their studies. **(3) Result.** The results of the concept of social network fatigue, which was examined from the perspective of SSO, were interpreted in this study in terms of strains depending on the strain behavior caused by stressors. These (1) “Technostress”. Technostress as a concept is a modern age disease that emerges in the process of adapting to new technologies. In this study it was determined that technostress caused both physical and mental deterioration in the participants. The results of this research were supported by other studies (Gülnar, 2016; Zhang et al., 2016; Lugman et al., 2017, Shi et al., 2019; Lin et al., 2021), and it was determined that technostress became evident as a strain. In addition, it was understood that the technostress strain was physically and psychologically distributed in this study. In this research, physical strains; it can be perceived visually such as sudden irritability, physical fatigue, exhaustion, weariness, anger, increased pulse and heart rhythm. Psychological strains, on the other hand, clustered in the sub-dimension of satisfaction and showed themselves as regret, dissatisfaction, boredom, depression, restlessness, and stress. (2) “Exhaustion”. In addition to the findings of Yu et al. (2019), it was also supported in this research that exhaustion, which is used in the sense of losing its efficiency and power, is a psychological strain that occurs as a result of social network fatigue. The concept indicates that the existence of something is still in the mind informal, but it is decreasing. Exhaustion, which was detected as a strain of social network fatigue in this study, showed that the platforms were still used, but the desire to use decreased due to the presence of stressors. In this study, it became clear that as a result of users' social network fatigue, their intention to use the platforms began to deplete like Dhir et al. (2018), Yu et al. (2019), and Shi et al. (2019) supported the findings. According to the results obtained from the findings of this research, users' social network overload by stressors and their difficulties by being exposed to social network victimization indicate that they begin to burn out, as Fu et al. (2020) determined. This sign is expected to conclude the discontinuous use of the platforms in users.

Suggestions

It should get rid of the classic topics (such as addiction, motivation, advertising, health) in social network research that will be carried out especially in Türkiye. Since when the literature on social network fatigue was

examined, it was seen that all the publications were structured by researchers from other countries. Since social networks are now accepted as metaverse areas, repeating the same research will cause the literature to remain constant.

Social network fatigue should be examined especially in terms of uses and gratifications approach. With this approach, it is predicted that one of the possible consequences of social network fatigue will become “dissatisfaction”.

This research expanded but did not terminate control variables. In future studies, control variables will be included again and diversified.

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References

- Acar, N. (2022). *The antecedents of social network fatigue: A model proposal*. Retrieved From Higher Education Institution.
- Akdi, Y. (2011) *Matematiksel istatistiğe giriş*. Ankara: Gazi Kitabevi.
- Aktaş, M. & Çopur, Z. (2018). Influence of social media usage on the stress among. *International Journal of Education Technology and Scientific Researches*, 3(6), (142-153).
<https://dergipark.org.tr/tr/pub/ijetsar/issue/40311/423865>
- Balcı, Ş. & Baloğlu, E. (2018). The relationship between social media addiction and depression: “A survey among university youth”. *Galatasaray University Faculty of Communication*, (29), 209-234.
<http://iletisimdergisi.gsu.edu.tr/tr/pub/issue/41518/500860>
- Bekman, M. (2022). Quantitative research method in public relations: relational survey model. *Meriç International Journal of Social and Strategic Research*, 6(16), 238-258.
- Bright, L. F., Klieser, S. B. & Grau, S. L. (2015). Too much Facebook? an exploratory examination of social media fatigue. *Computers in Human Behavior*, (44), 148-155.
<https://www.sciencedirect.com/science/article/pii/S0747563214006566>
- Cao, X. & Sun, J. (2018). Exploring the effect of overload on the discontinuous intention of social media users: an S-O-R perspective. *Computers in Human Behavior*, 81, 10-18.
<https://www.sciencedirect.com/science/article/pii/S0747563217306738>
- Castelles, M. (2016). *İletişim gücü* (çev. Ebru Kılıç). İstanbul Bilgi Üniversitesi Yayınları: İstanbul.
- Cheng, X., Liu, L., Li J. & Hu, Z. (2023). COVID-19 lockdown stress and problematic social networking sites use among quarantined college students in china: a chain mediation model based on the stressor–strain–outcome framework. *Addictive Behaviors*, (146), 1-12.
<https://www.sciencedirect.com/science/article/pii/S0306460323001806>
- Cho, J., Ramgolam, D. I., Schaefer, K. M., & Sandlin, A. N. (2011). The rate and delay in overload: an investigation of communication overload and channel synchronicity on identification and job satisfaction. *Journal of Applied Communication Research*, 39(1), 38–54.
<https://psycnet.apa.org/record/2011-01838-00>.
- Cerrah, L. (2016). Some Corporate Social Media and Interaction and Critical Approach to Social Media. *Journal of Graduate School of Social Sciences*, 20(4), 1393-1414.

- <https://dergipark.org.tr/tr/pub/ataunisosbil/issue/26966/283404>
- Çalışkan, M. & Mencik, Y. (2015). The new face of a changing world: Social media. *Academic Perspective International Refereed Journal of Social Sciences*, (50), 254-277. <https://dergipark.org.tr/tr/pub/abuhsbd/issue/32944/366052>
- Dhir, A., Yassotorn, Y., Kaur, P. & Chen, S. (2018). Online social media fatigue and psychological wellbeing- a study of compulsive use, fear of missing out, fatigue, anxiety and depression. *International Journal of Information Management*, (40), 141-152. https://e-tarjome.com/storage/panel/fileuploads/2019-04-22/1555928922_E10949-e-tarjome.pdf
- Dredge, R., Gleeson, J., & Garcia, X. (2014). Presentation on Facebook and risk of cyberbullying victimisation. *Computer Human Behavior*, (40), 16-22. <https://psycnet.apa.org/record/2014-43864-004>
- Erbay, S. & Beydoğan, H. D. (2017). The attitudes of educators towards educational research. *Ahi Evran University Journal of Kırşehir Faculty of Education*, 18(3), 246-260.
- Fu, S., Li, H., Liu, Y., Pirkkalainen, H. & Salo, M. (2020). Social media overload, exhaustion and use discontinuance: Examining the effects of information overload, system feature overload, and social overload. *Information Processing and Management*, (57), 1-15. <https://www.sciencedirect.com/science/article/pii/S0306457320308025>
- Goasduff, L., & Pettey, C. (2011). Gartner survey highlights consumer fatigue with social media, <http://www.gartner.com/it/page.jsp?id=1766814>.
- Guo, Y., Lu, Z., Kuang, H., & Chaoyou, W. (2020). Information avoidance behavior on social network sites: Information irrelevance, overload, and the moderating role of time pressure. *International Journal of Information Management*, (52), 1-12. https://e-tarjome.com/storage/panel/fileuploads/2020-02-04/1580810266_E14375-e-tarjome.pdf
- Gülner, B., & Öztat, F. (2020). The relationship between family face to face communication, internet and social media usage. *e: Kurgu Online Journal of the Faculty of Communication Sciences*, 28(1), 31-42. <https://dergipark.org.tr/tr/pub/kurgu/issue/55448/695585>
- Gülner, B. & Acar, N. (2021). Yaşam doyumu ve internet kullanımını ilişkisi: Türkiye'deki üniversite öğrencileri arasında bir alan araştırması. *Al Farabi Journal 9th International Conference on Social Sciences*, 747-753.
- Gülner, B. & Acar, N. (2021). Examination of the change caused by social media in the perception of fear during the period of epidemics: Covid-19. *Qualitative Social Sciences*, 3(1), 140-163.
- Gürkan, U. & Demirel, N. (2021). The effect of adolescents' use of social media on their social relations and social anxiety levels. *Avrasya Sosyal ve Ekonomi Araştırmaları Dergisi*, 8(3), 79-104. <https://dergipark.org.tr/tr/pub/asead/issue/64362/934020>
- Kazaz, M., & Acar, N. (2021). Oluşturma yöntemlerine göre yalan haberin incelenmesi: Twitter'da Covid-19. Selin Karaköse (Ed.) COVID-19 salgınında çok boyutlu etkiler, (pp. 176-235). Ankara: İksad Yayınevi.
- Koeske, G. F., & Koeske R. D. (1989). Workload and burnout: Can social support and perceived accomplishment help? *Social Work*, 34(3), 243-248. <https://psycnet.apa.org/record/1989-34487-001>
- Konuk, N. (2019). Using instagram as a social media tool and researching university students on personal communication anxiety. *European Journal of Managerial Research (EUJMR)*, 3(4), 1-26. <https://dergipark.org.tr/tr/pub/eujmr/issue/43811/498098>
- Kumcağız, H., Özdemir, T. Y. & Demir, Y. (2019). Effects of social media use on academic achievement and peer relation in adolescence. *International Journal of Social Science Research*, 8(2), 1-17. <https://dergipark.org.tr/tr/pub/ijssresearch/issue/51160/632529>
- Küçük, Ş. & Şahin, İ. (2015). Adaptation of Facebook victimization and bullying scales to Turkish. *Ahi Evran Üniversitesi Kırşehir Eğitim Fakültesi Dergisi*, 16(1), 55-70. <https://dergipark.org.tr/tr/pub/kefad/issue/59451/854130>
- Küçükali, A. & Serçemeli, C. (2019). Social media usage of academicians: The case of Ataturk University. *Avrasya Sosyal ve Ekonomi Araştırmaları Dergisi*, 6(10), 202-219. <https://dergipark.org.tr/tr/pub/asead/issue/50855/663253>
- Kwan, G. C. E. & Skoric, M. M. (2013). Facebook bullying: an extension of battles in school. *Computers in Human Behavior*, 29, 16-25. https://www.researchgate.net/publication/257253040_Facebook_bullying_An_extension_of_battles_in_school

- Lee, A.R., Son, S. M. & Kim, K. (2016). Information and communication technology overload and social networking service fatigue: a stress perspective. *Computers in Human Behavior*, (55), 51-61. <https://yonsei.elsevierpure.com/en/publications/information-and-communication-technology-overload-and-social-netw>
- Lenhart, A., Dukkan, M. & Smith, A. (2014). Couples, the Internet and Social Media. <http://www.pewinternet.org/2014/02/11/couples-the-internet-and-social-media>.
- Lin, J., Lin, S., Turel, O. & Xu, F. (2020). The buffering effect of flow experience on the relationship between overload and social media users' discontinuance intentions. *Telematics and Informatics*, (49), 1-18. <https://www.sciencedirect.com/science/article/pii/S0736585320300332>
- Lugman, A., Cao, X., Ali, A. Masood, A. & Yu, L. (2017). Empirical investigation of Facebook discontinues usage intentions based on SOR paradigm. *Computers in Human Behavior*, (70), 544-555. <https://www.sciencedirect.com/science/article/pii/S0747563217300213>
- Malik, A., Dhir, A., Kaur, P. & Johri, A. (2020). Correlates of social media fatigue and academic performance decrement. *Information Technology and People*, 34(2), 1-25. https://www.researchgate.net/publication/339783601_Correlates_of_social_media_fatigue_and_academic_performance_decrement_A_large_cross-sectional_study
- Maier, C., Laumer, S., Eckhardt, Andreas E., & Tim Weitzel (2014). Giving too much social support: social overload on social networking sites. *European Journal of Information Systems*, 24(5), 447-464. https://www.academia.edu/7984300/Giving_too_much_social_support_social_overload_on_social_networking_sites
- Ophir, Y., Asterhan C. S. C. & Schwarz, B. B. (2019). The digital footprints of adolescent depression, social rejection and victimization of bullying on Facebook. *Computers in Human Behavior*, (91), 62-71. <https://psycnet.apa.org/record/2018-59937-009>
- Rainie, L., Smith, A., & Duggan, M. (2013). Coming and going on Facebook. *Pew Research Center Internet & Technology*. <http://www.pewinternet.org/2013/02/05/coming-and-going-on-facebook/>
- Ravindran, T., Kuan, A. C. Y. K & Lian, D. G. H. (2014). Antecedents and effects of social network fatigue. *Journal of The Association for Information Science and Technology*, 65(11), 2306-2320. https://www.researchgate.net/publication/261702457_Antecedents_and_Effects_of_Social_Network_Fatigue
- Sarioğlu, E. B., & Özgen, E. (2018). A study on the social media usage habits of the z generation. *Uluslararası Sosyal Araştırmalar Dergisi*, 11(60),1067-1081. <https://www.sosyalarastirmalar.com/articles/a-study-on-the-social-media-usage-habits-of-the-z-generation.pdf>
- Shi, C., Yu, L., Wang, N., Cheng, B., Cao, X. (2020). Effects of social media overload on academic performance: A stressor strain outcome perspective. *Asian Journal of Communication*, 30(2), 179-197. https://www.researchgate.net/publication/340322523_Effects_of_social_media_overload_on_academic_performance_a_stressor-strain-outcome_perspective
- Solmaz, B., Tekin, G., Herzem, Z. & Demir, M. (2013). An application on the use of internet and social media. *Selçuk İletişim Dergisi*, 7(4), 23-32. <https://dergipark.org.tr/tr/pub/josc/issue/19027/200546>
- Sürü, D. (2019). *Analyzing the effect of psychoeducation about using social media and the internet*. Retrieved From Higher Education Institution.
- Şahin, M. & Gülnar, B. (2016). The relationship between communication apprehension and internet usage: A survey among Turkish university students. *Selçuk İletişim Dergisi*, 9(2), 5-26. <https://dergipark.org.tr/tr/pub/josc/issue/19032/201213>
- Şahin, E., Türk, F. & Hamamcı, Z. (2022). The relationship between coping attitudes of depression, anxiety and stress experienced during Covid-19 pandemic and social media addiction. *Erciyes İletişim Dergisi*, 9(1), 165-186. <https://dergipark.org.tr/tr/pub/erciyesiletisim/issue/68352/1001102>
- Tabachnick, B. G. & Fidell, L. S. (2013). *Using multivariate statistics*. Pearson.
- Uzunsakal, E. & Yıldız, D. (2018). A comparison of reliability tests in field researches and an application on agricultural data. *Applied Social Sciences Journal Of Istanbul University-Cerrahpasa*, 2(1), 14-28.
- Xiao L. & Mou, J. (2019). Social media fatigue -technological antecedents and the moderating roles of personality traits: The case of WeChat. *Computers in Human Behavior*, (101), 297-310.
- Whelan, E., Islam, A., & Brooks, S. (2020). Is Boredom proneness related to social media overload and

fatigue? a stress-strain-outcome approach. *Internet Research*, (30), 869-887. <https://www.semanticscholar.org/paper/Is-boredom-proneness-related-to-social-media-and-A-Whelan-Islam/de8ec7649e3b4caa53391c7441e0d60f6bc812df>

Yu, L., Shi, C., & Cao, X. (2019). Understanding the effect of social media overload on academic performance: a stressor-strain-outcome perspective. In Proceedings of the 52nd Hawaii International Conference on System Sciences, 2657-2666. <https://scholarspace.manoa.hawaii.edu/items/dc524548-935b-43ec-8eb7-f34753372aca>

Zhang, S., Zhao, L., Lu, Yaobin & Yang, J. (2016). Do you get tired of socializing? An empirical explanation of discontinuous usage behaviour in social network services. *Information & Management*, (53), 904-914. <https://www.sciencedirect.com/science/article/pii/S0378720616300295>

The Relationship Between Peer Relationships and Social Appearance Anxiety in Teenagers

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Teenagers, social appearance, anxiety, friendship relations

ABSTRACT

Friendship relationships contribute to teenagers' psychological, physiological, social, and emotional aspects. This study aimed to examine the relationship between peer relationships and social appearance anxiety in teenagers. The study sample comprised 412 teenagers. A "Personal Information Form," "Social Appearance Anxiety Scale (SAAS)," and "Peer Relationship Scale (PRS)" were used to collect the data. One-way ANOVA, t-test for independent groups and correlation analyzes were used in the analysis of the data. The results show that both friendship relations and social appearance concerns of teenagers are moderately positive. A non-significant relationship was obtained between social appearance anxiety and friendship relations. In the study, it was also determined that there was a significant, negative and low level relationship between the social appearance anxiety of teenagers and the variables of being satisfied with their gender and weight. Research findings also show that girls' mean social appearance anxiety levels are significantly higher than boys' mean. As a result, it can be stated that teenagers should be supported so that they are not adversely affected by social appearance anxiety.

There are several definitions of adolescence that cover a crucial developmental period. Adolescence is a critical transition period between childhood and adulthood, which includes physiological, psychosocial, historical, and cultural components. It is characterized by the onset of growth and physical development, and social independence of a dynamically changing individual (Steinberg, 2014). The most widely accepted definition of adolescence covers the ages of 10-18, which can also be extended to a range of 9-26 years, depending on developmental characteristics (American Psychological Association-APA, 2002). Biological maturation, emotional changes, and social independence are among the critical developmental characteristics of adolescence (Dinçel, 2006), during which adolescents frequently ask, "Who am I?". The answers to eh questions help them get to know themselves. According to Gökçe (2017), young people who become well aware of their identity can express themselves better in the social environment. According to Modell and Goodman's (1990) classification, the years between the ages of 14-17 are middle adolescence and developmentally the age of 14 is an important psychosocial point as teenagers are expected to develop multi-dimensional perspective skills at this age (Petersen & Leffert, 1995). In cultural terms, the high school period covers ages 15-18.

Friendship relationships are fundamental components of adolescence. Strong friendships contribute to teenagers' psychological, physiological, social, and emotional aspects. They can adapt to the environment by

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expressing themselves better and getting along well with their peers (Çiftçi, 2018). As a member of a friend group, they feel safe and protect themselves against harmful external factors. Thus, being a member of a group is vital for young people. Teenagers who develop positive relationships with their peers in a group setting also socialize (Çiftçi, 2018). For a healthy social life, young people need to be approved by their peers and share their feelings and thoughts. Teenagers, who care about their friends more than family members, share their bodily changes with friends and begin to understand others (Boyraz, 2019). The sense of belonging is at the heart of peer friendship, and they tend to join the groups they feel close. Steinberg (2014) indicated that teenagers prefer to be with those who have similar characteristics in choosing groups. According to Üstündağ (2021), the situations of teenagers also affect their behaviors toward their friends. Bayhan and Işıtan (2010) describe these situations as "being popular," "being argumentative," "not attracting attention," and "being rejected." According to the researchers, popular teenagers are more welcomed and accepted by their peers than argumentative teenagers, because popularity and acceptance bring self-confidence and thus those teenagers spread positive energy through their gestures and mimics. On the other hand, rejected or argumentative teenagers tend to reflect negativity due to dissatisfaction and not being loved or accepted by peers.

Adolescence which begins with bodily changes can cause adolescents to become highly sensitive to those changes and others' opinions. Physical changes stimulate adolescents to care more about their appearance. According to Güney (2018), teenagers, who are in an adaptation process of bodily changes, are aware of the importance of physical appearance in making friends, and they have concerns about whether peers would accept them. Adolescents' belief that the more physical attention they attract, the more they will be accepted by peers is defined as social appearance anxiety (Çakmak and Sakarya, 2020). According to Doğan (2010), social appearance anxiety results from an individual's negative body image and appearance. In short, for adolescents, physical appearance and others' opinions about them have an important place in their lives (Çivilidağ, 2013). Physical appearance has become very important for young people who compare themselves with their peers. Since the acceptance of physical appearance is among the developmental tasks of adolescence, bodily dissatisfaction may indicate an unhealthy development, discontentment with body image, and experiencing social anxiety. Those who are dissatisfied and worried about their appearance may assume a passive role, be timid about establishing friendships, and have insecure and avoidant attachments with friends, which can be considered a negative impact of social appearance anxiety on friendship relations (Santrock, 2012). A fresh high school student is expected to adapt to a social environment by making friends. According to Çakmak and Sakarya (2020), even a slightly negative comment about appearance in high school years can cause teenagers to isolate themselves and experience social appearance anxiety. Güney (2018) indicates that teenagers with negative body image perception are likely to perceive a social environment or others as a threat and become sensitive to negative criticism.

In light of the mentioned above, adolescence is a critical period for adolescents in terms of both friendship relations and how they are perceived in their social environment. Peer feedback affects adolescents' self-perceptions and thoughts about themselves. In this sense, this study aimed to examine the relationship between peer relationships and social appearance anxiety in teenagers. The problem statement is: "Is there a significant relationship between friendship and social appearance anxiety in teenagers?". Answers to the following questions were sought.

1. What is the level of peer relationship and social appearance anxiety in teenagers between the ages of 15 and 18?
2. Is there a significant relationship between peer relationship and social appearance anxiety in teenagers between the ages of 15-18 years?
3. Is there a significant relationship between peer relationship and social appearance anxiety in teenagers between the ages of 15-18 years in terms of gender and being contented with weight and height?
4. Do peer relationship and social appearance anxiety differ significantly by gender, being contented with weight and height, and having a partner?

Method

Research Model

This study employed a relational survey model, which is used to determine the relationship between two or more variables. Relational survey model is a research model that aims to determine the relationship between two or more variables and to obtain clues about cause and effect (Metin, 2014).

Participants

The participants comprised 44.041 high school students between the ages of 15 and 18 years in Keçiören, Ankara. The G*Power method was used to determine the sample size, which yielded that the total number of samples should be at least 198. Accordingly, the study sample comprised 412 volunteer teenagers selected using a random sampling technique.

The data obtained from a personal information form were analyzed using descriptive statistics. The results are shown in Table 1.

Table 1. Demographic Information of the Teenagers

Variables	Girls		Boys	
	f	%	f	%
Class				
9	80	37,0	63	32,1
10	32	14,8	36	18,4
11	51	23,6	45	23,0
12	53	24,6	52	26,5
Type of school				
Anatolian High School	142	65,7	112	57,1
Science High School	1	0,5	1	0,5
Anatolian Vocational High School	73	33,8	83	42,3
Education Status (Mothers)				
Literate	5	2,4	5	2,6
Primary school	60	27,7	45	23,0
Middle school	67	31,0	41	20,9
High school	69	32,0	69	35,2
Master's/PhD	15	6,9	36	18,3
Education status (Fathers)				
Literate	6	2,8	4	2,0
Primary school	42	19,4	20	10,2
Middle school	63	29,2	48	24,5
High school	80	37,0	80	40,8
University	25	11,6	41	20,9
Master-PhD	0	0,0	3	1,5
Family structure				
Nuclear Family	169	78,2	148	75,5
Extended Family	26	12,0	29	14,8
Divorced	21	9,8	19	9,7
Sibling				
Only child	15	6,9	15	7,7
2 siblings	87	40,3	112	57,1
3 or more	114	52,8	69	35,2
Hobbies				
There is	194	89,8	165	84,2
None	22	10,2	31	15,8
Their satisfaction with their weight				
I am not satisfied at all	23	10,6	16	8,2
I'm not satisfied	40	18,5	40	20,4
I'm undecided	63	29,2	42	21,4
I'm satisfied	69	32,0	71	36,2
I am very satisfied	21	9,7	27	13,8

(Table 1 continued)

Their satisfaction with their height				
I am not satisfied at all	24	11,1	10	5,1
I'm not satisfied	33	15,3	28	14,3
I'm undecided	40	18,5	39	19,9
I'm satisfied	89	41,2	83	42,3
I am very satisfied	30	13,9	36	18,4
The state of paying attention to branded clothing				
I do	58	26,9	83	42,3
I don't	158	73,1	113	57,7
State of doing sports				
I do	102	47,2	153	78,1
I don't	114	52,8	43	21,9
Do you have a partner?				
Yes	140	64,8	114	58,2
No	76	35,2	82	41,8

As seen in Table 1, most participants were ninth-graders studying at Anatolian High School. In terms of parents' education status, the majority of mothers and fathers were high school graduates. All teenagers were from nuclear families. It was found that while the girls had three or more siblings, the boys had two siblings. Most teenagers had hobbies. The number of girls and boys who were contented with their weight and height was higher than those who were not. Both girls and boys often did care about wearing famous brands. While half of the girls did not do sports, most boys did sports. The number of students with a partner was higher than those without a partner.

Data Collection Tools

A "Personal Information Form," "Social Appearance Anxiety Scale (SAAS)," and "Peer Relationship Scale (PRS)" were used to collect the data.

Personal Information Form. The researchers prepared the form, including questions about gender, class level, school type, parents' education status, family structure, monthly allowance, hobbies, satisfaction with weight, satisfaction with height, the number of siblings, whether wearing famous brands, doing sports, and having a partner.

Social Appearance Anxiety Scale (SAAS). The self-report scale was developed by Hart, Flora, Palyo, Fresco, Holle, and Heimberg (2008) to measure emotional, cognitive, and behavioral anxiety about physical appearance. It was adapted to Turkish by Doğan (2010). The 5-point Likert-type scale has 16 items, scored as "Very Often=5, Frequently=4, Sometimes=3, Almost Never=2, and Never=1". The highest score obtained from the scale is 80, and the lowest score is 16. High mean scores indicate a high level of anxiety and vice versa. Since the first item in the scale was negative, it was reverse-coded. Doğan (2010) performed an exploratory factor analysis to determine the scale's construct validity. Accordingly, the factor loads ranged from .35 to .87 and had a one-factor structure. The internal consistency coefficient of SAAS was $\alpha=.93$, the test-retest reliability coefficient was .85, and the reliability coefficient calculated by the test-half method was .88. The Cronbach Alpha internal consistency coefficient was calculated as $\alpha=.93$ in this study.

Peer Relationship Scale (PRS). The scale was developed by Kaner (2002) to investigate adolescent peer relationships according to social control and social learning theory. It has 18 items, scored as "Always" (5 points), "Often" (4 points), "Sometimes" (3 points), "Rarely" (2 points), and "Never" (1 point), and four sub-scales: "Commitment," "Confidence and Identity," "Self-disclosure," and "Loyalty." Kaner (2002) performed principal component analysis for the construct validity of the scale and found that the factor loads were .538-.760 for the "Commitment"; .41-.78 for the "Confidence and Identity"; .542-.742 for the "Self-Disclosure" and .534-.807 for the "Loyalty." The significance was set at the .000 level for each item. The reliability results suggest that the Cronbach Alpha internal consistency coefficient was $\alpha=.86$ for "Commitment," $\alpha=.69$ for "Confidence and Identity," $\alpha=.58$ for "Disclosure," and $\alpha=.58$ for "Loyalty." It was measured $\alpha=.86$ for the total scale. High scores on the scale indicate positive relationships with friends.

Data Collection

Researchers obtained ethics committee permission from the Ankara Provincial Directorate of National Education before the data were collected in March. Then, they visited the high schools in Keçiören and interviewed school principals who were informed about the purpose and method of the study. In volunteer schools, the school psychological counselor helped deliver the surveys to the students, and the data were collected face to face.

Data Analysis

It was quantitative correlational research in which the SAAS and PRS total scores were calculated. First, skewness and kurtosis values were calculated, and a normality test was performed to determine whether the data had a normal distribution. The results yielded a normality distribution as it was in the range of ± 1.5 (Tabachnick, Fidell, & Ullman, 2007). The results are shown in Table 2 below.

Pearson correlation analysis was performed to determine the relationship between social appearance anxiety and peer relationships. The point biserial correlation coefficient was used to determine the correlation between social appearance anxiety and peer relationships in terms of gender and being contented with weight and height. The relationship between social appearance anxiety and peer relationships by gender and dating status was checked by performing an independent groups t-test. One-way ANOVA was performed to determine teenagers' social appearance anxiety levels and peer relationships according to their satisfaction with height and weight.

Ethical Approval

Ethics committee approval was obtained from the Health Sciences University Hamidiye Scientific Research Ethics Committee with decision number 21/792 on 31.12.2021.

Findings

The findings are presented in tables. The descriptive values of the peer relationships and social appearance anxiety levels and the skewness and kurtosis values are given in Table 2.

Table 2. Descriptive Value Table of Scales

Scales	SAAS	PRS
n	412	412
Mean	2.39	2.50
SD	.887	.806
Minimum	1.00	1.00
Maximum	4.94	4.78
Skewness	,605	,367
Kurtosis	-,461	-,304

In five-point Likert type scales, the average score between 1.00 and 1.80 is low, 1.81-2.60 is below medium, 2.61-3.40 is medium, 3.41-4.20 is above medium, and 4.21-5.00 is high. As seen in Table 2, the SAAS average score was 2.39 ± 0.887 ; the PRS average score was 2.50 ± 0.806 . Since the mean scores from both scales were between 1.81 and 2.60, friendship relations and social appearance concerns of teenagers were below the medium level.

The findings regarding whether there was a relationship between teenagers' social appearance anxiety levels and peer relationships are shown in Table 3.

Table 3. The Relationship Between Teenagers' Social Appearance Anxiety Levels And Peer Relationships

Scales	SAAS	PRS
SAAS	1	
PRS	-.021	1

Table 3 presents a negligible, negative, and non-significant correlation between social appearance anxiety levels and peer relationships.

A point biserial correlation analysis was performed to determine the correlation between social appearance anxiety and peer relationships by gender. The results are shown in Table 4.

Table 4. The Correlation Between Social Appearance Anxiety And Peer Relationships By Gender

Variables	SAAS	PRS	Gender
SAAS	1		
PRS	-.021	1	
Gender	-.123*	-.036	1

According to the point biserial correlation analysis results, there was a significant, negative, and low-level relationship between social appearance anxiety and gender ($r_{pb}=-.123, p<.001$).

A point biserial correlation analysis was performed to determine the correlation between social appearance anxiety and peer relationships by their satisfaction with their weight. The results are presented in Table 5.

Table 5. The Correlation Between Social Appearance Anxiety And Peer Relationships By Their Satisfaction With Their Weight

Variables	SAAS	PRS	Their satisfaction with their weight
SAAS	1		
PRS	-.021	1	
Their satisfaction with their weight	-.165*	.035	1

According to the point biserial correlation analysis results in Table 5, there was a significant, negative, and low-level relationship between social appearance anxiety levels and weight satisfaction ($r_{pb}=-.165, p<.001$). The relationship between teenagers' social appearance anxiety levels and peer relationships could be ignored, and it was not statistically significant.

A point biserial correlation analysis was performed to determine the correlation between social appearance anxiety and peer relationships by height satisfaction. The results are shown in Table 6.

Table 6. The Correlation Between Social Appearance Anxiety And Peer Relationships By Height Satisfaction

Variables	SAAS	PRS	Height satisfaction
SAAS	1		
PRS	-.021	1	
Height satisfaction	-.093	-.051	1

According to the point biserial correlation analysis results shown in Table 6, there was no significant correlation between social appearance anxiety levels, peer relations, and height satisfaction.

The independent groups t-test results, which were conducted to determine whether teenagers' social appearance anxiety levels and peer relationships differed by gender are shown in Table 7.

Table 7. The Independent Groups T-Test Results On Social Appearance Anxiety And Friendship Scores By Gender

Scales	Gender	N	\bar{x}	SD	t	df	p	Effect size
SAAS	Girl	216	2.49	.922	2.51	410	.012	.015
	Boy	196	2.27	.834				
PRS	Girl	216	2.52	.833	.726	410	.468	.001
	Boy	196	2.46	.777				

As seen in Table 7, the social appearance anxiety levels differed significantly by gender. The average of the girls was higher than the boys ($\bar{x}=2.49$, $SD=.922$, $p=.012$), and the effect size was small ($d>1$ very large, $0.8<d<1$ large, $0.5<d<0.8$ medium, $0.2<d<0.5$ small). The peer relationships did not differ significantly in terms of gender.

Table 8 shows the independent samples t-test results, which were conducted to determine whether the peer relationships and social appearance anxiety levels differed by having a partner.

Table 8. The Independent Groups t-test Results on Social Appearance Anxiety and Friendship Scores by Partnering Variable

Scales	Situation	N	\bar{x}	SD	t	df	p	Effect size
SAAS	There is	254	2.38	.917	-.143	410	.887	.000
	No	158	2.39	.840				
PRS	There is	254	2.48	.838	-.565	410	.573	.001
	No	158	2.52	.755				

The SAAS scores of those with a partner ($\bar{x}=2.38$) and those without ($\bar{x}=2.39$) did not differ significantly. Similarly, the PRS scores of those with a partner ($\bar{x}=2.48$) and those without ($\bar{x}=2.52$) did not differ significantly. Accordingly, there was no significant difference between teenagers' social appearance anxiety levels and peer relationships by partnering variable.

The results of the ANOVA performed to determine whether the social appearance anxiety levels and friendship relationships differed by body weight satisfaction are shown in Table 9.

Table 9. ANOVA Test Result on Social Appearance Anxiety and Friendship Scores According to the Variable of Weight Satisfaction

Scales	Situation	N	\bar{x}	SD	f	p	Significant difference	Effect size
SAAS	a.I am not satisfied at all	39	2.70	1.07	3.05	.017	a>d> e	.029
	b.I am not satisfied	80	2.49	.794				
	c.I'm undecided	105	2.46	.946				
	d.I am satisfied	140	2.26	.828				
	e.I am very satisfied	48	2.18	.830				
	Total	412	2.39	.887				
PRS	a.I am not satisfied at all	39	2.55	.855	.969	.424		.009
	b.I am not satisfied	80	2.34	.752				
	c.I'm undecided	105	2.54	.867				
	d.I am satisfied	140	2.53	.778				
	e.I am very satisfied	48	2.50	.799				
	Total	412	2.50	.806				

As seen in Table 9, the social appearance anxiety levels differed significantly according to body weight satisfaction ($p=.017$). The results of the Bonferroni post hoc test performed to determine the difference across groups yielded a significant difference between the responses of "I am not satisfied at all" and "I am satisfied." Those not at all satisfied with their body weight had higher social appearance anxiety. Another significant difference was between "I am not satisfied at all" and "I am very satisfied." Those not at all satisfied with their body weight had higher social appearance anxiety, and the effect size was small. It was also found that the peer relationships did not differ regarding body weight satisfaction.

Table 10 shows the results of the ANOVA test performed to determine whether teenagers' social appearance anxiety levels and peer relationships differed by the variable of being satisfied with height.

Table 10. ANOVA Test Result On Social Appearance Anxiety And Friendship Scores According To The Variable Of Height Satisfaction

Scales	Situation	N	\bar{x}	SD	f	p
SAAS	I am not satisfied at all	34	2.64	.971	1.06	.374
	I am not satisfied	61	2.44	.904		
	I'm undecided	79	2.37	.858		
	I am satisfied	172	2.36	.859		
	I am very satisfied	66	2.28	.933		
	Total	412	2.39	.887		
PRS	I am not satisfied at all	34	2.51	.835	.877	.477
	I am not satisfied	61	2.67	.891		
	I'm undecided	79	2.46	.771		
	I am satisfied	172	2.45	.752		
	I am very satisfied	66	2.50	.888		
	Total	412	2.50	.806		

As seen in Table 10, there was no significant difference between the social appearance anxiety levels and peer relationships by being satisfied with height.

Discussion and Conclusion

This study found that teenagers had a moderate level of social appearance anxiety and peer relationships, which overlaps with several findings in the relevant literature. For example, Arslan (2019), Kalemoglu Varol, Erbaş, and Ünlü (2014), and Vural, Keskin, and Çoruh (2017) found a moderate level of social appearance anxiety. Similarly, Doğan, Karaman, Çoban, and Çok (2012) determined a moderate level of peer relationships and that gender was a predictor of friendship relationships in adolescents. However, in their studies, Kılıç (2020), Kılıç and Karakuş (2016), Senna (2019), and Yüceant (2013) determined low level of social appearance anxiety. When considered in the context of developmental psychology, peer groups play an important role in supporting the healthy social development of teenagers (Aytekin, 2021). The quality of friendship relations contributes to adolescents' self-seeking motives. While positive peer relationships support healthy and consistent identity acquisition, negative peer relationships may lead to problematic manners (Ateşpolat & Bıçakçı, 2020). Thus, it can be suggested that meeting peer-related needs in adolescence may have an impact on the healthy development of young people as well as internalizing an optimistic worldview.

Our findings suggest that girls' social appearance anxiety mean scores differed significantly compared to boys' mean scores. Şimşir, Seki, and Dilmaç (2019) examined the correlation between social appearance anxiety and gender variable in their meta-analysis study and concluded that gender has a low effect on social appearance anxiety. It was also seen that boys' social appearance anxiety levels were higher than girls' (Şimşir, Seki, & Dilmaç, 2019). Similarly, Alımcı (2018), Atik, Atik, Asaf, and Çınar (2015), Dönmez (2018), Erdemir, Bağcı, Yüksel İnan and Turan (2013) and Hagger and Stevenson (2010) found a significant difference in favor of girls. However, there are various findings regarding the issue in the literature, some of which are in favor of males while some are in favor of females. There are also results showing no correlation between gender and social appearance anxiety. In adolescence, teenagers spend more time with their friends, and friend feedback is very important for them (Aytekin, 2021; Van Der Aar, Peters, & Crone, 2018). Adolescents tend to be closely engaged in body image and impression, especially in peer groups (Cillessen, 2011). Teenagers develop a self-perception through social comparison in peer groups, and friends play a central role in shaping a self-perception (Van Der Aar et al., 2018). In short, peer relationships open a place for developing social relations (Gowers, 2005). In this regard, the reasons mentioned above may influence girls' high social appearance anxiety levels. In addition to the "beauty image" created by peer groups, the " beauty image" on social media may also impact girls' anxiety.

Our findings revealed no significant relationship between peer relations and social appearance anxiety in teenagers. Contrary to friends, gender was the actual determinant of social appearance anxiety. The correlational analysis yielded a significant, negative, and slight correlation between social appearance anxiety and gender. It was also determined that social appearance anxiety differed significantly in favor of girls. Alımcı

(2018) examined the relationship between peer bullying, social appearance anxiety, and self-esteem in secondary school students and found that girls' social appearance anxiety levels were higher than boys. From a developmental perspective, it is well-expected for teenagers to care about their physical appearance and others' opinions about them. Thus, dissatisfaction with appearance and negative feedback from others can be critical issues for teenagers (Doğan, 2010). In this sense, the finding indicating the girls' high anxiety levels can be understood as there is a belief that physical appearance is more important for girls than boys. Teenagers with a negative self-perception in adolescence, when physical appearance is vital for social relations, are likely to be socially introverted (Aslan & Koç, 2018). Hart et al. (2008) define social appearance anxiety as an individual's concerns about how others appreciate his/her physical appearance. In this sense, our finding indicating a significant, negative, and low-level relationship between social appearance anxiety and satisfaction with body weight is in parallel with the literature. It was also found that teenagers' social appearance anxiety levels differed significantly by the variable of being satisfied with body weight. The results of the post hoc test performed to determine the difference across groups revealed that it was between "I am not at all satisfied" and "I am satisfied" in favor of those who chose the option "I am not at all satisfied." There was a significant difference between "I am not satisfied at all" and "I am very satisfied" in favor of those who chose the option "I am not satisfied at all." Doğan (2010) argues that social appearance anxiety originates from the fear of being negatively evaluated by others. In light of our findings, it can be said that the girls had higher social appearance anxiety levels, especially those unsatisfied with their body weight. It is believed that the "beauty" image imposed by social media plays a role in the high social appearance anxiety levels in young girls because the use of social media has become a common daily activity, especially among teenagers who are engaged in sharing visual content. Üstündağ (2022) determined that teenagers spend much time on the screen outside the classroom, and girls mostly use the internet to share photos while boys play games. According to Koçyiğit and Koç (2021), teenagers' top three social media applications are Instagram, WhatsApp, and Twitter. In this regard, the most popular engagements in social media involve taking selfies and sharing them with others on social media. Boursier, Gioia, and Griffiths (2020) examined social appearance anxiety and problematic social media use in adolescents and found that girls had higher levels of social appearance anxiety than boys. Thus, it is essential to carry out awareness-raising interventions to support healthy self and body perceptions and mindful screen use.

It was concluded that 15-18 aged participants had a moderate level of peer relationships and social appearance anxiety. In addition, no relationship was found between social appearance anxiety and friendship relations. There was a significant, negative, and low-level relationship between social appearance anxiety and the variables of gender and body weight satisfaction. The findings suggested that girls' social appearance anxiety mean scores differed significantly from boys' mean scores. That is, girls had higher levels of social appearance anxiety.

Suggestions

In light of the findings, the following suggestions would be beneficial for teenagers, parents, and researchers. Accordingly, awareness-raising training and programs on adolescent development characteristics, body image, self-esteem, and social appearance can be organized for teenagers. Parents also should be encouraged to take such training to support their children's healthy development. Bodily changes in adolescence become noticeable between 12-14. Therefore, researchers can also conduct similar studies in this age group. Additionally, studies on the relationship between social appearance anxiety and self-esteem can be conducted. This study was limited to the volunteer high schools in the Keçiören district. Therefore, extensive studies can be conducted with a larger sample and by involving high schools in different districts.

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References


- Alımcı, D. (2018). *An investigation of the relationship between peer bullying and social appearance concerns and self-esteem in secondary school students* (Publication No. 525981), Master's Thesis. Istanbul: Istanbul Sabahattin Zaim University.
- American Psychological Association (APA). (2002). *Developing adolescents: A reference for professionals*. Washington, DC: American Psychological Association.
- Arslan, A. (2019). Study of social anxiety and self-sufficiency perceptions of health services vocational school students from the point of various variables. *International e-Journal of Educational Studies*, 3(6), <https://doi.org/78-96.10.31458/iej.es.524860>
- Aslan, H., & Koç, Z. (2018). Body image and social anxiety levels of secondary school students. *The Journal of Education Theory and Practical Research*, 4(3), 65-77. <https://dergipark.org.tr/pub/ekvad/issue/41379/500208>
- Ateşpolat, Y., & Bıçakçı, M. (2020). Investigation of the relationship between peer relationship and peer bullying levels of adolescents. *Eurasian Journal of Social and Economic Research*, 7(10), 1-13. <https://dergipark.org.tr/pub/asead/issue/57514/789438>
- Atik, D., Atik, C., Asaf, R., & Çınar, S. (2015). The effect of perceived social support by hemodialysis patients on their social appearance anxiety. *Medicine Science*, 4(2), 2210-2223. <https://dergipark.org.tr/en/pub/medsci/issue/10432/127709>
- Aytekin, Ç. (2021). *Social development in adolescents*. Üstündağ, A. (Edi). Adolescence from a developmental point of view. Ankara: Educating Book.
- Bayhan, P., & Işıtan, S. (2010). Relationships in adolescence: a general view of peer and romantic relationships. *Journal of Social Policy Studies*, 20(20), 33-44. <https://dergipark.org.tr/pub/spcd/issue/21108/227337>
- Boursier, V., Gioia, F., & Griffiths, M.D. (2020). Do selfie-expectancies and social appearance anxiety predict adolescents' problematic social media use? *Computers in Human Behavior*, 110, 1-8. <https://doi.org/10.1016/j.chb.2020.106395>
- Boyraz, M. (2019). *Investigation of the friendship relationship of high school students in terms of self-respect and some variables* (Publication No. 607673), Master Thesis, Malatya: İnönü University.
- Cillessen, A. H. N. (2011). Toward a theory of popularity. In A. H. N. Cillessen, D. Schwartz, & L. Mayeux (Eds.), *Popularity in the peer system* (pp. 273–299). The Guilford Press.
- Çakmak, A., & Sakarya, S. (2020). The examination of the relationship between the social appearance anxieties of students who are studying in different types of highschools and their level of social comparison. *Electronic Journal of Social Sciences*, 74, 680-691. <https://doi.org/10.17755/esosder.582927>
- Çiftçi, H. (2018). Comparing peer relationship levels: a study on high school students. *Itobiad: Journal of the Human & Social Science Researches*, 7(3), 1516-1535. <https://doi.org/10.15869/itobiad.416486>
- Çivilidağ, A. (2013). *Adolescent psychology in the focus of developmental process*. Nobel Publishing.
- Dinçel, E. (2006). *Adolescent developmental tasks and psychological problems* (Publication No. 191358), Master Thesis, Ankara: Ankara University.
- Doğan, T. (2010). Adaptation of the social appearance anxiety scale (SAAS) to Turkish: a validity and reliability study. *Hacettepe University Journal of Education*, 39(39), 151-159. http://www.efdergi.hacettepe.edu.tr/shw_artcl-467.html
- Doğan, T., Karaman, N. G., Çoban, A.E., & Çok, F. (2012). Predictors of adolescents' friendship qualities: gender and family related variables. *Elementary Education Online*, 11(3), 845-855.

<https://dergipark.org.tr/tr/pub/ilkonline/issue/8587/106702>

- Dönmez, Ş.N. (2018). *Investigation of the relationship between social appearance anxiety and sexual satisfaction in married couples* (Publication No. 503524), Master's Thesis, Istanbul: Uskudar University.
- Erdemir, A.V., Bağcı, S.I., Yüksel İnan, E., & Turan, E. (2013). Evaluation of the social appearance anxiety and quality of life in patients with acne vulgaris. *Istanbul Med*, 1, 35-39. <https://doi.org/10.5505/1304.8503.2013.07078>
- Gökçe, G. (2017). *Examination of the relationship between self-esteem and body image in high school students* (Publication No. 466086), Master's Thesis, Istanbul: Haliç University.
- Güney, C. (2018). *Investigation of the mediating effect of personality traits on the relationship between body image and social anxiety in adolescents aged 15-18 years* (Publication No. 508947), Master's Thesis, Istanbul: Işık University.
- Gowers, S. (2005). Development in adolescence. *Psychiatry*, 4(6), 6-9. <https://doi.org/10.1383/psyt.4.6.6.66353>
- Hagger, M.S., & Stevenson, A. (2010). Social physique anxiety and physical self-esteem: Gender and age effects. *Psychology and Health*, 25(1), 89-110. <https://doi.org/10.1080/08870440903160990>
- Hart, T.A., Flora, D.B., Palyo, S.A., Fresco, D.M., Holle, C., & Heimberg, R.G. (2008). Development and examination of the social appearance anxiety scale. *Assessment*, 15(1), 48-59. <https://doi.org/10.1177/1073191107306673>
- Kalemoğlu Varol, Y., Erbaş, M.K. & Ünlü, H. (2014). The relationship between social appearance anxiety of adolescents and their attitude toward physical. *Physical Education and Sport Sciences Journal*, 8(1), 121-130. <https://dergipark.org.tr/tr/pub/bsd/issue/53528/712843>
- Kaner, S. (2002). Developing a friend relationship scale and peer divergence scale. *Ankara University Journal of Faculty of Educational Sciences*, 33, 1-2. https://doi.org/10.1501/Egifak_0000000024
- Kılıç, S.K. (2020). Relationship between social appearance anxiety and motivation for participation in physical activity among high school students. *International Journal of Active Learning*, 5(2), 69-85. <https://doi.org/10.48067/ijal.827568>
- Kılıç, M., & Karakuş, Ö. (2016). The study of the relationships between social appearance anxiety, self-esteem and loneliness level among university students. *Journal of Human Sciences*, 13(3), 3837-3852. <https://www.j-humansciences.com/ojs/index.php/IJHS/article/view/4054>
- Koçyiğit, M., & Koç, M.A. (2021). Investigation of the change in media ecology in the Covid-19 process within the framework of agenda setting theory. *The Kastamonu Journal of Communication Studies*, 6, 27-42. <https://dergipark.org.tr/tr/pub/kiad/issue/62920/906235>
- Metin, M. (2014). *Scientific research methods in education from theory to practice*. Ankara: Pegem Academy Publishing.
- Modell, J., & Goodman, M. (1990). *Historical perspectives*. In S. S. Feldman & G. R. Elliott (Eds.), *At the threshold: The developing adolescent*. Cambridge: Harvard University Press.
- Petersen, A., & Leffert, N. (1995). Developmental issues influencing guidelines for adolescent health research: A review. *Journal of Adolescent Health*, 17, 298-305. [https://doi.org/10.1016/1054-139x\(95\)00184-t](https://doi.org/10.1016/1054-139x(95)00184-t)
- Santrock, J. W. (2012). *Adolescence*. Nobel Publishing.
- Senna, Y. E. (2019). *Investigation of the relationship of high school students' tendency to the physical activity, social appearance anxiety and self-efficacy* (Publication No. 556030), Master's Thesis, Ankara: Ankara University.
- Steinberg, L.D. (2014). *Age of opportunity: Lessons from the new science of adolescence*. Houghton Mifflin Harcourt.
- Şimşir, Z., Seki, T & Dilmaç, B. (2019). Gender differences in social appearance anxiety: a meta-analysis study. *OPUS International Journal of Society Researches*, 10(17), 615-637. <https://doi.org/10.26466/opus.519967>
- Tabachnick, B.G., Fidell, L.S., & Ullman, J.B. (2007). *Using multivariate statistics*. Boston, MA: Pearson.
- Üstündağ, A. (2022). Investigation of the relationship between social media usage purposes of adolescents and their perceptions of social support. *Uludağ University Faculty of Arts and Sciences Journal of Social Sciences*, 23(42), 169-190. <https://doi.org/10.21550/sosbilder.960816>

- Üstündağ, A. (2021). *Adolescence from a developmental point of view*. Ankara: An Educational Book
- Van Der Aar, L.P.E., Peters, S. & Crone, E.A. (2018). The development of self-views across adolescence: Investigating self-descriptions with and without social comparison using a novel experimental paradigm. *Cognitive Development*, 48(2018), 256–270. <https://doi.org/10.1016/j.cogdev.2018.10.001>
- Vural, M., Keskin, N., & Çoruh, Y. (2017). Research of social appearance anxiety and self-efficacy of the students entered university by special talent exam. *International Journal of Environmental & Science Education*, 12(9), 2063-2071. http://www.ijese.net/makale_indir/IJESE_1968_article_5a6d6aa6f0743.pdf
- Yüceant, M. (2013). *Examination of social appearance anxiety levels of physical education teacher candidates in terms of different variables* (Publication No. 344413), Master's Thesis, Aksaray: Aksaray University.

Applicability of Solution-Focused Brief Counseling in Turkish Culture: A Contextual Perspective

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ABSTRACT

This article focuses on the applicability of solution-oriented brief counseling in Turkish culture. To this end, I discuss the theoretical framework and therapeutic process of solution-focused counseling and the predispositions of counselors to provide solution-focused counseling from a contextual perspective. An important implication from this investigation is that traits such as authoritativeness, approval for power inequalities, and external locus of control may harm the applicability of this approach in Turkey. However, it is possible to say that the solution-oriented approach is compatible with the Turkish people in many ways. In this respect, solution-focused counselors may need different methods to work more harmoniously with Turkish clients. In conclusion, considering the cultural features of Turkish society, I make recommendations about what these methods might be and how solution-focused counseling adapted better.

Culturally sensitive psychological counseling, which aims to provide a more effective counseling process by considering individuals' different cultural characteristics and contexts, is gaining increasing importance in today's world (Sue, Sue, Neville, & Smith, 2019). One of the topics encompassed by culturally sensitive psychological counseling is the adaptation of counseling theories, considering factors such as individuals' cultural backgrounds, beliefs, and values (Pedersen, 2008). This is believed to lead to a more sensitive and effective counseling process, providing clients with better opportunities to express themselves and facilitating the establishment of a therapeutic relationship (Erdur-Baker, 2007). Therefore, considering the applicability of psychological counseling approaches developed in different cultural (Mostly in Western) contexts in another culture becomes a necessity to offer culturally sensitive psychological counseling.

In recent times, studies examining the applicability of such Western approaches in Turkish culture have also started to emerge in the field literature in Turkey. There have been studies on the applicability of transactional analysis (Gultekin & Voltan-Acar, 2004), positive psychotherapy (Sari, 2015), reality therapy (Yorgun & Voltan-Acar, 2014), and logotherapy (Tagay et al., 2016) in Turkish culture. The commencement of discussions on these topics in Turkey is an important development because psychological counseling education and practices in Turkey are largely influenced by approaches developed in Western culture (Poyrazli, 2012). For example, among these, Carl Rogers' client-centered approach, which is most widely adopted, entirely reflects the individualistic, liberal, and values autonomy and freedom of American culture (Erdur-Baker, 2007). This aspect has been criticized for potentially encountering significant cultural barriers in practice within Turkish culture (Mocan-Aydin, 2000; Poyrazli, 2000). Such critiques and examinations are indeed valuable for mitigating the cultural barriers that may arise when implementing Western-based psychological counseling approaches in Turkish culture.

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Alongside the psychological counseling approaches mentioned above, in recent years, solution-focused brief counseling has become increasingly popular in Turkey (Meydan, 2013). Solution-focused approach is extremely pragmatic and applicable in schools (Sklare, 1997). As such an approach, it is quickly adopted by Turkish psychological counselors, most of whom work in schools and are responsible for dealing with large numbers of students in a short time (Dost & Keklik, 2012). However, there is no study evaluating the applicability of this approach in Turkish culture. Therefore, I found it necessary to explore the strengths and weaknesses that may be encountered when implementing the solution-focused psychological counseling in the Turkish population. In this article, I first provide a general overview of the theoretical foundations and therapeutic process of the solution-focused approach. Then, I will discuss the applicability of this approach, taking into account the cultural characteristics of clients and helpers in Turkey.

An Overview of Solution-Focused Counseling

Solution-focused counseling has initiated when a team of therapists, led by de Shazer and Kim Berg, asked families what they wanted to keep the same rather than what they wanted to change. Initially, this team attempted to understand the causes of the families' problems and intervene as soon as possible. (Lipchick, 2014). Not long afterward, the premise that there must be a relationship between the problem and solution is invalid because this team understood that the clients were more inclined to change when they started to talk about what they wanted to keep the same in their lives. In this model, the therapist team has explored how it would be possible to construct a solution without regarding the details of the problem (de Shazer, 1988). As will be discussed later, this model paved the way for unique techniques such as examining exceptions, miracle questions, and scaling questions (Ratner et al., 2012).

Theoretical Framework. The theoretical foundations of the solution-focused approach originally come from social constructivism, which is one of the products of the scientific paradigm known as postmodernism, which began to spread in the 70s (Berg & de Shazer, 2012). In line with this perspective, there are no objective realities. Knowledge is not discovered by an outside observer who is entirely objective. Instead, truths are socially constructed by people who interact through language (Gergen, 1985). Hence, one of the most radical features of the solution-focused approach is to reject all normative ideas that attempt to explain human nature, including pathology (De Jong & Berg, 2013). Correspondingly, solution-focused counseling limited the "expertise of the counselor" to the therapeutic process only. The counselor is not a therapeutic dynamic who is an expert on the nature of clients' problems, but who knows how the client's change process should be organized (Gutterman, 2006).

The limitation, placed to the counselor's expertise, brought the views that clients are the main actors of change, the expert of their own lives, and thus can determine what will be best for themselves (De Jong ve Berg, 2013). As Corey (2017) claims, solution-focused counseling gives clients a mission to educate counselors about their own lives. But, when clients use their expertise to talk about problems, they make conversations that may have nothing to do with the solution but make the situation worse than it is (Walter & Peller, 1992). Change may occur quickly when the counselor encourages clients to focus on solutions by tapping their shoulders (Berg & de Shazer, 2012).

The solution-focused helping process is based on several principles that synthesize the Mental Research Institute's brief therapy model, Milton Erickson's early practices, Wittgensteinian philosophy, and Buddhism (de Shazer et al., 2021). The first three of them are directives, while the others give an idea about how the solution-focused approach is placed on a therapeutic basis:

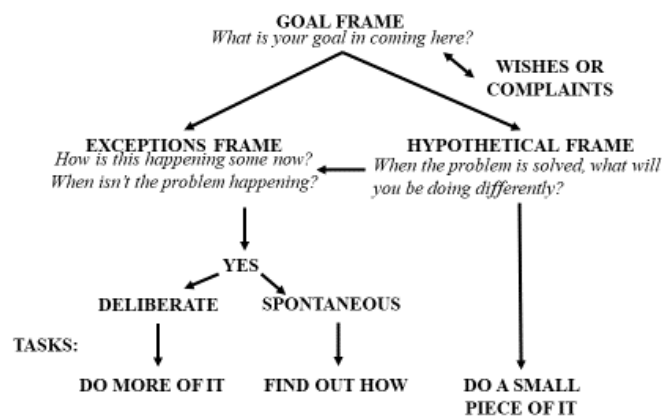
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- If it's not broken, don't fix it.
 - If something works, do more.
 - If something isn't working, do something else.
 - Small steps make big changes.
 - The solution is necessarily directly related to the problem.
 - The solution language is different from the one needed to describe the problem.
 - Exceptions are always available.
 - Change is possible when you are future oriented.
-

(Connie & Metcalf, 2009; de Shazer et al., 2021; Ratner et al., 2012; Walter & Peller, 1992).

Therapeutic Relationship. The theoretical framework of the solution-focused approach manifests itself in an unusual implementation style in the counseling room. Bertolino and O’Hanlon (2002) see a collaborative relationship as a prerequisite for helping. They recommend some unique communication techniques to establish such a rapport with clients quickly by considering the counseling process is time-limited. Some of these techniques are attempts such as using the words used by the client, complying with the speaking speed of the client, mirroring the body language of clients (Macdonald, 2011). Various attitudes, such as the not-knowing stance of the counselor, deliberately pretending to be incompetent, directing the client to tell more with curiosity, cheerleading the client up using praise and compliments, also support this relationship (Ratner et al., 2012).

Therapeutic Process. De Jong and Berg (2013) suggest that the solution-focused help process includes two crucial actions: Developing well-structured goals based on the reference frame of the client and developing solutions based on exceptional situations. Therefore, counseling is about as much of a problem-free moment as possible. Although clients describe their problems, its only function is to allow the counselor to engage with the client and think about how to move on to the next stage, where they will start discussing solutions (Walter & Peller, 1992). As Corey (2017) asserts, the key to the solution is to set out hypothetical goals through questions such as the miracle question then structure these goals by examining exceptional situations. In the figure below, de Shazer's (1988) roadmap summarizing a solution-focused counseling session is presented by Walter & Peller (1992):

Figure 1. The Roadmap of A Solution-Focused Counseling Session



Note. From *Becoming Solution-Focused in Brief Therapy* (p. 64), by J. L. Walter & J. E. Peller, 1992, Taylor & Francis (<https://doi.org/10.4324/9780203776919>). Copyright 1992 by Taylor & Francis.

Solution-Focused Brief Counseling in Turkish Context

In this section, the compatibility of solution-focused principles with the dominant Turkish culture, the advantages & disadvantages of providing solution-focused help in the Turkish context, and the predisposition of Turkish psychological counselors to provide solution-focused help will be discussed, respectively.

The Compatibility of Solution-Focused Theoretical Framework with Turkish Culture. Turkey has a high diversity of ethnic origin, religious belief, lifestyle, and socio-economic characteristics. Thus, it is challenging to discuss a typical Turkish culture. The majority of Turkish people are in a transition period from Eastern lifestyles, values, and attitudes toward Western ones. Erguder et al. (1991) report that 60% of Turkey's population lives in big cities such as Istanbul, Izmir, Ankara, and Adana, where Western values are more common. Even so, Turkish society is still mostly collectivist and strives for individualism. For example, Hofstede (1980, 1986, 1991) stated that Turkish society consists of individuals who accept authoritarian values, inequalities of power and status, avoid uncertainty by adhering to religious rules, and feel dependent

on the authorities. On the other hand, A minority group values individualism, independence, autonomy, assertiveness, and self-actualization (as cited in Mocan-Aydın, 2000). Especially in the last two decades in Turkey, the political climate has been increasingly oppressive and created a culture in which ideological differences and individualistic values are considered equivalent to treason by the authorities (Deustshce Welle Turkish, 2021).

A counseling approach based on postmodernist ideas will be difficult to implement in a society where criticism of power holders such as authority, religion, doctors, experts, and parents is not welcome. By its nature, the solution-focused approach opposes authority, expertise, objectivity, and all kinds of normative assumptions. In addition, it relies on the ability of people to create constructive changes in their own life (De Jong & Berg, 2013). On the contrary, Turkish society tends to be externally controlled and expects anything good for themselves coming from more knowledgeable others (God, authorities, experts, etc.), according to Mocan-Aydın (2000). Erguder et al. (1991) showed that obedience to authority and understanding of fatalism are among the characteristic features of Turkish society. It reveals the difficulty of casting aside the objective knowledge and language created by the "experts" (physicians, academics, psychologists, counseling psychologists, etc.) who hold power in the mental health field in Turkey. For example, Frankl (2006) mentions that a client who is a victim of sexual abuse, who reads on traditional psychotherapy, is stuck in the thought of when she will pay the price for her experiences. Because this woman, through her readings on the dominant psychotherapy school of that era, learned that if a person does not have a good first six years of life, there will be negative consequences in the subsequent years. The dominant language of psychiatry can also influence the Turkish people. For example, in such a society, individuals may be inclined to talk about themselves in a problem-oriented way, evaluating their personalities or psychological well-being not according to their internal standards but based on the standards created by recognized individuals (Nichols, 2014). Faller (2001) also states that overconfidence and dependence on the knowledge of experts will lead clients to use analytical, past, and problem-focused language instead of using a life-changing, future, and solution-focused language about themselves.

Considering Turkish society reacts to events, Koydemir et al. (2014) express that Turkish culture is pathological and reactive. Features such as external locus of control and short-term focus to avoid uncertainty feed this aspect of Turkish society. Turkish people are used to taking action when faced with a problem rather than taking action before the problems occur (Gercik, 2020). In this regard, Turkish reactivity is consistent with the philosophy of the solution-focused approach. Furthermore, according to Connie and Metcalf (2009), unlike traditional counseling schools, the solution-focused approach is not a model that encourages therapy to meet needs such as personal development, growth, reaching deeper meanings in life, or prevention. One of the most important principles of solution-focused psychological counseling is the concept of "if it ain't broke, don't fix it." In this regard, the solution-focused approach works when it is necessary to solve an existing problem rather than achieving therapeutic goals such as personal development or gaining insight (De Jong & Berg, 2013). This is consistent with the general tendency to seek psychological help in Turkish society. As stated by Kagnici (2013), almost all clients in Turkish society start to seek professional help when they have a problem that they cannot solve on their own, and it is rare to encounter people who come to seek advice with expectations such as awareness and personal development.

Another characteristic of Turkish society is that it tends to attribute the causes and solutions of problems to people, institutions, events, and other external conditions outside of itself, instead of taking a responsible attitude (Toktamisoglu, 2004). Therefore, they are more concerned with what others should do than trying to change themselves. This attitude, which reduces the influence of individuals on their own lives, is related to the fact that Turkish society shows a pessimistic and emotionally dominant approach to negative situations rather than being optimistic, hopeful, and constructive. Moreover, according to Toktamisoglu (2004), Turkish people primarily think about why something cannot be done instead of how it can be done. Thus, they are more likely to focus on weaknesses and failures than strengths, opportunities, and competencies. These features of Turkish society conflict with the solution-focused approach, which makes the individuals extremely active in constructing their own solutions. Walter and Peller (1992) and de Shazer et al. (2021) state that well-structured goals are action-oriented and under the control of the client. Not assuming responsibility and expecting change from others may lead to being stuck in non-functional solutions, which Sklare (1997) defines as negative or unknown goals. Also, Instead of thinking about how it can be solved, focusing on why any problem cannot be

solved also contradicts the solution-focused approach, which does not see the causes of the problem as related to the solution (Ratner et al., 2012). In this respect, it may be easier for Turkish clients to explain what they don't want than what they like when clients come to counseling. They may also be prone to complainant and visitor types of relationships (de Shazer, 1988).

Solution-Focused Counseling Practices in the Turkish Context. The first and most essential element of the solution-focused helping process is to build a rapport based on genuine equality, trust, and cooperation (Bertolino & O'Hanlon, 2002). Dialogues between the counselor and the client take place under the guidance of two understandings about the parties to this relationship. The first is the idea of "client as an expert," which implies that clients should educate the counselor about their own lives (Corey, 2017). For this reason, unlike the reader-oriented dialogue seen in traditional approaches, text-oriented dialogue is essential in the solution-focused helping process (de Shazer, 1994). Accordingly, the counselor does not expect narratives of the client to conform to his knowledge as a reader. The narratives are the knowledge itself. Similarly, the second understanding that guides the interview is the not-knowing stance of the counselor. Therefore, counselors try to stay a step behind, deliberately pretending to be ignorant or incompetent.

Considering the applicability of the views of "the client as an expert" and "the counselor who comes one step behind" in Turkey, the tendency of Turkish society to external control and its dependence on authority figures come to mind. As Atkinson and Lowe (1995) argue, the members of such collectivist cultures may need more directive and authoritative counselors. According to this, an active and instructive counselor who does not hesitate to use his professional power for the client may be more suitable for the expectations of the Turkish people (Mocan-Aydin, 2000). Hence, in Turkey, the not-knowing stance of the counselor may be perceived by clients as a real lack of knowledge and inexperience, and it may damage the therapeutic relationship and lead to early termination.

It is possible to say that the cinema of a society reflects that culture. Gencoglu (2019) has revealed the perceptions of counseling in Turkish cinema. One of these perceptions is that mental health counselors shown in films are portrayed differently from other members of society appearance, attitude, behavior, speech, and style, alienated from the culture they live in and extraordinary. In addition, Gencoglu (2019) mentioned that mental health professionals are criticized and caricatured by filmmakers because of these characteristics. It may show that Turkish people want mental health professionals to be more like them. In this regard, attitudes such as using clients' languages, speaking like them, sitting like them, and dressing like them, which Macdonald (2011) states as specific to solution-focused counseling, could better respond to this expectation in Turkish society. It can also help clients establish a sincere and collaborative relationship with their counselor. The other issue revealed by Gencoglu (2019) is that mental health services are perceived as excessively expensive by clients. This result shows that solution-focused counseling could be more advantageous than traditional approaches in terms of applicability in Turkey. It is a well-known fact that solution-focused counseling is a shorter intervention even when compared to the short-term models of other traditional approaches (de Shazer, 1991). Therefore, solution-focused counseling seems to be more accessible in Turkey.

De Jong and Berg (2013) outlined the steps of solution-focused help as follows: Problem defining, developing well-structured goals, identifying exceptions, and offering end-of-session feedback. As previously noted, Turkish people may be culturally more prone to problem-focused thinking (Toktamisoglu, 2004). In this context, allowing clients to talk about the problem and express their feelings could positively affect the therapeutic relationship. But, solution-focused help, by its nature, requires a process that focuses on a single issue at a time (Macdonald, 2011). For example, when the client may suffer from depression and alcoholism, the counselor should agree with the client on which one to address first. This criterion may cause Turkish clients to experience some difficulties during the problem identification stage of solution-focused practices. Because, in the Turkish context, clients delay getting help for reasons such as social stigma, gender, cost, and motivation, or they see counseling as a last resort (Arslantas et al., 2011; Kizildag et al., 2012). Therefore, clients rarely come to counseling with a single issue. They usually seek counseling after struggling with multiple problems. So, they may be unable to decide where to start.

There are some open-ended questions to develop well-structured goals in solution-focused counseling. These are: What will you do instead? (positive orientation), "How will you do this?" (action-oriented), "What will

you do differently as soon as you leave here?" (here and now), "How will you know you can do that?" (clearly), "What will you be doing when that thing happens?" (under the control of the client) (De Jong & Berg, 2013). It is possible to say that "to do" is the keyword of solution-focused goal setting. According to this, the solutions to be constructed should be immediately realizable, concrete, and behavioral (Walter & Peller, 1992).

A distinctive feature of Turkish society is practical intelligence. Turkish people are good at producing instant solutions, escaping the easy way, finding cheap and easy ways in seemingly desperate situations, and solving problems using existing facilities (Gercik, 2020; Tekinalp, 2015). According to Gercik (2020), these abilities usually lead to cheating, deception, avoiding work, theft, corruption, and gaining profit. However, these could also be advantages to structure goals in the solution-focused helping process. The Turkish clients' ability to find easy ways and use the available opportunities can make it easier for them to propose functional solutions that will be realized by them immediately.

As previously indicated, de Shazer (1988) has mentioned that solutions come from two frameworks, which he calls the hypothetical and the exceptions. The hypothetical framework includes clients' assumptions about what they will do differently in their lives once their problems are gone (The answer to miracle question). On the other hand, The exceptions framework includes clients' past experiences when they did not experience the problem or were less severe. In the Turkish context, it is probable to say that examining exceptional situations can be more advantageous. Because answering the miracle question is like creating a future scenario where things go better for the client (Walter & Peller, 1992). On the contrary, Turkish clients may wait for the counselor to know what would be beneficial for them, they may have difficulty creating a hypothetical solution universe, and they may answer the miracle question with "I don't know." Besides, the past-oriented thinking style of these clients can make it easier to remember and describe exceptional situations in the past. While there may not be empirical findings regarding the limitations encountered by solution-focused psychological counselors in Turkey, Baygül (2015) mentions the possibility of receiving responses such as non-specific miracles and impossible miracles. Expressions like "I don't know, I would feel more peaceful, I would feel happier, I wouldn't get angry anymore" can also be cited as examples of such responses.

An anonymous idiom known in Turkey says: Start like a Turk, continue like a German, and end like an English. It means that Turkish people are initially passionate and ambitious but not so good at maintaining and finishing work when their expectations of quick results are not met (Tekinalp, 2015). Tekinalp (2015) also argued that Turkish society is prone to polarized thinking. In Turkey, these features can lead to seeking help with the expectation of "full recovery in a very short time" and leaving the counseling process early when this expectation is not satisfied (Tryon, 1999). However, scaling questions in the solution-focused approach can help Turkish clients understand that change can happen not with a single behavior but by taking a series of small steps within a fixed time (de Shazer et al., 2021). Hence, scaling questions can be instructive and motivating in this culture whose members are impetuous and polarized in their thinking.

The final step of solution-focused helping is feedback from the counselor to the client, which includes compliments, strengths, goals, exceptions, helpful behaviors, and homework (Walter & Peller, 1992). While formulating the content of this feedback, solution-focused experts working with Turkish clients may need to pay attention to some cultural characteristics, especially in compliments and homework. For example, in Turkish culture, praise and compliments are rarely communicated directly, but mostly indirectly or through physical means such as back-patting; members of society have difficulty expressing positive impressions and feelings about one another (Gultekin & Voltan-Acar, 2004). Even today, in some families, paternal praise only occurs at truly private moments, and it could make Turkish clients perceive the compliments of authority figures as extremely valuable. So, when the solution-focused helpers prioritize compliments that directly express clients' strengths, they could be helpful as a model and highly therapeutic (De Jong & Berg, 2013). For homework, the best way suggested by Berg and Reuss (1998) is to create opportunities for the clients to apply more the workable behaviors they are already doing. As I previously stated, this seems more appropriate for Turkish society, which tends to maintain what works rather than try new things (Toktamisoglu, 2004). When homework focuses on hypothetical solutions and unattempted actions, Turkish clients may not implement them, and their commitment to the plan may decrease. Finally, although it is widely recommended to make a written agreement to increase clients' commitment to this plan (Macdonald, 2011), Yorgun and Voltan-Acar (2014) emphasize that "promising" would be more meaningful for Turkish clients than an

agreement on paper. As a matter of fact, even in commercial activities in Turkey, the phrase "my word is a bond," which emphasizes the importance of the word, has an obligatory agreement function between the parties.

The Predisposition of Turkish Counselors to Solution-Focused Helping. Counselors study and work in the community they interact with, not in an isolated jar. As a result, it might be misleading to assume that mental health professionals will differ from the public because of their education (Gergen, 1985). It might be challenging to say that while the society in which they live is externally controlled, dependent on authority, collectivist, problem-oriented, and cunning, counselors are controlled internally, individualistic, solution-focused, and don't care about hierarchical structures (Erdur-Baker, 2007). In this respect, it is probably critical to consider the cultural predisposition of helpers to provide solution-focused help.

Turkish Counselors and Expertise. The Turkish proverb "Whoever has the seal, he is Solomon" means that whoever holds the authority is the strongest. It reflects a social culture in which people adopt positions and titles as symbols of supreme superiority. This superiority extends not only to corporate life but also to social life; the titles of people determine their human worth in the eyes of society (Tezcan, 1997). For this reason, dominating others, becoming an authority, gaining position and power has become a natural need for almost everyone in Turkish culture (Gercik, 2020). Mental health professionals may also be in this group. In Turkey, while the mental health professionals (psychiatrists, psychologists, and counselors) are making efforts for the mental health law, they also engage in title and competency debates (Ozyurek, 2019). I usually experience that my colleagues display their diplomas and certificates in a counseling room rather than a waiting room. Gencoglu (2019) has also pointed out that in media representations of psychotherapy scenes, diplomas and certificates are often displayed in the room. In addition, my students introduce themselves as counselors on their social media accounts when they are still students or use the title of "expert" when they continue their graduate studies. Many clinical psychologists are not content with this title and introduce themselves as "expert clinical psychologists" (Cirakoglu, 2021).

In sum, mental health practitioners in Turkey may need their expertise to be known and respected by the public. This need may make it difficult for counselors to internalize some basic solution-focused principles such as "the client as an expert." Therefore, the counseling process may turn into an intervention in which techniques such as miracle questions are applied mechanically by the counselor. Lipchick (2002) warns that when solution-focused counseling practitioners fail to internalize the underlying assumptions and principles of the techniques, the solution-focused approach will become increasingly formulaic in style and essential elements like rapport will be overlooked. Similarly, Ratner et al. (2012) have stated that moving beyond formulaic miracle question-like patterns and being able to provide genuine and spontaneous responses is one of the conditions for being an effective solution-focused practitioner. When practitioners unintentionally or subconsciously assume the role of an expert, they often receive responses like 'I don't know' in response to miracle question-like techniques (Sklare, 1997). In such cases, Sklare (1997) suggests using the pattern 'If you knew...' However, under conditions where the therapist is perceived as an authority or expert, practitioners may be directed to design future plans recommended by the therapist and approved by clients, before fully reaching the narrative preferred by the client.

Turkish Counselors and Cultural Confinement. It is a controversial issue to what extent the counselors in Turkey can adopt the social constructivist and multicultural perspective demanded by the solution-focused approach. Kagnici (2013) expressed her concerns about whether Turkish society maintains the cultural heritage left by the well-known Turkish philosopher Mevlana, who said, "Come, whoever you are, come.". For example, terrorism in Turkey causes racist attitudes towards the citizens living in the southeast of the country, and children from the north grow by learning not to like the people of the southeast. During Ramadan, it is possible to see a lot of news about people being attacked for eating on the street. It includes hate crimes against sexual orientation. In summary, in the general population in Turkey, there is a prevalent tendency to revere one's own cultural characteristics and values while displaying a hostile attitude towards different cultural traits, religions, sexual orientations, or values. It can be said that discrimination is instilled from childhood. This is expected to increase the ethnocentrism of psychological counselors while undermining their multicultural competence (Demirel, 2016). In this regard, there is a risk of training counselors in Turkey who view their cultural assumptions, stereotypes, and personal beliefs as legitimate truths. Pedersen (2008)

refers to this as "cultural confinement." From the perspective of solution-focused psychological counseling, which is one of the products of the social constructivist paradigm that posits that reality is socially constructed and dominant narratives can be deconstructed, such confinement is constraining (Berg & de Shazer, 2012). This is because solution-focused psychological counseling encourages setting aside what one knows from academic training to cultural teachings and emphasizes learning from the client (Anderson & Goolishian, 1992). However, the stronger a person's belief in the correctness and truthfulness of what they already know and hold, the more biased they will be against the existence of any other truths (Kağnıcı, 2013).

The Outcome Expectations of Turkish Counselors. Cormier and Cormier (1991) mention that empathy, unconditional positive acceptance, and sincerity should be fixed on the therapeutic ground of all contemporary counseling approaches, but providing these conditions alone may be insufficient to respond to clients from different cultures. Mocan-Aydin (2000) also emphasizes that insight-oriented help models may be helpful but insufficient for Turkish clients' outcome expectations. Conceivably, the same situation applies to individuals who give help. For example, Sahin, Togay, and Atici (2019) found that counselor candidates expect the counseling process to solve their clients' problems, make a positive difference in their lives, and match their expectations. These are the self-evaluation criteria for counselor candidates. Turkish counselors may feel comfortable with such a well-structured approach, as solution-focused counseling provides the opportunity for concrete, behavioral, and measurable results (Mocan-Aydin, 2000).

Turkish Counselors' Competencies in Brief Interventions. As Corey (2017) pointed out, solution-focused counseling requires establishing rapport, setting goals, producing solutions, and reaching a result, sometimes in a single session. As a result, practitioners should be skilled in brief interventions. On the other hand, counselor education programs in Turkey do not offer education in the application of solution-focused brief counseling. Theoretical solution-focused brief counseling education is part of the counseling theories course at graduate programs, and it takes place as a course at graduate and doctoral programs (The Council of Higher Education, 2018). It can enable counselors educated in Turkey to become familiar with the theoretical framework of solution-focused counseling. But, counseling practices education in Turkey is limited to the client-centered approach (Mocan-Aydin, 2000). Generally, counselor candidates develop their skills in brief interventions through personal efforts (books, informal education, etc.).

The majority of counselors in Turkey work at schools. Dost and Keklik (2012) revealed that these school counselors have problems such as paying attention to too many students, handling tasks other than their job description, attending too many commissions, and wasting time on administrative matters. As a result of these working conditions, Dogan (2000) further argued that school counselors have difficulty applying the models that require long-term practice. From this point, school counselors in Turkey may need orientation to a solution-focused approach that is short, pragmatic, and easier to apply at schools (Sklare, 1997).

Discussion, Conclusion and Recommendations

It is hard to discuss the shared social characteristics of Turkish society, which has a complex cultural diversity. Notwithstanding, several sociological studies (Koydemir et al., 2014; Erguder et al., 1991; Gercik, 2020; Tekinalp, 2015; Tezcan, 1997; Toktamisoglu, 2004) indicate that Turkish people mostly have the following attributes: Authoritativeness, external locus of control, approval for power inequalities, scapegoating, impetuosity, the capability of finding cheap and simple ways, and of producing instant solutions. Because of these features, it may be more difficult for some solution-focused assumptions to be adopted by the public in the Turkish context. For example, as mentioned before, Turkish society expects anything good for themselves coming from more knowledgeable others such as god, authorities, and experts (Mocan-Aydin, 2000). Because of Turkish people tend to authoritarianism (Gercik, 2020; Tezcan, 1997), they might challenge to cast aside the dominant problem terminology created by experts and authorities. External control and placing responsibility on others can keep them from building their own solutions. On the other hand, their ability to find practical solutions may allow them to think that the resolution may sometimes be less complex than it seems.

Clients' expectations in Turkish society that the counselor should be authoritative and directing may lead to the "not-knowing stance of counselors" being misinterpreted as true ignorance. At the same time, the general population complains that mental health professionals are outsiders to the community in terms of their

appearance, attitudes, behaviors, and jargon (Gencoglu, 2019). In other words, in such a context, individuals may prefer helpers who guide with their knowledge but does so by using the client's language. Hence, solution-focused counseling may become a more culturally appropriate helping model if a more directive but empathic counselor style is adopted, specific to the Turkish context. In this way, it may be possible for clients to establish a more collaborative relationship with their counselors while also increasing their confidence in the counseling process.

Turkish people rarely seek counseling with a clear problem definition, even though solution-focused counseling requires clients to focus on a single problem at a time (Macdonald, 2011). As indicated previously, in Turkey, factors such as social stigma, sex-role stereotypes, cost, and lack of motivation lead to seeing psychological help as a last resort (Arslantas et al., 2011; Kagnici, 2013; Kizildag et al., 2012). It usually causes clients to bring their long-standing difficulties to counseling. It may be crucial for counselors to prioritize the clients' emotional experiences and not rush to move on to solution talk while working with Turkish clients by considering this. To facilitate these clients' getting into solution talk, using past-focused questions and examining exceptional situations may be more advantageous than using the miracle question. Clients with long-standing difficulties may be eager to discuss how they have coped with them so far rather than imagining a future without them (de Shazer, 1988; De Jong & Berg, 2013; Mocan-Aydin, 2000).

It is reasonable to conclude that Turkish counselors are under cultural influences that both impede and facilitate their implementation, considering the predisposition of practitioners to the solution-focused approach. For instance, like the general population, counselors may attach particular importance to expertise, authority, superiority, status, and title. For this reason, it may be challenging for them to adopt a "not-knowing," egalitarian, and collaborative stance, and it can give rise to a mechanical style (Corey, 2017). Besides, in Turkey, counselors' sensitivity to cultures and differences is a disputable issue, according to Kagnici (2013), because they may tend to see their views as realities. These potential pitfalls may inhibit the applicability of solution-focused counseling in Turkey.

Another obstacle that limits the ability of psychological counselors in Turkey to offer solution-focused help is that training programs focus on long-term help models such as individual-centered counseling (Mocan-Aydin, 2000). According to Dogan (2000), this situation is incongruent because most counselors work in schools, where long-term interventions are impossible to implement. On the other hand, this difficulty may increase their interest in the solution-focused approach by encouraging counselors to seek shorter, more pragmatic interventions. There is also evidence that counselor candidates would appreciate providing such interventions (Sahin, Togay, & Atici, 2019). Accordingly, they could be more willing to work on concrete solutions rather than therapeutic goals such as gaining insight and personal development.

Thus far, I have attempted to provide a perspective on the applicability of solution-focused counseling in the Turkish context, taking into account both the counselors' and the general population's cultural realities. The main weakness of this study is that it contains generalizations continuously. Considerably more work will need to be done to investigate differences across-local cultures. Unfortunately, since the study was limited to an investigation of literature, it did not include data collection and analysis from the field. Notwithstanding its limitations, this endeavor, I believe, recommends certain practice modifications for both the solution-focused counselors in Turkey and the multicultural counselors who counsel clients from collectivist cultures. Also, the implications of the current study would be a fruitful area for further research.

An important practical implication is that Turkish clients' trust and commitment to the knowledge of experts can be utilized to facilitate solution-focused work. For instance, if they teach clients about solution-focused counseling before the sessions begin or provide psychoeducation about a solution-focused approach during the counseling process, clients will be more willing to collaborate with counselors. Furthermore, counselors will need to be more directive and active than expected. A take-charge counselor, especially in problem and goal-setting steps, can make Turkish clients feel in safe hands. Accordingly, in the Turkish context, it may be therapeutic for counselors to step a little away from the "not-knowing stance" unless they move into the "all-knowing stance." If counselors go one step ahead by maintaining their ordinary appearance, they may be regarded by clients as authoritative but sincere. Another practical implication is that counselors may need to modify some techniques to facilitate working with Turkish clients. For example, when asking the miracle

question in the goal-setting step, they should ask the clients to imagine their "perfect" moments in the past instead of a miracle that will happen the following day. By this means, they may be less likely to hear "I don't know" answers. In parallel, if counselors adjust homework to encourage clients to use solutions that have worked before, clients will commit to the change plan better.

An important issue that I cannot address in this study is the linguistic adaptation of solution-focused counseling. Future research in this field would be of great help in determining the applicability of solution-focused counseling in Turkey. Also, further work is required to establish the therapeutic efficiency of the above practical implications. For example, what is now needed is an experimental study that investigates how providing psychoeducation to clients about solution-focused counseling will affect the counseling process. Finally, Postmodernist education policies are required to protect counselors from cultural confinement. These policies should serve to help counselors to overcome their cultural barriers, as well as to improve their brief helping skills.

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References

- Anderson, H., & Goolishian, H. (1992). The client is the expert: A not-knowing approach to therapy. In S. McNamee & K. J. Gergen (Eds.), *Therapy as social construction* (pp. 25-39). Sage. <https://psycnet.apa.org/record/1992-98567-002>
- Arslantas, H., Dereboy, I. F., Asti, N. & Pektekin, C. (2011). Factors influencing adults' psychological help-seeking attitudes. *Meandros Medical And Dental Journal*, 12(1), 17-23. <https://dergipark.org.tr/tr/pub/meandrosmdj/issue/44185/545213>
- Atkinson, D. R., & Lowe, S. M. (1995). The role of ethnicity, cultural knowledge, and conventional techniques in counseling and psychotherapy. In J. G. Ponterotto, J. M. Casas, L. A. Suzuki & C.M. Alexander (Eds.), *Handbook of multicultural counseling* (pp. 387-414). Sage. <https://psycnet.apa.org/record/1995-98648-019>
- Berg, I. K., & de Shazer, S. (2012). Making numbers talk: language in therapy. *InterAction*, 4(2), 51-77. https://sfwork.com/resources/interaction/06Berg_de-shazer.pdf
- Berg, I. K., & Reuss, N. H. (1998). *Solutions step by step: A substance abuse treatment manual*. WW Norton & Co. <https://wnorton.co.uk/books/9780393702514-solutions-step-by-step>
- Bertolino, B., & O'Hanlon, B. (2002). *Collaborative, competency-based counseling and therapy*. Allyn & Bacon. <http://www.worldcat.org/oclc/606553173>
- Cirakoglu, O. C. [@okancem]. (2021, December 13). "Uzman Klinik Psikolog" diye bir unvan yok arkadaslar. "Uzman Psikolog" ya da "Klinik Psikolog" olarak kullanabilirsiniz [There is no title as "Expert Clinical Psychologist", my friends. You can use it as "Specialist Psychologist" or "Clinical Psychologist"] [Tweet]. Twitter. <https://twitter.com/okancem/status/1470420789266726916?s=20>
- Connie, E., & Metcalf, L. (2009). *The art of solution focused therapy*. Springer. <http://www.worldcat.org/oclc/838243394>
- Corey, G. (2017). *Theory and practice of counseling and psychotherapy, enhanced* (10th ed.). Cengage Learning. <https://www.cengage.uk/shop/isbn/9780357671429>
- Cormier, H.W., & Cormier, S. L. (1991). *Interviewing strategies for helpers: Fundamental skills and cognitive behavioral interventions*. Brooks. <https://psycnet.apa.org/record/1990-98518-000>

- De Jong, P., & Berg, I. K. (2013). *Interviewing for solutions* (4th ed.). Brooks. <https://www.cengage.uk/shop/isbn/9781111722203>
- Demirel, K. (2016). *Psikolojik danışmanların kökkültürlü psikolojik danışma yeterlik algılarının incelenmesi* (Publication No. 419280) [Master's Thesis, Ankara University]. https://dergiler.ankara.edu.tr/xmlui/bitstream/handle/20.500.12575/32716/Kenan_DEMIREL.pdf?sequence=1&isAllowed=y
- de Shazer, S. (1988). *Clues: Investigating solutions in brief therapy*. WW Norton & Co. <https://psycnet.apa.org/record/1988-97681-000>
- de Shazer, S. (1991). *Putting difference to work*. WW Norton & Co. <http://www.worldcat.org/oclc/1036796319>
- de Shazer, S. (1994). *Words were originally magic*. WW Norton & Co. <https://psycnet.apa.org/record/1994-97917-000>
- de Shazer, S., Dolan, Y., Korman, H., Trepper, T., McCollum, E., & Berg, I. K. (2021). *More than miracles: The state of the art of solution-focused brief therapy* (2nd ed.). Routledge. <https://doi.org/10.4324/9781003125600>
- Deustshce Welle Turkish. (2021, January 8). Erdogan bugüne kadar kimlere "terorist" dedi? [Who has erdogan called "terrorists" so far?]. *Deustshce Welle Turkish*. <https://p.dw.com/p/3nhn7>
- Dogan, S. (2000). A new approach for school counselors: Solution-focused brief counseling. *Education and Science*, 25(116), 59-64. <http://egitimvebilim.ted.org.tr/index.php/EB/article/view/5282/1444>
- Dost, M. T., & Keklik, I. (2012). Professional issues in counseling as perceived by individuals working in counseling settings. *Mehmet Akif Ersoy University Journal of Faculty of Education*, 1(23), 389-407. <https://dergipark.org.tr/pub/maeuefd/issue/19396/206064>
- Erdur-Baker, O. (2007). Counseling psychology and cultural factors. *Turkish Psychological Counseling and Guidance Journal*, 3(27), 109-122. <https://dergipark.org.tr/tr/pub/tpdrd/issue/21447/229853>
- Erguder, U., Esmer, Y., & Kalaycioglu, E. (1991). *Türk toplumunun degerleri* [Values of turkish society]. Turkish Industry and Business Association. <https://tusiad.org/tr/yayinlar/raporlar/item/9121-turk-toplumunun-degerleri>
- Faller, G. (2001). Positive psychology: A paradigm shift. *Journal of Pastoral Counseling*, 36, 7-14. <https://eds.s.ebscohost.com/eds/pdfviewer/pdfviewer?vid=0&sid=e68a6e39-2cc8-4ca2-be7d-072f031ffb6d%40redis>
- Frankl, V. E. (2006). *Man's search for meaning*. Beacon Press. <http://www.worldcat.org/oclc/804824222>
- Gencoglu, C. (2019). Psychological counseling/psychotherapy perceptions in turkish movies. *Turkish Studies-Social Sciences*, 14(5), 2203-2224. <http://dx.doi.org/10.29228/TurkishStudies.37369>
- Gercik, I. Z. (2020). A theoretical study on turkish social character. *Alanya Academic Review*, 4(1), 1-23. <https://doi.org/10.29023/alanyaakademik.652459>
- Gergen, K. J. (1985). Social constructionist inquiry: Context and implications. In K. J. Gergen & K. E. Davis (Eds.), *The social construction of the person* (pp. 3-18). Springer. <https://doi.org/10.1007/978-1-4612-5076-0>
- Gultekin, F., & Acar, N. V. (2004). Practicality of transactional analysis in turkish culture: An analytic overview. *Education and Science*, 29(133), 28-38. <http://egitimvebilim.ted.org.tr/index.php/EB/article/viewFile/5059/1174>
- Kagnici, D. Y. (2013). Accommodating multicultural counseling training in the guidance and counseling undergraduate programs. *Turkish Psychological Counseling and Guidance Journal*, 4(40), 222-231. <https://dergipark.org.tr/en/pub/tpdrd/issue/21460/230043>
- Kizildag, S., Demirtas Zorbaz, S., Gençtanirim, D., & Arici, F. (2012). Hacettepe university students' perceptions of getting psychological counseling help and the units which provide the help. *Mersin University Journal of Faculty of Education*, 8(3), 185-196. <https://dergipark.org.tr/en/pub/mersinefd/issue/17381/181578?publisher=mersin>
- Koydemir, S., Akyurek, F., & Topcuoglu, E. M. (2014). *Calisma hayatinda ve gunluk yasamda guvenlik kulturu* [Safety culture in business and daily life]. Bilgesam. https://www.academia.edu/9516887/%C3%87a%C4%B1%C5%9Fma_Hayat%C4%B1nda_ve_G%C3%BCnl%C3%BCk_Ya%C5%9Famda_G%C3%BCvenlik_K%C3%BClt%C3%BCr%C3%BC

- Lipchik, E. (2014). The development of my personal solution-focused working model: From 1978 and continuing. *International Journal of Solution-Focused Practices*, 2(2), 63-73. <https://doi.org/0.14335/ijsfp.v2i2.23>
- Macdonald, A. (2011). *Solution-focused therapy: Theory, research & practice* (2nd ed.). Sage. <http://dx.doi.org/10.4135/9781446288764>
- Meydan, B. (2013). Solution-focused brief counseling: A study on the effectiveness in schools. *Turkish Psychological Counseling and Guidance Journal*, 4(39), 120-129. <https://doi.org/10.17066/PDRD.85883>
- Mocan-Aydin, G. (2000). Western models of counseling and psychotherapy within Turkey: Crossing cultural boundaries. *The Counseling Psychologist*, 28(2), 281-298. <https://doi.org/10.1177/0011000000282007>
- Nichols, M. P. (2014). *The Essentials of family therapy* (6th ed.). Pearson. <https://www.worldcat.org/title/essentials-of-family-therapy/oclc/816498983>
- Ozyurek, R. (2019). Counselor education and professional identity development for the profession required laws and regulations. *Turkish Psychological Counseling and Guidance Journal*, 9(54), 883-911. <https://dergipark.org.tr/en/pub/tpdrd/issue/48897/623291>
- Pedersen, P. B. (2008). Ethics, competence, and professional issues in cross-cultural counseling. In P. B. Pedersen, J. G. Draguns, W. J. Lonner, & J. E. Trimble (Eds.), *Counseling across cultures* (pp. 5–20). Sage Publications, Inc. <https://doi.org/10.4135/9781483329314.n1>
- Poyrazli, S. (2003). Validity of rogerian therapy in turkish culture: A cross-cultural perspective. *Journal of Humanistic Counseling, Education and Development*, 42, 107-115. <https://doi.org/10.1002/j.2164-490X.2003.tb00172.x>
- Ratner, H., George, E., & Iveson, C. (2012). *Solution focused brief therapy: 100 key points and techniques*. Routledge. <https://doi.org/10.4324/9780203116562>
- Sahin, I., Togay, A., & Atici, M. (2019). Counselor candidates' perceptions about therapeutic skills and conditions. *Journal of Human Sciences*, 16(1), 56-72. <https://www.j-humansciences.com/ojs/index.php/IJHS/article/view/5347>
- Sari, T. (2015). Positive psychotherapy: Its development, basic principles and methods, and applicability to Turkish culture. *The Journal of Happiness & Well-Being*, 3(2), 182-203. <http://psikiyatridizini.net/viewarticle.aspx?articleid=19800&tammetinvar=yes>
- Sklare, G. B. (1997). *Brief counseling that works: a solution-focused approach for school counselors. practical skills for counselors*. Corwin Press. <https://eric.ed.gov/?id=ED408550>
- Sue, D. W., Sue, D., Neville, H. A., & Smith, L. (2019). *Counseling the culturally diverse: Theory and practice*. (8 ed.) Wiley. <https://www.wiley.com/en-gb/Counseling+the+Culturally+Diverse:+Theory+and+Practice,+8th+Edition-p-9781119448280>
- Tagay, O., Voltan-Acar, N., & Nalbant, A. (2016). Practicality of logotherapy concepts and techniques in turkish culture. *Ege Journal of Education*, 17(1), 105-126. <https://doi.org/10.12984/eed.53493>
- Tekinalp, S. (2015). *Aynadaki turkler* [Turks in the mirror]. Beta. <https://www.betayayincilik.com/aynadaki-turkler-p-367>
- Tezcan, M. (1997). *Türk kişiliği ve kültür kişilik ilişkileri* [Personality of turk and culture-personality relations]. Republic of Türkiye Ministry of Culture and Tourism. <http://www.worldcat.org/oclc/606244834>
- Toktamisoglu, M. (2004). *Kot pantolonlu yönetici* [Manager with jeans]. Mediacat. <http://www.worldcat.org/oclc/212907246>
- Tryon, G. S. (1999). Counseling dropout relative to client attractiveness, disturbance, and expected number of sessions. *Counselling Psychology Quarterly*, 12(3), 285-291. <https://doi.org/10.1080/09515079908254098>
- Walter, J. L., & Peller, J. E. (1992). *Becoming solution-focused in brief therapy*. New York: Routledge. <https://doi.org/10.4324/9780203776919>
- Yorgun, A., & Voltan-Acar, N. (2014). The practicality of reality therapy in turkish culture: an analytical overview. *Education & Science*, 39(175), 216-226. <http://dx.doi.org/10.15390/EB.2014.460>

Investigation of the Mediator Role of Hope in the Relationship Between Self-Compassion and Resilience in Adolescents

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ABSTRACT

This study evaluated self-compassion, hope and resilience in high school students using a mediation model. The study has two main objectives. The first one is to determine whether these variables differ according to gender. The second objective involves the evaluation of a theoretical model that reveals the mediating effect of hope in the link between self-compassion and resilience. The study included a total of 730 students (16.00±1.02 years old), 426 female and 304 male participants. Difference statistics were analyzed using Independent Sample t-test. As a result of the analysis, it was seen that the mean scores of self-compassion and psychological resilience of male students were higher than female students. However, it was found that participants' hope scores did not differ based on gender. Mediation analysis was conducted using regression-based bootstrapping. In the mediation analysis, direct effects revealed that self-compassion significantly predicted hope and resilience, and hope significantly predicted resilience. When the indirect effect was examined, it was observed that the path coefficient between self-compassion and psychological resilience decreased significantly with the inclusion of hope as a mediator variable. Therefore, it was concluded that hope partially mediates the relationship between psychological resilience and self-compassion.

“Poke hope, appease despair.”
Edip Cansever

In today's age of anxiety, individuals can experience intense stress due to various compelling emotional states created by the lack of choice among endless options (Saleci, 2021). This situation can cause people to blame and punish themselves. For this reason, self-compassion emerges as an important concept, in which a person shows understanding towards himself and sees situations as a necessity of being human. Self-compassion can be defined as being kind to oneself when going through difficult times such as pain, failure, and inadequacy (self-kindness), being aware of and accepting negative emotions, allowing oneself to experience these emotions (mindfulness), and knowing that this difficult situation might happen to many people (common humanity) (Neff, 2003). In other words, it can be stated that self-compassion includes accepting negative situations that happen to oneself or to another person and the feeling that they are not alone because most people have experienced this situation. Thus, it can be said that self-compassion provides the courage to

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overcome experienced situations. Furthermore, it can be said that self-compassion includes the idea that negative experiences and failures are the constraints of being human, and therefore forgiveness. Given that numerous people tend to be more critical and less forgiving towards themselves, it's important to acknowledge the significance of self-compassion. (Neff, 2003). For this reason, the individual's compassion towards himself or another person who is suffering can be accepted as a source of empathy and well-being (Brown et al., 2016). Another important concept that ensures an individual's well-being is psychological resilience. Mindfulness, a sub-dimension of self-compassion, emphasises the importance of being aware of one's situation in order to show compassion to oneself in negative situations. Alibekiroglu et al. (2018) emphasises that psychological resilience is related to awareness and that an individual's awareness of negative situations is an important factor for psychological resilience.

Psychological resilience is the adaptation of the individual to the changes in life as a result of the interaction of preventive and risky factors when faced with negative situations such as divorce, terrorism, natural disasters, poverty and moving. Two processes are necessary to truly define psychological resilience. The first of these is the person's being exposed to any negative situation, and the other is the person's ability to adapt to this process even though these negativities disrupt the life of the individual (Fergus & Zimmerman, 2005; Luthar et al., 2000). Considering that people with self-compassion accept the negative situations they experience more and cope with these situations better, it is thought that self-compassion will predict psychological resilience. Richardson (2002) defines psychological resilience in three dimensions. In the first dimension, protective and risk factors that frame resilience were evaluated. Protective and risk factors have been classified as individual, familial, and environmental factors. The individual's perception of himself is among the protective factors. Self-compassion leads to a more positive self-perception, making the connection between self-compassion and psychological resilience more understandable. In the second dimension, there is the ability to cope with the experienced incident, which includes the development of the factors specified in the first dimension. Finally, in the third dimension, the individual's taking steps to grow by revealing his/her latent power after the traumatic experience takes place. The dimensions of the psychological resilience model, as Richardson (2002) stated, evoke the concept of self-compassion. Just as it is necessary to be exposed to any negative situation and to be able to cope with this situation to mention psychological resilience, a person must go through any negative experience and show acceptance and understanding to himself after this experience to mention self-compassion. From this perspective, psychological resilience and self-compassion seem to be related to each other. Indeed, positive relationships were found between self-compassion and psychological resilience in studies (Alibekiroğlu et al., 2018; Bolat, 2013; Bluth and Eisenlohr-Moul, 2017; Dilmaç-Pınar, 2020; Hayter and Dorstyn, 2014; Neff and McGehee, 2010; Nery-Hurwit et al., 2018; Olson et al., 2015; Önel, 2021; Smith, 2015; Şahin, 2014; Uysal, 2019; Yelpeze, 2019; Yıldırım, 2021). Taking steps towards growth and gaining more positive perspectives on life by associating and accepting the difficult incident that happened to the person in a negative situation might indicate hope from the concepts of positive psychology.

Hope is characterized as being decisive (activity) and thinking that there are many ways to achieve goals (Snyder, 2002). Snyder (2002) has stated that hope has three components, indicating them as conceptualized goals, planned pathways to achieve these goals, and the motivation required to put forward these strategies. Haroz et al. (2017) defined hope as an important element that protects the individual against negative situations and maintains the individual's well-being. Individuals who approach themselves with positive emotions after negative experiences tend to focus on the emotions that will take them out of this situation (Neff et al., 2005). Viewed from this angle, one might say that the motivational dimension of hope for purposeful actions may have a protective effect against negative experiences and might have a mediating role in the relationship between self-compassion and psychological resilience. According to the American Psychological Association (APA), (2020), some of the ways to increase psychological resilience are to accept negative situations, set goals for overcoming these situations, and enhance positive expectations about the problem and life. Viewed from this angle, one might say that the main components of psychological resilience are self-compassion and hope. Individuals with a high level of hope can set better goals in life and cope better with the difficulties they experience in line with these goals (Snyder et al., 1991). In addition, it could be stated that hope serves as one of the significant internal safeguarding elements for psychological resilience, considering that hope is one of the basic elements that provides the individual's confidence in himself, his environment, and the world and creates the belief that life is worth living (Zournazi, 2004). In the study conducted by Ataman (2021) to increase

psychological resilience in Syrian refugee children, it was determined that hope-oriented approaches are effective. Furthermore, in the research carried out by Aydın-Sünbül and Arslan-Gördesli (2020), The study found a significant positive relationship between self-compassion and hope in guardians with special needs children, and between hope and psychological resilience. It is among the results obtained from the studies (Ai et al., 2007; Ben-Asher et al., 2020; Cortes-Buchanan, 2007; Çiltaş, 2019; Eggerman and Panter-Brick, 2010; Erarslan, 2014; Eseoğlu, 2021; Goodman, 2004; Sleijpen et al., 2016) The study indicates a significant positive correlation between hope and psychological resilience. Based on theoretical explanations and these studies, it can be said that psychological resilience, hope, and self-compassion can be concepts that come into contact with each other, and therefore it is important to examine them together. In addition, the reactions of individuals to the negative situations they experience differ according to their developmental periods. Therefore, it's equally crucial to assess these reactions in the context of developmental periods.

Adolescence is a crucial period of physical, psychological, emotional, and identity development, characterized by significant adaptations (Kulaksızoğlu, 2018; Starner & Peters, 2004). This is a complex period of increased risk factors for negative experiences and, compared to childhood, fear and anxiety are more likely to increase after traumatic experiences (Harvey & Miller, 2000). For this reason, the way individuals behave towards themselves and show self-compassion in adolescence might have a determining effect on how they will get through this duration. In addition, since adolescence is a period that functions as a transitional bridge on the way from childhood to the responsibility of adulthood (Derman, 2018), the dimensions of hope, being able to take purposeful actions, thinking about alternative ways, and psychological resilience might have a function that facilitates the difficult process that adolescents go through. Considering these aspects, it might be important to study these concepts specific to individuals in adolescence.

More often than not, individuals engage in critical, judgmental, and cruel attitudes towards themselves (Neff, 2003). This situation can make individuals more fragile in the face of the events they experience and may prevent them from overcoming these situations. For this reason, individuals' accepting the negativities they have experienced, gaining awareness of their emotions, and allowing themselves to experience these emotions can enable them to behave more constructively toward themselves. In this way, individuals who are more compassionate towards themselves can set new goals against the negative situations they have experienced, and they can strive for these goals in a motivational way. In this way, a significant increase in hope levels may occur. From this point of view, it can be said that evaluating these concepts together is important. In addition, this situation is also important for individual protective factors, which are important dimensions of psychological resilience. Especially during adolescence, the individual tries to form his identity on the one hand and, in other way, adapt to new life roles and fulfill the requirements of school life. Considering that adolescents are more vulnerable to various difficulties created by this situation, it is important for adolescents to spend this period psychologically resilient and to be more compassionate towards themselves (France, 2007). When the psychological resilience levels are not sufficient, individuals in adolescence have difficulties overcoming negative situations and complexes and may experience psychological, social, and academic problems (Simmons & Blyth, 2009). It has been noted that individuals with high psychological resilience tend to exhibit reduced levels of depression and encounter fewer academic and behavioral issues (Howell, 2011). In addition, it can be said that self-compassion has a supportive effect on adolescents' well-being (Bluth & Blanton, 2014), preventive and protective effects on risky behaviors (Jiang et al., 2016), and various psychological problems (Bluth et al., 2015). In the research documented in the literature (Alibekiroğlu et al., 2018; Aydın-Sünbül and Aslan-Gördesli, 2020; Lefebvre et al., 2020), it was stated that self-compassion can be addressed. In addition, it was thought that self-compassion, hope, and psychological resilience were very important for well-being (Aydın-Sünbül, 2016; Aydoğdu, 2021; Yıldırım, 2018); in other words, these concepts were thought to be important factors for life satisfaction, physiological health, creating purpose and meaning, motivation, less anxiety, and depression, and the necessity of studying this issue has become clear.

The research aims to investigate gender differences in self-compassion, psychological resilience, and hope levels, and to test a hypothetical model involving hope as a mediator. The hypotheses generated in accordance with the research objectives are as follows:

H₁: Participants' self-compassion, resilience, and hope levels differ according to gender.

H₂: There are statistically significant positive association exists between self-compassion and hope.

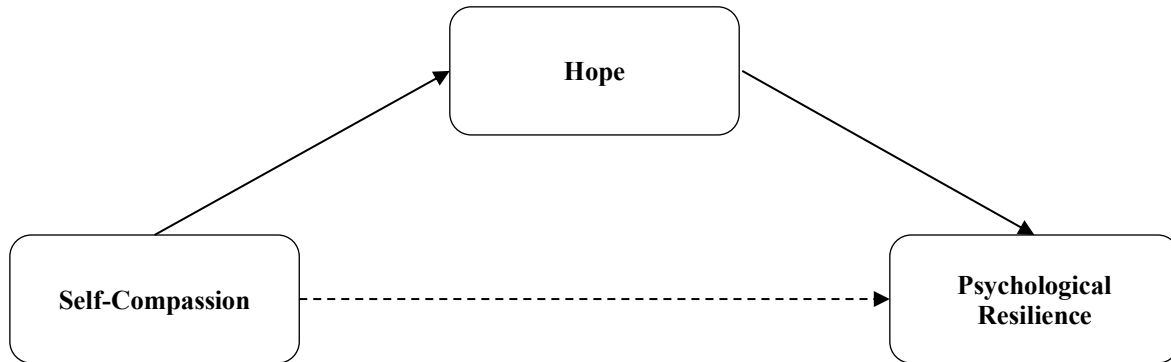
H₃: There are statistically significant positive association exists between hope and psychological resilience.

H₄: There are statistically significant positive association exists between self-compassion and psychological resilience.

H₅: In the nexus of self-compassion and psychological resilience, hope plays a mediating role.

The model for testing these hypotheses is illustrated in Figure 1.

Figure 1. The Model Tested Within The Scope of The Research



Method

Research Model

In this study, a relational screening model was used. Relational surveys are quantitative research designs used to determine the direction and level of the relationship of more than one variable with each other (Creswell, 2012). Within the scope of the research, there are dependent and independent variables and mediator variables. In this study, the endogenous variable is self-compassion, the exogenous variable is psychological resilience and the mediating variable is hope.

Study Group

The study group in which this research was conducted consists of 730 secondary school students, with a total of 304 (41.6%) men and 426 (58.4%) females, and with a mean age of 16.00±1.02. Participants are educated in official public schools. The study group, which collected data in the context of the study, was reached by the convenient sampling method. With the convenient sampling method, participants who are easily reached in terms of time and cost are reached from the population (Büyüköztürk et al., 2012). The demographic characteristics of the participants are shown in Table 1.

Table 1. Demographic Characteristics of the Participants

Demographic Variables		<i>n</i>	%
Gender	Female	426	58.40
	Male	304	41.60
Grade	9th Grade	269	36.80
	10th Grade	192	26.30
	11th Grade	174	23.80
	12th Grade	95	13.00
Total		730	100.00

Data Collection Tools

The study used various tools to assess participants' psychological resilience, hope levels, and self-compassion levels. These included the Personal Information Form, the Brief Resilience Scale (BRS), Dispositional Hope Scale (DHS), and the Self-Compassion Scale-Short Form (SCS-SF), all developed and adapted for Turkish use.

Personal Information Form. The form prepared by the researchers consists of questions that determine the age, gender, and class level of the participants.

Brief Resilience Scale (BRS). The scale, originally developed by Smith et al. in 2008 to assess the resilience of individuals, is a self-report tool consisting of 6 items rated on a 5-point Likert scale. The scale was adapted to the Turkish context by Doğan in 2015 and administered to a sample of 295 university students (86 females and 109 males). In order to demonstrate the psychometric soundness of the scale, several analyses were conducted, including internal consistency, exploratory and confirmatory factor analyses (EFA and CFA), as well as criterion-related validity checks. The CFA revealed fit indices as follows: $\chi^2/sd = 1.83$ (12.86/7), NFI = 0.99, NNFI = 0.99, CFI = 0.99, IFI = 0.99, RFI = 0.97, GFI = 0.99, AGFI = 0.96, RMSEA = 0.05, and SRMR = 0.03. For criterion-related validity, instruments such as the Oxford Happiness Scale Short Form, the Ego Resilience Scale, and the Connor-Davidson Resilience Scale were used. The analyses confirmed the unidimensional structure of the scale and the internal consistency coefficient of .83, ensuring its validity and reliability in a sample of Turkish university students and preserving its original structure. Doğan (2015) suggested that the validity and reliability of the scale should be further investigated in different age demographics. In this study, Cronbach's alpha value of the scale was found to be .78.

Dispositional Hope Scale (DHS). The Dispositional Hope Scale, crafted by C.R. Snyder and his team in 1991, aims to gauge individuals' enduring levels of hope. This 12-item tool includes two subsets: 'Alternative Ways of Thinking' and 'Actuating Thinking.' Four of the items serve as non-hope-related fillers. The scale, structured as an 8-point self-reported Likert-type, calculates its total score by summing the points from the two hope-related subsets, excluding the filler items. Scores range from a minimum of 8 to a maximum of 64. For its Turkish adaptation, Tarhan and Bacanlı undertook the task in 2015, using a sample of 676 university students. The adaptation process was divided among three distinct groups. The initial group consisted of 288 students selected randomly from Ankara, Gazi, and Başkent Universities. The second group, focusing on test-retest reliability, included 184 students from Hacettepe and Gazi Universities. The final group, aiming to bolster criterion-related validity, comprised 204 students from Ankara and Gazi Universities. This group uniquely received additional assessments, including the Life Satisfaction Scale, the UCLA Loneliness Scale, the State-Trait Anxiety Inventory, and the Beck Hopelessness Scale, alongside the Dispositional Hope Scale. Psychometric evaluations during the adaptation process revealed that 61% of the total variance was accounted for in the exploratory factor analysis, with items clustering into two factors. Confirmatory factor analysis yielded fit indices: GFI = .96, AGFI = .92, RMR = .08, NNFI = .94, RFI = .90, CFI = .96, and RMSEA = .077. The scale's internal consistency was calculated at .84. Concluding these assessments, the scale was deemed valid, reliable, and suitable for use within Turkish cultural contexts. In this study, the internal consistency coefficient of the scale was found to be .83.

Self-Compassion Scale-Short Form (SCS-SF). The Self-Compassion Scale, first created by Neff in 2003, was later presented in a shortened form by Raes et al. in 2011 to increase time efficiency. Yıldırım and Sarı undertook the Turkish adaptation of this shortened version in 2018. This adaptation included data from 800 adolescents equally divided between middle and high school students. Psychometric evaluation included construct validity, criterion correlation validity, internal consistency, and test-retest reliability. During the exploratory factor analysis (EFA), it was seen that the scale covers a single factor with two subcomponents. For criterion-related validity, instruments such as Adolescents' Subjective Well-Being Scale and Fear of Compassion Scale were used. Confirmatory factor analysis (CFA) results are as follows: $\chi^2 = 90.05$, $N = 339$, $p = 0.00$, RMSEA = 0.06, RMSR = 0.095, GFI = 0.96, NFI = 0.91, CFI = 0.95, and NNFI = 0.94. The findings obtained from these studies showed that the 11-item Self-Compassion Short Form is a valid and reliable instrument with a unidimensional structure. In this study, the Cronbach Alpha value was obtained as .78.

Data Collection Process

Before starting the data collection process, consent was obtained via e-mail from the scale owners who developed/adapted the scales used in the research to use the scales within the scope of the research. Afterward, ethical approval of the research was obtained with the permission given in detail in the ethical approval section below. Considering the maximum hygiene conditions within the scope of the measures during the COVID-19 pandemic process, the data collection method with paper and pencil was not preferred in the research. Data were collected through an online form consisting of questions asked in the scale items, and a personal information form. During the data collection process, the two coordinators of this research, accompanied by the school psychological counselor, visited the classrooms in the schools where the application was made and gave detailed information about the research. In the briefing, the questions of the participants about the research were answered. The study's online form link was distributed to interested students via the school psychological counselor via the class WhatsApp group, and the data collection application was started. Each application took 15-20 minutes. A detailed informed consent text was placed on the online form about the purpose of the research, by whom and to what extent, participant rights, and for what purpose the collected data will be used. The participants' participation in the research with their consent was obtained once through the form by adding the phrase "I have read, understood" to the subsection of the informed consent.

Analysis of Data

The data obtained with the online form in the context of the study were organized with the Microsoft Excel program, and the data set was transferred to the SPSS 25.0 Statistics Package Program. Before proceeding to the analysis, the normality test of the variables in the data set was performed. It was decided whether the data were normally distributed or not by looking at the kurtosis and skewness values in the variables. Within the scope of the research, the t-Test for Independent Samples was applied to the mean score differences between the variables. For the mediation analysis (Model 4), we utilized the PROCESS macro, an extension for SPSS recommended by Hayes in 2013. In Table 2, kurtosis, skewness values, and descriptive statistics of the variables in the data set are given.

Table 2. Skewness and Kurtosis Values of Variables and Descriptive Statistics

Variables	<i>n</i>	Av.	The Lowest	The Highest	<i>s</i>	Skewness	Kurtosis
Self-Compassion	730	30.95	11	51	7.74	-0.103	-0.15
Hope	730	42.75	8	64	10.28	-0.327	0.07
Psychological Resilience	730	18.12	6	30	5.40	-0.064	-0.322

Table 2 reveals that the dependent, independent and mediator variables are normally distributed and the skewness and kurtosis coefficients vary between -1.5 and +1.5. It can be said that the variables have a normal distribution. (Tabachnick & Fidell, 2013).

Findings And Comment

Within the scope of the first aim of the study, the t-Test for an Independent Sample was conducted to examine whether the variables of self-compassion, hope, and resilience differed according to gender. The results of the test are shown in Table 3.

Table 3. Independent Sample t-Test results of participants' Self-Compassion, Hope, and Psychological Resilience Scores by Gender

Variables	Gender	<i>n</i>	Av.	<i>s</i>	SE	<i>t</i>	<i>p</i>
Self-Compassion	Male	304	32.48	6.68	0.38	4.715	.000
	Female	426	29.87	8.25	0.40		
Hope	Male	304	43.26	10.69	0.61	1.114	.260
	Female	426	42.39	9.98	0.48		
Psychological Resilience	Male	304	19.49	5.07	0.29	5.912	.000
	Female	426	17.15	5.43	0.26		

When Table 3 is examined, it is seen that the participants' self-compassion [$t_{(728)} = -4.715, p < .01$] and psychological resilience [$t_{(728)} = -5.912, p < .01$] scores differ according to gender. However, participants' hope scores [$t_{(728)} = -1.114, p > .01$] did not differ according to gender. Both psychological resilience and self-compassion mean scores of male participants are higher than female participants.

The relations between the variables were examined within the scope of the second purpose of the research. Pearson Product Moments Correlation Coefficient was examined to investigate the degree and direction of the relationship between the variables and the results are presented in Table 4.

Table 4. Pearson Product - Moment Correlation Coefficients of Relationships Between Variables

Variables	1	2	Av.	s
1- Self-Compassion			30.95	7.74
2- Hope	.347**		42.75	10.28
3- Psychological Resilience	.561**	.300**	18.12	5.40

** $p < .01$

When Table 4 is examined, moderate positive correlation between self-compassion and hope ($r = .347; p < .01$); a moderately significant positive correlation was found between self-compassion and resilience ($r = .300; p < .01$). It is also seen that there is a moderately significant positive correlation between hope and resilience ($r = .561; p < .01$). After examining the relationships between the variables, a mediation analysis was performed between the dependent and independent variables. Mediation analysis was examined with Hayes' (2013) mediation model. Path coefficients, indirect effects, and bootstrapping results between variables are presented in Table 5 and Table 6.

Table 5. Mediation Model Coefficients

Prediction Variables		Result Variables				Y (Psychological Resilience)				
		M (Hope)								
		B	β	SE	p	B	β	SE	p	
X (Self-Compassion)	a	0.46	0.35	0.046	<.001	c'	0.36	0.52	0.022	<.001
M (Hope)		-	-	-	-	b	0.06	0.12	0.017	<.001
Stable	i _t	28.488	-	1.473	<.001	i _t	4.210	-	0.833	<.001
		$R^2 =$				$R^2 =$				
		$F_{(1, 728)} = 99.499, p < .001$				$F_{(2, 727)} = 176.703, p < .001$				

Table 6. Path Coefficients, Indirect Effect, And Bootstrapping Results for The Mediation Model

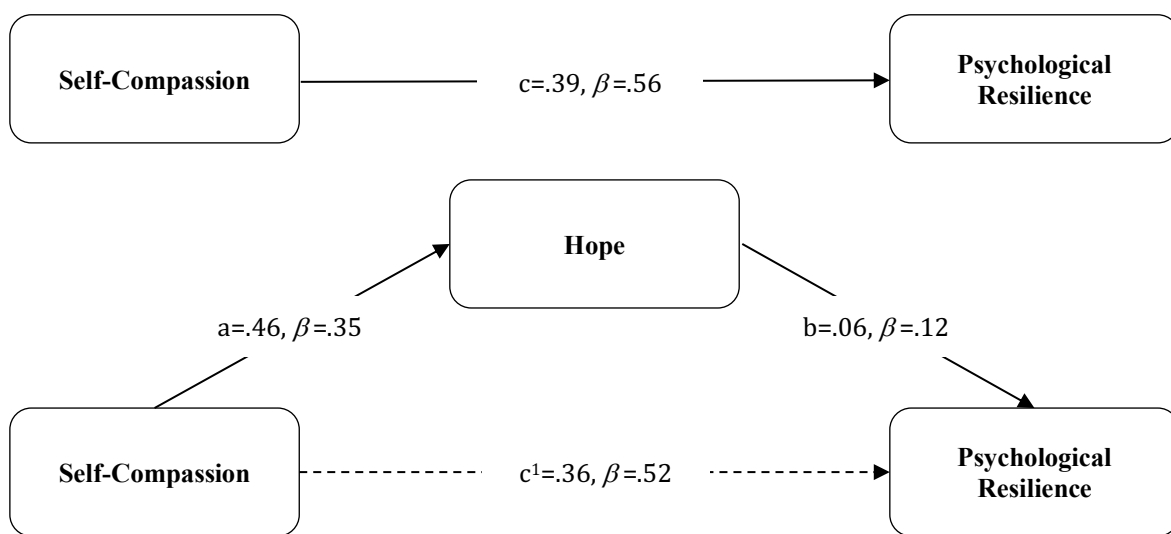
Variables	B	β	SE	t	p	R ²	%95 CI
a path	0.46	0.35	0.046	9.974	.000	.12	.3701, .5515
b path	0.06	0.12	0.017	3.691	.000	.09	.0294, .0964
c path	0.39	0.56	0.021	18.275	.000	.31	.3495, .4336
c ¹ path	0.36	0.52	0.022	16.009	.000	.33	.3181, .4070
Indirect effect	0.03	0.04	0.01	-	-	-	.0123, .0483

Note:*** $p < .001$. SH: Standard Error, values in parentheses lower and upper Confidence Interval (CI) values (95%). Bootstrap resampling=5000

Table 5 and Table 6 show the path coefficients, indirect effects, and bootstrapping results regarding the mediating role of hope in the connection between self-compassion and psychological resilience. First, hypothesis H2 (Self-compassion (X) → Hope (M) a pathway) was tested and it was observed that self-compassion significantly predicted hope (B= 0.49, $\beta = .35$, 95% BCA; SE=0.046; CI = [.3701, .5515]). Then, the H3 hypothesis of the research (Hope (M) → Psychological Resilience (Y) b path) was tested and it was found that hope significantly predicted psychological resilience (B= 0.06, $\beta = .12$, 95% BCA; SE=0.017; CI = [.0294, .0964]). Next, hypothesis H4 (Self-compassion (X) → Resilience (Y) c path) was tested and it was observed that self-compassion significantly predicted resilience (B= 0.39, $\beta = .56$, 95% BCA; SE=0.021; CI =

[.3495, .4336]). The final hypothesis of the study (H5) is that hope plays a mediating role in the relationship between self-compassion and psychological resilience. The analysis indicated that the path coefficient from the self-compassion variable to psychological resilience was still significant with the inclusion of the mediating variable hope in the model ($B = 0.36$, $\beta = .52$, $p < 0.01$). It is obvious that self-compassion, together with hope, explains 33% of the variation (variance) in psychological resilience. Bootstrapping was done to determine the significance of the study found a significant indirect effect of self-compassion on psychological resilience through hope. ($B = 0.03$, $\beta = .004$, %95 BCA; $SE = .001$; $CI = [.0123, .0483]$). In addition, it was observed that there was a decrease in the path coefficient of the significant relationship between self-compassion and psychological resilience with the inclusion of hope, which was determined as a mediator variable, into the model ($c1 = .56$ to $.52$, $p < .05$). These findings suggest that hope serves as a partial mediating factor in linking self-compassion to psychological resilience. (Baron & Kenny, 1986). In this case, it is seen that the last hypothesis of the research is also supported. The model validated within the scope of the research is shown in Figure 2.

Figure 2. Self-compassion's Prediction of Psychological Resilience Through Hope



Discussion, Conclusion, And Recommendations

The study examined self-compassion, hope and psychological resilience in high school students using a relational survey model. The study found that male participants scored higher on self-compassion and resilience than female participants, but hope scores did not differ by gender. The study aimed to test a hypothetical model involving hope mediation. (H1).

The study found that male participants scored higher in self-compassion and resilience variables compared to female participants. It is stated that psychological resilience has a multidimensional structure that varies depending on gender, age, culture, time, and different living conditions (Connor & Davidson, 2003; Werner & Smith, 1992). There are different results in the literature regarding the relationship between resilience and gender, and this difference is thought to be the effect of the multidimensional structure of psychological resilience. There are researches parallel to the results of the study (Bonanno et al. 2007; Doğan and Yavuz, 2020; Dolbier et al. 2007; Hirani et al. 2016; Holahan and Moos 1985; Hoşoğlu et al., 2018; Kara, 2020; Lambert and Lambert 1987; Toprak, 2014). Gender roles in traditional families influence men's perceptions of psychological resilience, as raising boys stronger and assigning more responsibilities affects their resilience. (Doğan and Yavuz, 2020; Hoşoğlu et al. 2018; Kimter, 2020). In addition studies in the literature state that psychological resilience does not differ according to gender (Campbell-Sills et al. 2006; Güloğlu & Karairmak, 2014; Işık, 2019; Özer, 2013, Rew et al. 2001; Yıldız & Kahraman, 2021), there are also studies in which women's psychological resilience is higher (Güngörmüş et al. 2015; Hunter and Chandler, 1999; Önder and Gülay, 2008; Pars and Çavuşoğlu, 2019; Turgut, 2015) contrary to the findings of this study. It is argued that

women's ability to develop safer relationships and receive support in difficult situations is more effective than men's (Korkut-Owen et al., 2017; Werner, 1989; Wasonga, 2002). Adolescents care about the opinions of others and need to have a positive view of themselves. This situation may lead to increased feelings of criticism, judgment, and shame towards themselves (Gilbert & Irons, 2009). The fact that women attach more importance to interpersonal communication and social connection compared to men makes the opinions of others even more important to them (Arutyunova et al. 2016). For all of these reasons, women show less self-compassion (Marsh et al. 2018). However, it is stated that the difference between gender and self-compassion decreases with age, so more research on the subject is needed (Bacanlı and Çarkıt 2020; Marsh et al. 2018; Yarnell et al. 2015).

Within the scope of the first purpose of the study, it was found that the individuals hope score averages did not differ according to gender involved in the study. This finding is consistent with the literature, and when we look at the studies conducted, it is seen that the studies supporting this finding (Atik and Atik Erkan, 2017; Cihanyurdu et al., 2021; Şahin Baltacı, 2018; Snyder et al., 1991; Yen, 2008) are in the majority. However, there are very few studies in the literature that find that hope differs according to gender. In the study conducted by Nas (2022), it was reported that hope differs according to gender. In general, it is seen that hope does not differ according to gender in the studies conducted. The findings obtained in this study and the results of the general literature support the view that hope mostly does not differ according to gender, as stated by Snyder et al. (1997). In this context, it can be interpreted that gender is not a stable demographic variable on hope, considering the general literature and the non-differentiation of the hope scores of the participants in this study. In addition, it can be said that the sample group of the research and different cultural factors might have been effective in this result.

In alignment with the study's secondary objective, the relationships between the variables were evaluated, and significant relationships were found between all variables. In the analyses made based on these relationships, positive statistically significant relationships were found between the participants' self-compassion and hope (H₂); their hope and psychological resilience (H₃), and their self-compassion and psychological resilience (H₄). In addition, hope was found to have a mediating role in the relationship between the participants' self-compassion and their psychological resilience (H₅).

In the research, a significant positive relationship was found between self-compassion and hope in adolescents and the second hypothesis (H₂) that as the self-compassion levels of adolescents increase, their hope levels will also increase was confirmed. An individual with self-compassion is aware of these feelings without inhibiting their painful feelings. They are also aware that they share these feelings with many people (Neff, 2003). Therefore, the individual can reduce their negative and dysfunctional reactions to these emotions by taking steps to replace their compelling emotions with positive ones (Chu et al., 2018). This may have an important feature that increases the level for hope of the individual.

According to another result of the study, a positive and significant relationship was found between the hopes of adolescents and their psychological resilience, and the third hypothesis (H₃) of the study was confirmed. This result is in parallel with the research results in the related literature. In a study conducted with high school students studying in socio-economically disadvantaged regions, the study revealed that hope emerged as a substantial predictor of resilience, accounting for 48% of the variability in resilience scores (Aydın Sünbül and Çekici, 2018). Rand and Cheavens (2009) revealed that individuals with high hope levels respond more positively to life stressors when compared to those with low hope levels. Çiçek (2021) determined hope as a significant predictor of resilience in a study conducted with high school students. This finding seems to be closely related to the goal-oriented nature of hope. Having specific goals can provide determination and readjustment to resist challenging life events. As a matter of fact, Mullin (2019) referred to the argument that individuals with high hope levels will also have high psychological resilience, based on the fact that individuals with high hopes have more than one goal and make a constant effort to achieve their goals.

As a result of the analysis of the relationships between the variables, a positive and significant relationship was found between self-compassion, and psychological resilience in adolescents, and the hypothesis of the study (H₄) was confirmed. The increase in self-compassion leads to an increase in psychological resilience. Being

affectionate towards oneself is one of the most important factors in increasing the level of resilience (Murphey et al. 2013). As the person is understanding towards himself, he can spend more effort overcoming the negative situation he experiences. The individual's perception of himself, which is among the protective factors that create psychological resilience, may be related to self-compassion. In addition, an individual's awareness of their emotions can be enhanced by experiencing these emotions and this can help to cope with challenging situations. This can also enhance self-compassion. Therefore, as the individual is kind to himself, positively perceives himself, and is aware that many people are experiencing the difficult situation he is experiencing, he will be able to cope with this situation more, and his level of psychological resilience will increase. Indeed, Lefebvre et al. (2020) stated that self-compassion can be used functionally to increase the level of resilience of individuals, and these concepts are interrelated in their study examining self-compassion and psychological resilience at work. Similarly, Bluth et al. (2018) studied the relationship between adolescents' strengths such as psychological resilience, curiosity/exploration, and self-compassion. The studies revealed a significant positive correlation between self-compassion and psychological resilience. In another study, Neff and McGehee (2010) examined the self-compassion and resilience of adolescents and young adults and mentioned that there is a strong correlation between these individuals' self-compassion and psychological resilience. In addition, in the study examining the role of self-compassion and psychological resilience in increasing the health-related quality of life of MS patients, it was found that these patients would gain new perspectives on their health when their self-compassion levels increased, and they could cope better with stressful situations or traumatic experiences when their psychological resilience level increased. For this reason, it has been stated that self-compassion and psychological resilience are related to each other, and it is beneficial to use this relationship with the interventions to be made (Hurwit et al., 2017).

The study found that hope mediates the relationship between self-compassion and the psychological resilience in adolescents, confirming the hypothesis (H5). Adolescence is known as a period in which physical, mental, sexual, and psycho-social development is rapid and the individual encounters many problems. With the rapid development in these areas, adolescents may experience various problems, and their psychological resilience may decrease. Savi Çakar and Kılınç (2020) found that the most common problems experienced by individuals during adolescence are academic, emotional, and familial problems, as well as problems arising from the adolescence period itself. These problems of individuals are considered important in influencing their psychological resilience. In this respect, it is extremely important to focus on the variables that will increase the psychological resilience of individuals. As a result of this research, self-compassion in adolescents explains 33% of the variation (variance) in resilience, along with hope. Based on this result, self-compassion, and hope variables, which are important predictors of the psychological resilience of individuals in adolescence, should be considered protective factors in psychological resilience studies to be conducted with adolescents. The study is a cross-sectional one, and its results should be evaluated within the limitations of generalization in such studies. School psychological counselors can structure psycho-educational studies that will increase the psychological resilience of adolescents by considering these protective factors. Based on the results of this study, which also points out that the positive effect of self-compassion on resilience will increase through hope, hope-focused therapies can provide functional results in studies conducted with adolescents.

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References

- Ai, A. L., Tice, T. N., Whitsett, D. D., Ishisaka, T., & Chim, M. (2007). Posttraumatic symptoms and growth of Kosovar war refugees: The influence of hope and cognitive coping. *The Journal of Positive Psychology, 2*(1), 55-65. <https://doi.org/10.1080/17439760601069341>
- Alibekiroğlu, P. B., Akbaş, T., Bulut-Ateş, F., & Kırdök, O. (2018). Mediator effect of self compassion in the relationship between life satisfaction and psychological resilience in college students. *Çukurova Üniversitesi Sosyal Bilimler Enstitüsü Dergisi, 27*(2), 1-17.
- American Psychological Association (2020). *Building your resilience*. <https://www.apa.org/topics/resilience/building-your-resilience>
- Arutyunova, K. R., Alexandrov, Y. I., & Hauser, M. D. (2016). Sociocultural influences on moral judgments: East-west, male-female, and young-old. *Frontiers in psychology, 7*, 1334. <https://doi.org/10.3389/fpsyg.2016.01334>
- Ataman, A. (2021). *The effect of hope-based intervention program on syrian refugee children's hope and resilience levels* (Publication no. 669120) [Master's thesis, İbn Haldun University].
- Atik, G., & Atik-Erkan, Z. (2017). Predicting hope levels of high school students: The role of academic self-efficacy and problem solving. *Education and Science, 42*(190), 157-169. <https://doi.org/10.15390/EB.2017.5348>
- Aydın-Sünbül, Z. (2016). *The relationship between mindfulness and resilience among adolescents: Mediating role of self compassion and difficulties in emotion regulation* (Publication no. 481527) [Doctoral dissertation, Middle East Technical University].
- Aydın-Sünbül, Z., & Aslan-Gördesli, M. (2020). Self-compassion and resilience in parents of children with special needs: The mediating role of hope. *Çukurova Üniversitesi Eğitim Fakültesi Dergisi, 49*(2), 690-705. <https://doi.org/10.14812/cufej.749645>
- Aydın-Sünbül, Z., & Çekici, F. (2018). Hope as a unique agent of resilience in socio-economically disadvantaged adolescents. *International Journal of Evaluation and Research in Education (IJERE), 7*(4), 299-304. <https://doi.org/10.11591/ijere.v7i4.15354>
- Aydoğdu, F. (2021). Öğretmenlerin çözüm odaklı düşünme ile mutluluk ilişkisinde sürekli umut ve yaşam doyumunun aracı rolü. *Psikiyatride Güncel Yaklaşımlar, 13*(Ek1), 337-360. <https://doi.org/10.18863/pgv.983099>
- Bacanlı, F., & Çarkıt, E. (2020). An examination of self compassion according to gender: Meta-analysis study. *Ege Eğitim Dergisi, 21*(2), 1-15. <https://doi.org/10.12984/egeefd.648331>
- Baron, R. M., & Kenny, D. A. (1986). The moderator-mediator variable distinction in social psychological research: Conceptual, strategic, and statistical considerations. *Journal of Personality and Social Psychology, 51*(6), 1173-1182. <https://doi.org/10.1037//0022-3514.51.6.1173>
- Ben-Asher, S., Sagy, S., Srour, A., Walden, T., Huss, E., Shahar, E., & Alsrailha, K. (2020). Hope among refugee children attending the international school of peace on Lesbos. *Journal of Refugee Studies, 34*(2), 2180-2199. <https://doi.org/10.1093/jrs/feaa003>
- Bluth, K., & Eisenlohr-Moul, T. A. (2017). Response to a mindful self compassion intervention in teens: A within-person association of mindfulness, self-compassion, and emotional well-being outcomes. *Journal of Adolescence, 57*, 108-118. <https://doi.org/10.1016/j.adolescence.2017.04.001>
- Bluth, K., & Blanton, P. W. (2014). Mindfulness and self-compassion: Exploring pathways to adolescent emotional well-being. *Journal of Child and Family Studies, 23*(7), 1298-1309. <https://doi.org/10.1007/s10826-013-9830-2>
- Bluth, K., Roberson, P. N., Gaylord, S. A., Faurot, K. R., Grewen, K. M., Arzon, S., & Girdler, S. S. (2015). Does self-compassion protect adolescents from stress? *Journal of Child and Family Studies, 25*(4),

- 1098-1109. <https://doi.org/10.1007/s10826-015-0307-3>
- Bluth, K., Mullarkey, M., & Lathren, C. (2018). Self-compassion: A potential path to adolescent resilience and positive exploration. *Journal of Child and Family Studies*, 27, 3037-3047. <https://doi.org/10.1007/s10826-018-1125-1>
- Bolat, Z. (2013). *Investigation of the relation between resilience and self compassion of university students* (Publication no. 328679) [Master's thesis, Necmettin Erbakan University].
- Bonanno, G. A., Galea, S., Bucciarelli, A., & Vlahov, D. (2007). What predicts psychological resilience after disaster? The role of demographics, resources, and life stress. *Journal of Consulting and Clinical Psychology*, 75, 681– 682. <https://doi.org/10.1037/0022-006X.75.5.671>
- Brown, L., Bryant, C., Brown, V., Bei, B., & Judd, F. (2016). Self-compassion, attitudes to ageing and indicators of health and well-being among midlife women. *Ageing & Mental Health*, 20(10), 1035-1043. <https://doi.org/10.1080/13607863.2015.1060946>
- Büyüköztürk. Ş., Çakmak. E. K., Akgün. Ö. E., Karadeniz. Ş., & Demirel. F. (2012). *Bilimsel araştırma yöntemleri*. Pegem Akademi.
- Campbell-Sills, L., Cohan, S. L., & Stein, M. B. (2006). Relationship of resilience to personality, coping, and psychiatric symptoms in young adults. *Behavior research and therapy*, 44(4), 585-599. <https://doi.org/10.1016/j.brat.2005.05.001>
- Chu, X. W., Fan, C. Y., Liu, Q. Q., & Zhou, Z. K. (2018). Cyberbullying victimization and symptoms of depression and anxiety among Chinese adolescents: Examining hopelessness as a mediator and self-compassion as a moderator. *Computers in Human Behavior*, 86, 377– 386. <https://doi.org/10.1016/j.chb.2018.04.039>
- Cihanyurdu, İ., İlbasmış, Ç., Toksoy-Aksoy, A., Ünver, H., & Arman-Rodopman, A. (2020). The anxiety and hope levels of adolescents for the future in the COVID-19 outbreak. *Turkish Journal Child and Adolescent Mental Health*, 28(1), 19-26. <https://doi.org/10.4274/tjcamh.galenos.2020.68552>
- Connor, K. M., & Davidson, J. R. (2003). Development of a new resilience scale: The Connor-Davidson resilience scale (CD-RISC). *Depression and anxiety*, 18(2), 76-82. <https://doi.org/10.1002/da.10113>
- Cortes, L., & Buchanan, M. J. (2007). The experience of Columbian child soldiers from a resilience perspective. *International Journal for the Advancement of Counselling*, 29(1), 43-55. <https://doi.org/10.1007/s10447-006-9027-0>
- Creswell. J. W. (2012). *Educational research: Planning. conducting. and evaluating quantitative*. Pearson.
- Çiçek, İ. (2021). Effect of hope on resilience in adolescents: Social support and social connectedness as mediators. *Journal of Positive School Psychology*, 5(2), 136–147. <https://doi.org/10.47602/jpsp.v5i2.283>
- Çiltaş, Ç. (2019). *Investigation of the relationship between psychological resilience and hope levels of women who receiving women's guesthouse services* (Publication no. 599067) [Master's thesis, Ankara Yıldırım Beyazıt University].
- Deniz, M. E., & Sümer, A. S. (2010). The evaluation of depression, anxiety, and stress in university students with different self-compassion levels. *Eğitim ve Bilim*, 35(158), 115-127.
- Derman, O. (2008). Psychosocial development in adolescents. *Adolescent Health II Symposium Series*, 63(1), 19-21.
- Dilmaç-Pınar, Ş. (2020). *Determination of psychological resilience and self-compassion levels of nursing students* (Publication no. 652376) [Master's thesis, Necmettin Erbakan University].
- Doğan, T. (2015). Adaptation of the Brief Resilience Scale into Turkish: A validity and reliability study. *The Journal of Happiness & Well-Being*, 3(1), 93-102.
- Dolbier, C. L., Smith, S. E., & Steinhardt, M. A. (2007). Relationships of protective factors to stress and symptoms of illness. *American Journal of Health Behavior*, 31(4), 423-433. <https://doi.org/10.5993/AJHB.31.4.9>
- Eggerman, M., & Panter-Brick, C. (2010). Suffering, hope, and entrapment: Resilience and cultural values in Afghanistan. *Social Science & Medicine*, 71(1), 71-83. <https://doi.org/10.1016/j.socscimed.2010.03.023>
- Erarslan, Ö. (2014). *The investigation of the mediator role of positive views of self, world and future on the relationship of psychological resilience with depressive symptoms, and life satisfaction in university students* (Publication no. 380089) [Master's thesis, Hacettepe University].
- Eseoğlu, B. N. (2021). *The relationship between hope and the psychological resilience levels in refugee*

- children* (Publication no. 701527) [Master's thesis, İstanbul Sabahattin Zaim University].
- Fergus, S., & Zimmerman, M. A. (2005). Adolescent resilience: A framework for understanding healthy development in the face of risk. *Annual Review of Public Health, 26*(1), 399-419. <https://doi.org/10.1146/annurev.publhealth.26.021304.144357>
- France, A. (2007). *Understanding youth in late modernity*. Open University Press.
- Gilbert, P., & Irons, C. (2009). Shame, self-criticism and self-compassion in adolescence. In N. Allen & L. Sheeber (Eds.), *Adolescent emotional development and the emergence of depressive disorders* (pp. 195–214). Cambridge University Press.
- Goodman, J. H. (2004). Coping with trauma and hardship among unaccompanied refugee youths from Sudan. *Qualitative Health Research, 14*(9), 1177-1196. <https://doi.org/10.1177/1049732304265923>
- Güloğlu, B., & Karairmak, Ö. (2014). The explanation of resilience within attachment model among adults with earthquake experience. *Çukurova University Journal of Education Facult, 43*(2), 1-18. <https://doi.org/10.14812/cufej.2014.0010>
- Güngörmüş, K., Okanlı, A., & Kocabeyoğlu, T. (2015). Factors influencing resilience in nursing students. *Journal of Psychiatric, 6*(1), 9-14. <https://doi.org/10.5505/phd.2015.80299>
- Haroz, E. E., Jordans, M., Jong, J., Gross, A., Bass, J., & Tol, W. (2017). Measuring hope among children affected by armed conflict: Cross cultural validity of the children's hope scale. *Assessment, 24*(4), 528-539. <https://doi.org/10.1177/1073191115612924>
- Harvey, J. H., & Miller, E. D. (2000). *Loss and trauma: General and close relationship perspectives*. Brunner-Routledge.
- Hayes, A. F. (2013). *Introduction to mediation, moderation, and conditional process analysis, first edition: A regression-based approach (Methodology in the Social Sciences)* (First ed.). The Guilford Press.
- Hayter, M. R., & Dorstyn, D. S. (2014). Resilience, self-esteem and self-compassion in adults with spina bifida. *Spinal Cord, 52*(2), 167-171. <https://doi.org/10.1038/sc.2013.152>
- Hirani, S., Lasiuk, G., & Hegadoren, K. (2016). The intersection of gender and resilience. *Journal of Psychiatric and Mental Health Nursing, 6*(7), 455-467. <https://doi.org/10.1111/jpm.12313>
- Holahan, C. J., & Moos, R. H. (1985). Life stress and health: Personality, coping, and family support in stress resistance. *Journal of Personality and Social Psychology, 49*(3), 739. <https://doi.org/10.1037/0022-3514.49.3.739>
- Hoşoğlu, R., Kodaz, A. F., Bingöl, T. Y., & Batık, M. V. (2018). The resilient levels of preservice teachers. *International Journal of Society Researches, 8*(14), 217-239. <https://doi.org/10.26466/opus.405751>
- Howell, K. H. (2011). Resilience and psychopathology in children exposed to family violence. *Aggression and Violent Behavior, 16*, 562-569. <https://doi.org/10.1016/j.avb.2011.09.001>
- Hunter, A. J., & Chandler, G. E. (1999). Adolescent resilience. *IMAGE: Journal of Nursing Scholarship, 31*(3), 243-247. <https://doi.org/10.1111/j.1547-5069.1999.tb00488.x>
- Hurwit, M. N., Yun, J., & Ebbeck, V. (2017). Examining the roles of self-compassion and resilience on health-related quality of life for individuals with Multiple Sclerosis. *Disability and Health Journal, 11*(2018), 256-261. <https://doi.org/10.1016/j.dhjo.2017.10.010>
- Işık, Y. (2019). *An investigation of resilience among adolescents in terms of ostracism, social anxiety, gender and grade level* (Publication no. 538969) [Master's thesis, Sakarya University].
- Jiang, Y., You, J., Hou, Y., Du, C., Lin, M. P., Zheng, X., & Ma, C. (2016). Buffering the effects of peer victimization on adolescent non-suicidal self-injury: The role of self-compassion and family cohesion. *Journal of Adolescence, 53*, 107-115. <https://doi.org/10.1016/j.adolescence.2016.09.005>
- Kara, E. (2020). *Factors affecting the level of psychological resilience of teachers* (Publication no. 650153) [Master's thesis, Mersin University].
- Kimter, N. (2020). Examining the psychological resilience levels of individuals in the days of COVID-19 in terms of some variables. *IBAD Journal of Social Sciences, Special Issue, 574-605*. <https://doi.org/10.21733/ibad.805481>
- Korkut-Owen, F., Demirbaş-Çelik, N., & Doğan, T. (2017). Resilience as a predictor of wellness among university students. *Electronic Journal of Social Sciences, 16*(64), 1461-1479.
- Kulaksızoğlu, A. (2018). *Ergenlik Psikolojisi*. Remzi Kitabevi.
- Lambert-Jr, C. E., & Lambert, V. A. (1987). Hardiness: Its development and relevance to nursing. *Image: The*

Journal of Nursing Scholarship, 19(2), 92-95.

- Lefebvre, J. I., Montani, F., & Courcy, F. (2020). Self-compassion and resilience at work: A practice-oriented review. *Advances in Developing Human Resources*, 22(4), 437-452. <https://doi.org/10.1177/1523422320949145>
- Luthar, S. S., Cicchetti, D., & Becker, B. (2000). The construct of resilience: A critical evaluation and guidelines for future work. *Child Development*, 71(3), 543-562. <https://doi.org/10.1111/1467-8624.00164>
- Marsh, I. C., Chan, S. W., & MacBeth, A. (2018). Self-compassion and psychological distress in adolescents a meta-analysis. *Mindfulness*, 9(4), 1011-1027.
- Mullin, A. (2019). Children's hope, resilience and autonomy. *Ethics and Social Welfare*, 13(3), 230-243. <https://doi.org/10.1080/17496535.2019.1588907>
- Murphey, D., Barry, M., & Vaughn, B. (2013). Positive mental health: Resilience. *Adolescent Health Highlight*, 3, 1-6.
- Nas, E. (2022). Investigation of self-compassion and hope levels of adolescents. *MAUN Journal of Education*, 2(1), 46-65.
- Neff, K. D. (2003). Self-compassion: An alternative conceptualization of a healthy attitude toward oneself. *Self and Identity*, 2(2), 85-102. <https://doi.org/10.1080/15298860390129863>
- Neff, K. D., & McGehee, P. (2010). Self-compassion and psychological resilience among adolescents and young adults. *Self and Identity*, 9(3), 225-240. <https://doi.org/10.1080/15298860902979307>
- Neff, K. D., Hsieh, Y., & Djitterat, K. (2005). Self-compassion, achievement goals and coping with academic failure. *Self and Identity*, 4(3), 263-287. <https://doi.org/10.1080/13576500444000317>
- Nery-Hurwit, M., Yun, J., & Ebbeck, V. (2018). Examining the roles of self-compassion and resilience on health-related quality of life for individuals with Multiple Sclerosis. *Disability and Health Journal*, 11(2), 256-261. <https://doi.org/10.1016/j.dhjo.2017.10.010>
- Olson, K., Kemper, K. J., & Mahan, J. D. (2015). What factors promote resilience and protect against burnout in first-year pediatric and medicine-pediatric residents? *Journal of Evidence-Based Complementary & Alternative Medicine*, 20(3), 192-198.
- Önder, A., & Gülay, H. (2008). Resilience of 8 Grade Students in Relation to Various Variables. *Buca Faculty of Education Journal*, 23, 192-197.
- Önel, S. N. (2021). *Examining the relationship between self compassion, psychological resilience and depression, anxiety, and stress during Covid-19* (Publication no. 668512) [Master's thesis, Işık University].
- Özer, E. (2013). *Alternate title: An investigation of university students' resilience level on the view of trait emotional eq and the five factor personality traits* (Publication no. 347489) [Doctoral dissertation, Necmettin Erbakan University].
- Pars, H., & Çavuşoğlu, H. (2019). Examining the psychological resilience of adolescents with leukemia: A comparative study. *Florence Nightingale Journal of Nursing*, 27(2), 104-108. <https://doi.org/10.26650/FNJJN18024>
- Raes, F., Pommier, E., Neff, K. D., & Van Gucht, D. (2011). Construction and factorial validation of a short form of the Self-Compassion Scale. *Clinical Psychology & Psychotherapy*, 18, 250-255. <https://doi.org/10.1002/cpp.702>
- Rand, K. L., & Cheavens, J. S. (2009). Hope theory. *The Oxford Handbook of Positive Psychology*, 322-334. <https://doi.org/10.1093/oxfordhb/9780195187243.013.0030>
- Rew, L., Taylor-Seehafer, M., Thomas, N. Y., & Yockey, R. D. (2001). Correlates of resilience in homeless adolescents. *Journal of Nursing Scholarship*, 33(1), 33-40.
- Richardson, G. E. (2002). The metatheory of resilience and resiliency. *Journal of Clinical Psychology*, 58(3), 307-321. <https://doi.org/10.1002/jclp.10020>
- Saleci, R. (2021). *Kaygı üzerine* (B. E. Aksoy, Çev.). Metis Yayıncılık.
- Savi-Çakar, F., & Kılınç (20). Review on adolescents' needs of psychological assistance. *Mehmet Akif Ersoy University Journal of Education Faculty*, 54, 488-508. <https://doi.org/10.1080/13557858.2015.1044946>
- Simmons, R. G., & Blyth, D. A. (2009). *Moving into adolescence: The impact of pubertal change and school context*. Transaction Publishers.

- Sleijpen, M., Boeije, H. R., Kleber, R. J., & Mooren, T. (2016). Between power and powerlessness: A meta-ethnography of sources of resilience in young refugees. *Ethnicity & Health, 21*(2), 158-180. <https://doi.org/10.1080/13557858.2015.1044946>
- Smith, J. L. (2015). Self-compassion and resilience in senior living residents. *Seniors Housing and Care Journal, 23*, 16-31.
- Smith, B. W., Dalen, J., Wiggins, K., Tooley, E., Christopher, P., & Jennifer Bernard, J. (2008). The brief resilience scale: Assessing the ability to bounce back. *International Journal of Behavioral Medicine, 15*, 194–200. <https://doi.org/10.1080/10705500802222972>
- Snyder, C. R. (2002). Hope theory: Rainbows in the mind. *Psychological Inquiry, 13*(4), 249-275. https://doi.org/10.1207/S15327965PLI1304_01
- Snyder, C. R., Harris, C., Anderson, J. R., Holleran, S. A., Irving, L. M., Sigmon, S. T., Yoshinobu, L., Gibb, J., Langelle, C., & Harney, P. (1991). The will and ways: Development and validation of an individual-differences measure of hope. *Journal of Personality and Social Psychology, 60*(4), 570-585.
- Snyder, C. R., McDermott, D., Cook, W., & Rapoff, M. (1997). *Hope for the journey: Helping children through the good times and the bad*. Basic Books.
- Starner, T. M., & Peters, R. M. (2004). Anger expression and blood pressure in adolescents. *The Journal of Nursing, 20*(6), 335-342. <https://doi.org/10.1177/10598405040200060801>
- Şahin, D. (2014). *The investigation of teacher's self compassion from the point of resilience and life satisfaction* (Publication no. 381082) [Master's thesis, Karadeniz Technical University].
- Şahin-Baltacı, H. (2018). Comparison of hope and life satisfaction levels of Turkish and American middle school students. *Eurasian Journal of Educational Research, 18*(74), 99-122. <https://doi.org/10.14689/ejer.2018.74.6>
- Tabachnick, B. G., & Fidell, L. S. (2013). *Using multivariate statistics*. Pearson.
- Tarhan, S., & Bacanlı, H. (2015). Adaptation of dispositional hope scale into Turkish: Validity and reliability study. *The Journal of Happiness & Well-Being, 3*(1), 1-14.
- Toprak, H. (2014). *Psychological resilience and satisfaction of psychological needs as predictors of subjective well-being and life satisfaction in the adolescents* (Publication no. 353103) [Master's thesis, Sakarya University].
- Turgut, Ö. (2016). *Investigation of resilience of adolescents in terms of major life events, perceived social support and school engagement* (Publication no. 395175) [Doctoral dissertation, Anadolu University].
- Uysal, M. (2019). *An investigation of university student's interpersonal conflict resolution skills in terms of psychological resilience and self-compassion* (Publication no. 556699) [Master thesis, Necmettin Erbakan University].
- Wasonga, T. (2002). Gender effects on perceptions of external assets, development of resilience and academic achievement: Perpetuation theory approach. *Gender Issues, 20*(4), 43-54. <https://doi.org/10.1007/s12147-002-0022-4>
- Werner E., & Smith R. (1992). *Overcoming odds: High risk children from birth to adulthood*. Cornell University Press.
- Werner, E. E. (1989). High-risk children in young adulthood: A longitudinal study from birth to 32 years. *American Journal of Orthopsychiatry, 59*(1), 72-81.
- Yarnell, L. M., Stafford, R. E., Neff, K. D., Reilly, E. D., Knox, M. C., & Mullarkey, M. (2015). Meta-analysis of gender differences in self-compassion. *Self and Identity, 14*(5), 499-520. <https://doi.org/10.1080/15298868.2015.1029966>
- Yelpaze, İ. (2020). Cognitive flexibility as a predictor of psychological resilience of university students: the mediating role of self compassion. *Erzincan University Journal of Education Faculty, 22*(2), 535-549. <https://doi.org/10.17556/erziefd.631767>
- Yen, S. C. (2008). *Relationships of age, gender, and hope with coping styles among Taiwanese adolescents* [Doctoral dissertation, University of Kansas].
- Yıldırım, M. (2018). *Examination of the effectiveness of the self-compassion enhancement program towards adolescents on the fear of self-compassion and the subjective well-being* (Publication no. 511250) [Master's thesis, Bolu Abant İzzet Baysal University].
- Yıldırım, D. (2021). *Investigation of interpersonal conflict resolution skills of political party youth branch*

members in terms of psychological resilience and self-understanding (Publication no. 676788) [Master's thesis, İstanbul Kent University].

Yıldırım, M., & Sarı, T. (2018). Adaptation of the Short Form of Self-Compassion Scale into Turkish: A validity and reliability study. *Bolu Abant İzzet Baysal University Journal of Faculty of Education*, 18(4), 2502-2517. <https://doi.org/10.17240/aibuefd.2018.18.41844-452171>

Yıldız, A., & Kahraman, S. (2021). The relationship between resilience, social emotional learning skills, and life satisfaction in secondary school students. *The Journal of School Counseling*, 4(2), 23-60.

Zournazi, M. (2004). *Umut değişim için yeni felsefeler* (U. Abacı, Çev.). Literatür



The Relationship Between Differentiation of Self and Marital Quality in Turkish Married Women: The Mediating Role of Dyadic Adjustment

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ABSTRACT

This study aims to examine the mediating role of dyadic adjustment in the relationship between self-differentiation and marital quality in married women. The participants of the study consist of 304 women selected by convenience sampling method. A Personal Information Form, Differentiation of Self Scale, Renewed Couple Adjustment Scale, and Marriage Quality Scale were used as data collection tools. Data analysis was carried out with SPSS 22 and AMOS 23 programs. The fit values of the model established in the study showed a perfect fit ($X^2/sd=1.348$, $NFI=.994$, $CFI=.998$, $IFI=.998$, $RMSEA=.034$). In the subsequent correlation analysis, a significant and positive relationship was observed between the predictor variables and the predicted variables ($p<.01$). Regression analysis revealed that differentiation of self significantly predicted marital quality ($\beta=.46$, $p<.01$). It was observed that the effect of the differentiation of self (independent variable) on the quality of marriage (dependent variable) ($\beta=.46$, $p<.01$), decreases with the inclusion of the mediator variable which is dyadic adjustment in the model ($\beta=.12$, $p<.01$). Thus, that dyadic adjustment was found have a mediating role in the relationship between the differentiation of the self and the marital quality. The results were discussed in light of the literature.

Introduction

In marriage, a structure formed by social rules, two different personalities join together and fulfill each other's wishes, interests, and needs (Ersanlı & Kalkan, 2008). According to Özgüven (2009), it encompasses individual, social, and psychological roles. Individual roles include the sexual adjustment of couples, and social and psychological ones include the achievement of being a family and sharing love, respect, and togetherness. In addition, the marital relationship is an important support mechanism for an individual (Çağ & Yıldırım, 2013; Kurdek, 2005), contributing to his or her physical and psychological well-being (Proulx, et al., 2007), stress management (Kurt, 2018), effective communication, an active sex life (Kapucu, 2014), and perceived social support (Çağ & Yıldırım, 2013).

In this respect, Bowen Family Systems Therapy (BFST), which was developed to understand the couple and family system, is considered to be important. BFST has been used in many studies to understand couple

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relationships (Lampis et al., 2017; Schnarch, 1998; Titelman, 2014). In particular, the concept of Differentiation of Self (DoS) of the BFST is seen as a determinant in couple relationships.

Bowen (1978) states that DoS is an essential factor in the family system and couple relationship. Prior empirical studies indicate that DoS has a significant relationship with both marital quality and dyadic adjustment. In this framework, the mediating model established with the variables used in the study is expected to contribute both to the multicultural structure of BFST and to the couple and family therapy interventions. In this context, it is seen that there is a limited number of studies investigating the DoS concept in Turkey (Polat & İlhan, 2018; Sarıkaya et al., 2018, Işık et al., 2020; Tönbül, 2020). Therefore, it is thought that this research may provide a new perspective on understanding couple and family systems in the Turkish context. In this perspective, we focused on testing the concept of DoS for Turkish women with a collectivist structure.

Differentiation of Self (DoS)

It was Bowen who theoretically claimed that the concept of DoS, which was determined as the independent variable of the study, affects both dyadic adjustment and marital quality (Gonzalez et al., 2020). In Bowen's Family Systems Theory (BFST), couples are influenced by their families of origin when choosing their spouses and maintaining communication, also reflecting these interaction patterns onto their present marriage relationship (Nazlı, 2017). In BFST, Bowen explains the factors underlying the family and spouse interaction patterns through eight concepts: differentiation of self, emotional processes, multigenerational transmission, triangles, family projection, emotional cut-off, social regression, and sibling position (Hall, 2013). Nichols (2013) states that, according to this theory, two known opposite life forces, individuality, and togetherness, govern spousal relationships, and DoS is the basis of spouses' ability to harmonize these two opposite poles.

Kerr (1988), who conducted research on the DoS together with Bowen, states that adjustment problems in a marital relationship increase chronic anxiety, which in turn decreases the level of DoS. Furthermore, Xue et al. (2018) state that chronic anxiety is caused by dysfunctional close relationship systems, which is a consequence of insufficient DoS. The most important result is that existing research on DoS reveals that it is an important resource for spouses in stress management and marital adjustment (Peleg & Grandi, 2018).

Research results show that individuals who experience problems with dyadic adjustment and have low-quality marriages fail in the DoS. Accordingly, spouses who have not achieved DoS are more prone to be emotional and maintain their relationships by reacting to the people around them (Nichols & Schwartz, 2005). As a result, the partner who has lower levels of DoS in their relationship has difficulty maintaining autonomy, especially when encountering issues that cause anxiety or conflict (Nichols, 2013). According to Skowron et al. (2003), individuals with a higher level of DoS in anxiety and conflict situations may exhibit an "I" stance, thus protecting their sense of self and managing conflicts rationally. In contrast, people who show little DoS tend to suffer emotional problems in their relationships, having trouble in maintaining their sense of self and aggravating their psychological problems.

DoS and Marital Quality

The extent to which spouses perceive their marriage as good and healthy influences the marital quality (Glenn, 1990). Spanier (1976) asserts that spouses whose marriages are high quality tend to show better adjustment, enjoy communication with each other, and derive satisfaction from marriage. Proulx et al. (2007) argue that marital quality is an umbrella term that covers concepts such as marital satisfaction, marital adjustment, and marital happiness. Fincham and Bradbury (1987) point out that confusion about the concept of marital quality can be eliminated by this umbrella term.

From this perspective, marital quality is seen as a subjective evaluation of the relationship between the spouses; it is also recognized as a multidimensional concept that includes positive (happiness, satisfaction) and negative (conflict) aspects (Spanier & Lewis, 1980). Indeed, the quality of a marriage is determined by the dynamic interactions between spouses (Mosmann et al., 2006). This interactivity is a complex structure influenced by spouses' personal characteristics, education level, parental status, socioeconomic status, and sexuality (Olson, 2000).

Bowen expresses that couples with low levels of DoS tend to experience marital conflict more frequently (Bowen, 1978). In terms of BFST, this situation is also considered to impede marital quality (Roytburd & Myrna, 2008). In a family, when the struggle begins in the relationship, anxiety appears (Murphy, 1999). If

anxiety cannot be managed well, that is, if DoS is low, the mental health of family members is imperiled (Campos, 2007). When the level of differentiation decreases in the marital relationship, fusion between couples occurs, and marital quality and adjustment decrease (Harrison, 2003; Kruse, 2007).

Longitudinal studies of marital quality suggest that one's family of origin experiences persist into later life (Wamboldt & Reiss, 1989). Therefore, it is thought that BFST and the concept of DoS, which forms the core of this approach, are important in understanding the concept of marital quality. In addition, family systems theory aims to understand marital quality as perceived by spouses. It defines this perspective, i.e. the perception of marital quality by spouses, as the principle of holism, which states that all parts of the system are interconnected and affect each other (Broderick, 1993). This principle of holism implies that a partner's level of differentiation affects not only their marital quality but also their partner's marital quality.

DoS and Dyadic Adjustment

Another variable that is thought to be effective on marital quality in the research model is dyadic adjustment. Sabatelli (1988) asserts that a major determinant of marital quality is dyadic adjustment. Indeed, the definition of dyadic adjustment encompasses a couple's ability to maintain harmony by using a positive communication language in the face of problems. In the meantime, it ensures quality in marriages, contributing to the psychological well-being of individuals and reducing various psychological symptoms (Robinson & Blanton, 1993).

Today dyadic adjustment does not only refer to partners' subjective perception of their marriages, but it also pertains to the quality of the relationship (Kalkan, 2002). Spanier and Cole (1976) define it as spouses' promoting each other's personal development, rather than merely adapting to cohabiting. Dyadic adjustment as a form of supporting personal development is considered as dyadic consensus, dyadic satisfaction, affectional expression, and dyadic cohesion (Spanier & Cole, 1976).

More recently, making a study into the factors affecting dyadic adjustment, Larson (2003) described these factors as a three-dimensional concept, which he called the "marriage triangle." The first dimension involves individual characteristics. These are personality traits, irrational beliefs, and psychological symptoms. The second dimension, dyadic characteristics, consists of spouses' communication styles, problem-solving abilities, role-sharing, and attachment. The third, and final, one is the environmental dimension, which includes social support perceived to be provided by the root family, friend relationships, work life, and parental attitudes. Considering all these explanations, dyadic adjustment is regarded to be of great importance for romantic relationships such as marriage (McGoldrick et al., 2016) and an important constituent of marital quality (Spanier, 1976).

DoS is seen as a fundamental element of an individual's capacity to achieve intimacy and reciprocity in marriage. In recent years, many studies have put forward that DoS is a significant determinant of dyadic adjustment, and there are many research findings that individuals and couples with high DoS are more satisfied with their intimate relationships and experience less relational conflict compared to couples who experience fusion with others, emotional reactivity or emotional disconnection (Aryamanesh et al, 2012; Knauth & Skowron, 2004; Lampis, 2016; Lampis et al, 2017; Rodriguez-Gonzalez et al, 2016; Sabatelli & Bartle-Haring, 2003).

For more than 40 years, many empirical studies have scrutinized the relationship between DoS and dyadic adjustment (Rodríguez-González, 2016). The attention to examining the cross-cultural validity of Bowen's expression that is DoS predicts dyadic adjustment has been illustrated by studies in different cultural structures (Ferreira et al., 2015; Kaleta, 2014; Lampis, 2016; Rodríguez-González et al. 2016). These studies have found that DoS is positively associated with higher dyadic adjustment for men and women.

Present Study

Considering the literature presented in the introduction, it was observed that DoS had a predictive effect on both couple adjustment and marital quality. In this context, it was thought that couple adjustment might be a mediating variable as a result of the literature review. Although many researchers have studied the connection between dyadic adjustment and marriage quality, it is still considered critical to delve deeper into the basic

mechanism of the relationship between these two variables. Because, as indicated by Bowen (1978), DoS is a core concept in marital relationships. However, as marriage has a dynamic structure, it is difficult to explain it with a single concept. Although DoS constitutes the fundamental to a marriage relationship, it is thought that the dyad's adjustment process may have positive or negative effects on the relationship. Therefore, dyadic adjustment is considered a mediating mechanism in the relationship between DoS and marital quality. The two objectives of this study, (1) the effect of DoS on dyadic adjustment and marital quality, and (2) the reflections of increasing the level of DoS on the dyadic relationship, are thought to make great contributions to the BFST literature. Besides, as this study aims to understand the cross-cultural view of BFST and to test the concept of DoS in a sample of married Turkish women, it is considered important to understand how supporting the DoS influences marital quality in married Turkish women. Therefore, this present study focused on the mediating role of dyadic adjustment in the relationship between DoS and marital quality. Although several different studies have focused on the relationship between DoS and dyadic adjustment, and also that between DoS and marriage quality separately, there has not been a study addressing the mediating effect of dyadic adjustment. For this reason, it is hoped that a study shedding light on the mediating effect of dyadic adjustment will be significant for the related literature. In brief, the present study intends to explore the mediating role of married women's dyadic adjustment in the relationship between DoS and marriage quality. To this end, answers to the following research questions were sought in light of the related literature:

1. Is differentiation of self a significant predictor of marriage quality?
2. Is dyadic adjustment a significant predictor of marriage quality?
3. Does a dyadic adjustment have a mediating role in the relationship between differentiation of self and marriage quality?

Method

Research Design

This research is a descriptive study that has adopted the relational screening model to explore the relationship among spouses' dyadic adjustment, marital quality, and differentiation of self, as well as the mediating role of dyadic adjustment in the relationship between spouses' differentiation of self and marriage quality.

Study Group

The study group for the research consists of 303 female participants, who responded to an online survey. The demographic characteristics of the study group are shown in Table 1.

Table 1. Sociodemographic characteristics of participants (N=304)

	Groups	N	%
Age	20-29	57	18.8
	30-39	159	52.3
	40-49	72	23.7
	50-60	16	5.3
Sex	Female	304	100
Education Level	Primary	28	9.2
	High School	50	16.4
	University	226	74.3
Number of Children	None	65	21.4
	Single	107	35.2
	Two	113	37.2
	Three and more	19	6.3
Type of Marital Union	Arranged marriage	81	26.6
	Love match	223	73.4
Length of Marriage	0-5 years	94	30.9
	6-12 years	104	34.2
	13-20 years	62	20.4
	21 years and longer	44	14.5

An analysis of demographic variables shows that 52.3% of the married women who participated in the study are within the 30-39 age range; 74.3 % of the participants are university graduates, 37.2 % have two children, 73.4% got married having dated, 34.2% have been married for 6-12 years.

Data Collection Tools

Renewed Dyadic Adjustment Scale. The 32-item Dyadic Adjustment Scale developed by Spanier (1976) to measure spouses' adjustment levels was converted by Busby et al. (1995) to a 14-item version. Gündoğdu (2007) translated the scale into Turkish as part of a master's thesis study, and Bayraktaroğlu and Çakıcı (2017) conducted psychometric analyses to adapt it to the Turkish culture. The scale consists of three sub-dimensions: satisfaction, negotiation, and adjustment. The internal consistency coefficient scores of the renewed Dyadic Adjustment Scale are as follows: .87 overall, .80 for the *satisfaction* sub-dimension, .80 for the *negotiation* sub-dimension, and .74 for the *adjustment* sub-dimension (Bayraktaroğlu & Çakıcı, 2017). In this study, the internal consistency coefficient was determined to be .93 for the total score, .86 for the satisfaction subdimension, and .87 for the adjustment sub-scale.

Differentiation of Self Inventory. DSI, developed by Skowron and Friedlander (1998) and later revised by Skowron and Schmitt (2003), has been adapted to Turkish by Işık and Bulduk (2014). In the original scale, the Cronbach's alpha reliability coefficient of the scale was .88 for the whole scale, and for the subscales, it was found to be .84 (Emotional Reactivity), .83 (Individuation), .82 (Emotional Disconnection), and .74 (Fusion). As a result of the adaptation process, the DSI was converted into a 20-item, 6-point Likert-type scale composed of emotional reactivity (ER), individuation (I), emotional disconnection (ED), and dependency on others (DO) sub-scales. The higher the score on the overall scale and sub-scales, the higher the differentiation-of-self level. The validity analyses conducted confirmed the four-factorial structure and revealed a strong negative correlation with anxiety. The internal consistency reliability coefficient of the DSI was found to be .81 overall (ER= .78, I= .75, DO= .77, RD= .74), and the test-retest reliability coefficient obtained at five-week intervals was found to be $r = .74$ (Işık & Bulduk, 2014). In the present study, the internal consistency reliability coefficient of the inventory overall was found to be .85, while it was found to be .73 for emotional reactivity, .64 for individuation, .77 for dependency on others, and .64 for emotional disconnection.

Marital Quality Scale. The Marital Quality Scale was developed by Hahlweg (1996) to assess marriage relationship quality. It is a 4-point Likert-type measurement tool composed of 30 items. The Cronbach's alpha reliability coefficient of the scale overall was .95; as to subscales, it is .93 for quarreling, .91 for tenderness, and .88 for togetherness/communication. The lowest scale score is 30, whereas the highest scale score is 120. A score of 54 and below indicates low marital quality, and scores above 54 indicate a high level of marital quality. The correlation coefficient of .85 indicates that there is a strong correlation between the scale and the Marital Adjustment Inventory. The scale was adapted to Turkish by Kurt (2018). After the adaptation of the scale, the internal consistency coefficient of the scale was found to be .80 for the total score, .87 for the quarreling subscale, .91 for the tenderness subscale, and .88 for the togetherness/communication subscale. In the present study, the internal consistency coefficient of the scale for the total score was .91. As for subscales, it is .91 for quarreling, .91 for tenderness, and .91 for togetherness/communication.

Data Collection

Before the data collection phase of the research process, approval of the Istanbul Medipol University Social Science Ethics Committee was obtained (dated 07.07.2022 and numbered E-43037191-604.01.01-27998). Subsequently, online versions of the scales were obtained through a Google Form web page. A response to each item on the online scales was mandatory and necessary settings were made to prevent multiple attempts by the same respondent. After the necessary adjustments, the online forms were published, and they were first sent to married participants in Çanakkale and then to those in Istanbul and Mersin through social media and email. Data collection took place between 15 July and 15 September 2022.

Data Analysis

The present research analyzed the mediation effect of spouses' dyadic adjustment in the relationship between marriage quality and differentiation of self. Before the testing of mediation, first, descriptive statistics of variables (arithmetic mean, standard deviation, skewness, and kurtosis) were evaluated. Then, the relationship

between the variables was examined using Pearson Product Moments Correlation Analysis. Finally, analyses were performed to determine whether the mediator variable has a partial or full effect. The data was analyzed by means of SPSS-22 and Amos 23. The significance level was set at .05.

Results

This section presents the results about correlational relations in participants' scores from scales and analyses of mediating variables. Results of Pearson Product Moments Correlation Analysis performed to analyse the relationship between differentiation of self, marital quality, and dyadic adjustment are presented in Table 2.

Table 2. Analysis of correlation between predictive variables

	1.	2.	3.
1.Differentiation of self	1		
2.Marriage quality	.459**	1	
3.Dyadic adjustment	.419**	.833**	1

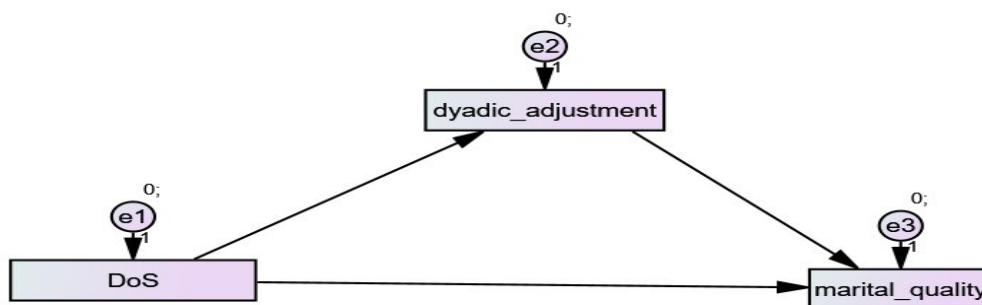
p < .01

As can be seen in Table 2, there is a moderate positive correlation between *differentiation of self* total scores and *marital quality* total scores ($r = .459, p < .01$), and between *differentiation of self* total scores and *dyadic adjustment* total scores ($r = .419, p < .01$). In addition, a strong and positive correlation was found between *marital quality* total scores and *dyadic adjustment* total scores ($r = .833, p < .01$).

Mediation Test by Structural Equation Modelling

The mediating role of dyadic adjustment in the effect of differentiation of self on marital quality was tested by means of AMOS 23 pathway analysis. Producing more accurate results than regression analysis, structural equation modelling was employed (Meydan & Şeşen, 2011). The design adopted in the research is presented in Figure 1.

Figure 1. Differentiation of self – marital quality - dyadic adjustment structural equation modelling



In the validation of the structural model, which is the first stage of analysis, the Maximum Likelihood calculation method was employed. The fit values of the model are presented in Table 3.

Table 3. Fit values of differentiation of self-dyadic adjustment -marital quality model

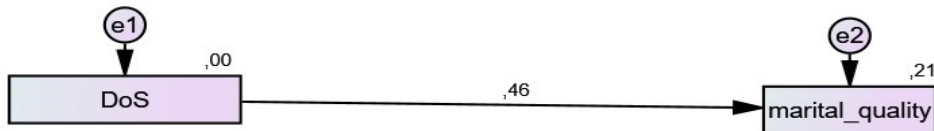
Model	Result	Excellent fit parameters*	Goof fit parameters*
X ² /sd	1.348	0 ≤ X ² /sd ≤ 3	3 < X ² /sd ≤ 5
NFI	.994	>.95	>.90
CFI	.998	>.95	>.90
IFI	.998	>.95	>.90
RMSEA	.034	<.05	<.08

*Based on model fit values proposed by Tabachnick and Fidell (2015)

As can be seen in Table 3, the model fits the data perfectly, showing excellent fit indices.

As the model showed a perfect fit, the relationship between differentiation of self, which was the independent variable, and marital quality, which was the dependent variable, was examined in the first place. The regression coefficient obtained from the model test is displayed in Figure 2. It was found that differentiation of self scores have a significant and positive effect on marital quality scores ($\beta = .46, p < .01$). That is, the first sub-question was answered: differentiation of self score is a significant predictor of marital quality.

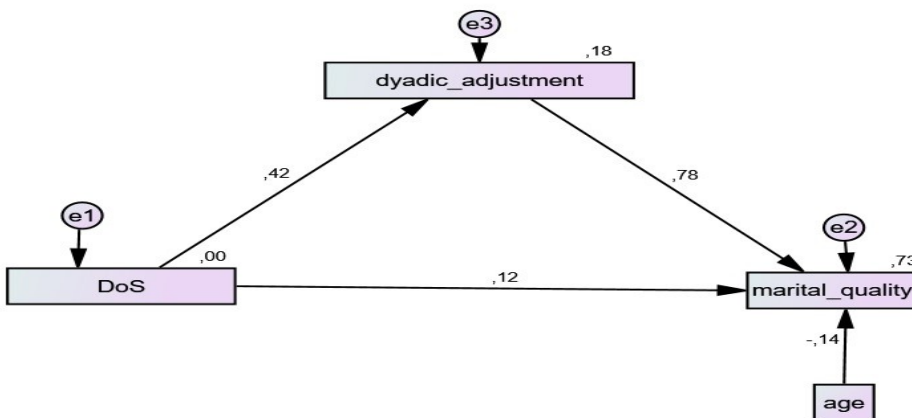
Figure 2. Differentiation of self – marital quality structural equation modelling



$p < .01$, DoS=Differentiation of Self

In the second step, dyadic adjustment was added to the relationship between differentiation of self and marital quality, which were already on the model, as the mediator variable. Moreover, age, which is accepted to have an effect on marriage quality, was added to the model. Mediator variable regression coefficients for the model are presented in Figure 3.

Figure 3. The mediating role of dyadic adjustment in the relationship between differentiation of self and marital quality



$p < .01$, DoS=Differentiation of Self

As can be seen in Figure 3, differentiation of self-scores significantly and positively correlate with dyadic adjustment ($\beta = .42, p < .01$). Dyadic adjustment, included in the analysis as the mediator variable, was found to

be a significant predictor of marital quality ($\beta=.78$, $p<.01$), providing an answer to the second research question. The effect of differentiation of self, which is the independent variable, on marital quality, which is the dependent variable ($\beta= .46$, $p<.01$), was observed to decrease with the inclusion of dyadic adjustment, which is the mediator variable ($\beta=.12$, $p<.01$). It shows that dyadic adjustment has the role of partial mediator variable. Thus, it answered the main research question, manifesting the mediating role of dyadic adjustment in the relationship between differentiation of self and marital quality.

The results of the structural model analysis are displayed in Table 4.

Table 4. Structural model analysis results

Estimators	Result Variables			
	Dyadic adjustment		Marital Quality	
	β	S.E.	B	S.E.
Differentiation of self (Path a)	.42**	.039		
R ²	.18**			
Differentiation of self (Path c)			.46**	.071
R ²			.21**	
Differentiation of self (Path c)			.12**	.046
Dyadic adjustment (Path b)			.78**	.061
R ²			.73**	
Indirect effect			.329 (0.250, 0.405)	

$p<.01$, SE=Standard Error, the values in parentheses are within the lower and upper limits of confidence interval. Bootstrap resampling=5000

Bootstrap analysis was performed to confirm the third hypothesis of the research. As assumed, Bootstrap values of 5000 resample and 9% confidence interval did not contain the value 0, so it was determined that differentiation of self-correlated significantly with marital quality through the mediating role of dyadic adjustment ($\beta= .329$, %95 GA [0.250, 0.405]). The mediating role of dyadic adjustment in the relationship between differentiation of self and marital quality was once again proved by the Bootstrap method.

Discussion and Conclusion

The present study explored the mediating role of dyadic adjustment in the relationship between married women's DoS and marital quality. To this end, first, the relationship between the predictor and predicted variables was examined. The results of Pearson Product-Moment Correlation Analysis revealed that DoS has a moderately positive relationship with both marital quality and dyadic adjustment. This is indicative of the probability that both marital quality and dyadic adjustment will increase parallel to an increase in married women's DoS. Moreover, the findings showed a significant and positive correlation between dyadic adjustment and marital quality, which indicates that marital quality increases parallel to the increase in dyadic adjustment levels of married women.

The findings of the study are in concordance with those of the studies in the related literature. Substantial research focusing on the connection between dyadic adjustment and relationship quality exists in the literature. For example, Griffin and Apostol (1993) implemented the Relationship Development Program to observe that it remarkably increases spouses' DoS levels and improves the quality of their relationship. Similarly, Skowron and Friedlander (1998) maintained that DoS is a significant predictor of marital satisfaction. Skowron (2000) found out that married couples with higher levels of DoS tend to have higher-quality marital relationships. Similarly, Lal and Barte-Harling (2011) identified a meaningful relationship between DoS and marital quality, and based on their research, Polat (2014) concluded that DoS positively correlates with dyadic adjustment.

After the identification of correlations, the predictive effects were analysed in the research. The first research question was formulated to seek an answer to whether DoS significantly predicts marital quality. It was determined that the extent of married women's DoS is a significant predictor of marital quality and explains 21% of the variance. Accordingly, an increase in the level of DoS is likely to improve marital quality.

Connections between DoS and dyadic adjustment were also explored in the study. The findings revealed that DoS is a significant predictor of dyadic adjustment, explaining 18% of the variance. Thus, it can be inferred that the increase in DoS potentially increases dyadic adjustment.

To seek an answer to the second research problem, whether dyadic adjustment is a significant predictor of marital quality was analysed. The findings demonstrated that married women's dyadic adjustment is a significant predictor of marital quality. Accordingly, it can be concluded that dyadic adjustment is a remarkable factor in marital quality for women.

The confirmation of the first and second hypotheses because of the findings of the study are important for mental health professionals working in the field of couple and family counseling. Moreover, the confirmation of these hypotheses provide support for empirically proving the importance of DoS, which is central to the BFST approach, for couple and marital relationships. Also, it is thought that investigating the levels of DoS of married women in Turkish culture, because of its collectivist structure, may provide a multicultural perspective to Bowen's approach.

The third research question of the study is formulated to explore the mediating role of dyadic adjustment in the relationship between differentiation of self and marital quality for married women. The findings identified the mediating role of dyadic adjustment. In addition, it was found that differentiation of self and dyadic adjustment together explain 73% of marital quality among married women. Thus, it can be concluded that an increase in marital quality can be attributed to the co-existence of differentiation of self and dyadic adjustment.

All these findings are in concordance with those of studies in the existing related literature. The results of the present study confirmed the importance of DoS, which Bowen considered critical to couple relationships (Kerr, 1988). They are also parallel to the findings of several studies that point to the fact that DoS has a significant predictive effect on dyadic adjustment (Arpita, 2006; Harrison, 2003; Hollander, 2007). The finding pointing to the predictive role of DoS marital quality is parallel to the findings obtained by Kalkan and Aydoğan (2019). Several studies exist in the related literature demonstrating that marriage quality has an impact on overall psychological health. The higher the quality of a marital relationship is, the lower the level of depression (Williams, 2003), the fewer the somatic disorders (Wickrama et al., 1997), and the more improved positive perspectives (Ross et al., 1990). The DoS concept, which this study sheds light on, can be regarded as positively influencing marital quality and other aspects of marriage.

These results are significant for marriage and couples' therapists. The DoS concept, which was determined to be an important predictor of marriage quality and dyadic adjustment in the present research, can be utilized in marriage and couples' therapies. Interventions towards increasing spouses' DoS levels can be integrated into group therapies and psychoeducation procedures, which are most likely to have a longer-lasting effect on marriage quality.

The study is expected to be of remarkable significance for mental health specialists working with couples and scientists focusing on intimate relationships, presenting a new perspective. It will especially help researchers focusing on marital and couple relationships gain new insight into areas such as understanding the marriage process, identifying the factors affecting intimate relationships, and determining the psychological sub-dimensions of close relationships. It is hoped that the findings of the study will provide the foundation of interventional procedures for couple therapies. In brief, it is expected that the research will significantly contribute to the related literature.

Since these findings were conducted with married women in Turkish culture, they support the universality of the propositions of Bowen's concept of DoS. In addition, the research results provide a cultural perspective on women's understanding of marriage. However, since these findings represent only the sample of Turkish married women, it is necessary to extend the application to other cultures. This study shows that DoS and dyadic adjustment predict marital quality in married women. In future studies, the focus should be with close relationship forms such as married couples, couples in romantic relationships, etc. It was determined that dyadic adjustment played a mediating role in the relationship between DoS and marital quality. Apart from this model, other variables that may be related to DoS in couple relationships should be included in the research. For example, family of origin attitudes, marital anxiety, conflicts, etc.

Nevertheless, the research has certain limitations. It was carried out with married women only, so the findings are related with this sample. When interpreting these findings, it should be noted that the mediation tests were conducted cross-sectionally. Longitudinal studies are needed to reach more causal conclusions. Finally, the factors determining relationship quality can be added to the research variables to increase generalizability.

As a result, higher levels of DoS contribute to higher marital quality and couple adjustment. The results of the study contribute to the understanding of how DoS and dyadic adjustment affect marital quality among married Turkish women. Moreover, the results of the mediation analysis show that DoS is an important mechanism in the transfer of dyadic adjustment to marital quality.

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References



- Arpita, L. (2006). *Relationship among differentiation of self, relationship satisfaction, partner support, depression, monitoring/blunting style, adherence to treatment and quality of life in patients with chronic lung disease* [Doctoral Dissertation, The Ohio State University].
- Aryamanesh, S., Fallahchai, R., Zarei, E., & Haghighi, H. (2012). Comparison of differentiation among satisfying couples and conflicting couples in Bandar Abbas city. *Journal of Life Science and Biomedicine*, 2(6), 308–314.
- Bayraktaroğlu H.T., & Çakıcı E. T. (2017). Psychometric properties of revised form dyadic adjustment scale in a sample from North Cyprus. *International Journal of Educational Science*, 19 (2-3), 113-119. <https://doi.org/10.1080/09751122.2017.1393954>
- Bowen, M. (1978). *Family therapy in clinical practice*. Aronson.
- Broderick, C. B. (1993). *Understanding family process*. Sage.
- Busby, D. M., Christensen, C., Crane, R. D., & Larson, J. H. (1995). A revision of the dyadic adjustment scale for use with distressed and non-distressed couples: Construct hierarch and multidimensional scales. *Journal of Marital Family Therapy*, 21, 289-298. <https://doi.org/10.1111/j.1752-0606.1995.tb00163.x>
- Campos B. (2007). Culture and teasing: The relational benefits of reduced desire for positive self-differentiation. *Personality and Social Psychology Bulletin*; 33:3-14. <https://doi.org/10.1177/0146167206293788>
- Çağ, P., & Yıldırım, İ. (2013). Evlilik doyumunu yordayan ilişki ve kişisel değişkenler. *Türk Psikolojik Danışma ve Rehberlik Dergisi*, 4(39), 13-23.
- Ersanlı, K., & Kalkan, M. (2008). *Evlilik ilişkilerini geliştirme kuram ve uygulama* (1. Baskı). Nobel Yayın Dağıtım.
- Glenn, N. D. (1990). Quantitative research on marital quality in the 1980s: A critical review. *Journal of Marriage and the Family*, 818-831. <https://doi.org/10.2307/353304>
- Gonzalez, M. R., Lampis, J., Murdock, N. L., Schewer-Collins, M. L., & Lyons, E. R. (2020). Couple adjustment and differentiation of self in the United States, Italy, and Spain: A cross-cultural study. *Family Process, Preprint*, 1-17, <https://doi.org/10.1111/famp.12522>
- Gündoğdu, A. (2007). *Relationships between self-constructs and marital quality* (Publication no: 218059) [Master Dissertation, Middle East Technical University]. CoHE Thesis Center.

- Ferreira, L. C., Fraenkel, P., Narciso, I., & Novo, R. (2015). Is committed desire intentional? A qualitative exploration of sexual desire and differentiation of self in couples. *Family Process*, 54(2), 308–326. <https://doi.org/10.1111/famp.12108>
- Fincham, F. D., & Bradbury, T. N. (1987). The assessment of marital quality: A reevaluation. *Journal of Marriage and Family*, 49(4), 797-809. <https://doi.org/10.2307/351973>
- Griffin JR, J. M., & Apostal, R. A. (1993). The influence of relationship enhancement training on differentiation of self. *Journal of Marital and Family Therapy*, 3(19), 267-272. <https://doi.org/10.1111/j.1752-0606.1993.tb00987.x>
- Hahlweg, K. (1996). Fragebogen zur Partnerschaftsdiagnostik [Assessment of marital distress]. Hogrefe.
- Hall, M. (2013). *The Bowen family theory and its uses*. International Psychotherapy Institute.
- Harrison, M.D. (2003). *Partners' level of differentiation of self and perceived relationship quality in gay and lesbian couples*. [Doctoral Dissertation, Fielding Graduate Institute]. Fielding Graduate Institute ProQuest Dissertations Publishing.
- Hollander, S. (2007). *Differentiation of self and emerging adulthood*. [Doctoral Dissertation, Florida International University]. ProQuest ETD Collection for FIU. <https://digitalcommons.fiu.edu/dissertations/AAI3279227>
- Işık, E., & Bulduk, S. (2014, April 24-26). *Benliğin ayrışması ölçeğinin üniversite öğrencileri için geçerlik ve güvenilirlik çalışması* [Conference presentation abstract]. Uluslararası Avrasya Eğitim Araştırmaları Kongresi.
- Işık, E., Özbiler, Ş., Schweer-Collins, M. L. & Rodríguez-González, M. (2020). Differentiation of self predicts life satisfaction through marital adjustment. *The American Journal of Family Therapy*, 48:3, 235-249. <https://doi.org/10.1080/01926187.2020.1732248>
- Kaletka, K. (2014). Marital satisfaction, differentiation of self and stress perceived by women. *Polskie Forum Psychologiczne*, 19(3), 325–339. <https://doi.org/10.14656/PFP20140302>.
- Kalkan, M. (2002). *Evlilik ilişkisini geliştirme programının, evlilerin evlilik uyum düzeyine etkisi* (Publication no: 122596) [Doctoral Dissertation, Ondokuz Mayıs University]. CoHE Thesis Center.
- Kalkan, E. & Aydoğan, D. (2019). Evlilik ilişki kalitesini benlik açısından değerlendirme: Benliğin farklılaşması ve ilişkisel özgünlük. *Ondokuz Mayıs University Journal of Education Faculty*, 38(1), 174-189. Retrieved from <https://dergipark.org.tr/tr/pub/omuefd/issue/46119/494918>
- Kapucu, O. (2014). *Evli çiftlerin evlilik kalitesi ve bağlanma stillerinin demografik özellikler açısından incelenmesi* [Yayımlanmamış yüksek lisans tezi]. Üsküdar Üniversitesi.
- Kerr, M. E. (1988). Chronic anxiety and defining a self. *The Atlantic Monthly*. www.columbia.edu/itc/hs/nursing/m4050/baker/85715u03/Kerr.pdf 29.04.2019 14:15.
- Knauth, D. A., & Skowron, E. A. (2004). Psychometric evaluation of the Differentiation of Self Inventory for adolescents. *Nursing Research*, 53(3), 163–171. <https://doi.org/10.1097/00006199-200405000-00003>
- Kruse N. (2007). *The Relationship between self-differentiation and the levels of trust, shame, and guilt in intimate relationships* (Publication no: 3268866) [Doctoral Dissertation, Alliant International University]. Alliant International University Los Angeles ProQuest Dissertations Publishing.
- Kurdek, L. A. (2005). Gender and marital satisfaction early in marriage: A growth curve approach. *Journal of Marriage and Family*, 67, 68–74. <https://doi.org/10.1111/j.0022-2445.2005.00006.x>
- Kurt, İ. E. (2018). *Ebeveynlik stresi ve evlilik kalitesi arasındaki ilişkide stresle çift olarak baş etmenin aracı rolünün incelenmesi* (Publication no: 497964) [Doctoral Dissertation, Çukurova University]. CoHE Thesis Center.
- Lal, A., & Bartle-Haring, S. (2011). Relationship among differentiation of self, relationship satisfaction, partner support, and depression in patients with chronic lung disease and their partners. *Journal of Marital and Family Therapy*, 37(2), 169-181. <https://doi.org/10.1111/j.1752-0606.2009.00167.x>
- Lampis, J. (2016). Does partners' differentiation of self predict dyadic adjustment? *Journal of Family Therapy*, 54, 303–318. <https://doi.org/10.1111/1467-6427.12073>.

- Lampis, J., Cataudella, S., Busonera, A., & Skowron, E. A. (2017). The role of differentiation of self and dyadic adjustment in predicting codependency. *Contemporary Family Therapy*, 39(1), 62–72. <https://doi.org/10.1007/s10591-017-9403-4>
- Larson, J. H. (2003). *The great marriage tune-up book*. Jossey-Bass.
- McGoldrick, M., Carter, E. A., & Garcia-Preto, N. (2016). *The expanding family life cycle: Individual, family, and social perspectives* (5th ed.). Pearson.
- Meydan, C. H. & Şeşen, H. (2011). *Yapısal eşitlik modellemesi AMOS uygulamaları*. Detay Yayıncılık.
- Mosmann, C., Wagner, A., & Féres-Carneiro, T. (2006). Qualidade conjugal: Mapeando conceitos [Marital quality: Mapping out concepts]. *Paidéia (Ribeirão Preto)*, 16(35), 315-325. <https://doi.org/10.1590/S0103-863X2006000300003>
- Murphy, F. M. (1999). *Is the Bowen theory universal? Level of differentiation of self and marital adjustment among Asian-Americans* (Publication no: 9920529) [Doctoral Dissertation, The Wright Institute]. The Wright Institute ProQuest Dissertations Publishing
- Nazlı, S. (2017). *Aile danışmanlığı uygulamaları*. Anı Yayıncılık.
- Nichols, M. P., & Schwartz, R. C. (2005). *The essentials of family therapy*. Allyn & Bacon.
- Nichols, M. P. (2013). *Aile terapisi: Kavramlar ve yöntemler*. Kaknüs Yayınları.
- Olson, D. H. (2000). Circumplex model of marital and family systems. *Journal of Family Therapy*, 22, 144-167. <https://doi.org/10.1111/1467-6427.00144>
- Özgüven, İ. E. (2009). *Evlilik ve aile terapisi* (2.nd Edition). PDR Yayınları.
- Peleg, O., & Grandi, C. (2018). Differentiation of self and trait anxiety: A cross-cultural perspective. *International Journal of Psychology*, 1-12. <https://doi.org/10.1002/ijop.12535>
- Polat, K. (2014). *Evli bireylerde çift uyumu ve bazı psikolojik belirtilerin benliğin farklılaşması açısından incelenmesi* (Publication no: 378571) [Master Dissertation, Tokat Gaziosmanpaşa University]. CoHE Thesis Center.
- Polat, K., & İlhan, T. (2018). An investigation of dyadic adjustment, and some psychological symptoms with respect to differentiation of self among married individuals. *Turkish Psychological Counseling and Guidance Journal*, 8, 87–115.
- Proulx, C. M., Helms, H. M., & Buehler, C. (2007). Marital quality and personal well-being: A meta-analysis. *Journal of Marriage and Family*, 69(3), 576-593. <https://doi.org/10.1111/j.1741-3737.2007.00393.x>
- Robinson, L. C., & Blanton, P. W. (1993). Marital strengths in enduring marriages. *Family Relations*, 42, 38-45. <https://doi.org/10.2307/584919>
- Rodríguez-González, M. (2016). *Differentiation of self: adaptation of an assessment instrument and analysis of its relation with the couple relationship, stress, and health* [Doctoral dissertation, the University of Santiago de Compostela]. Library of the University of Santiago de Compostela.
- Rodríguez-Gonzalez, M., Skowron, E. A., Cagigal de Gregorio, V., & Munoz San Roque, I. (2016). Differentiation of self, mate selection, and marital adjustment: Validity of postulates of Bowen theory in a Spanish sample. *American Journal of Family Therapy*, 44(1), 11–23. <https://doi.org/10.1080/01926187.2015.1099415>
- Ross, C. E., Mirowsky, J., & Goldsteen, K. (1990). The impact of the family on health: The decade in review. *Journal of Marriage and Family*, 52(4), 1059-1078. <https://doi.org/10.2307/353319>
- Roytburd, L.F., Myrna, L. (2008). Predictors of Soviet Jewish refugees' acculturation: Differentiation of self and acculturative stress. *Cultural Diversity and Ethnic Minority Psychology*, 14:67-74. <https://doi.org/10.1037/1099-9809.14.1.67>
- Sabatelli, R. M. (1988). Measurement issues in marital research: A review and critique of contemporary survey instruments. *Journal of Marriage and the Family*, 50, 891-915. <https://doi.org/10.2307/352102>
- Sabatelli, R. M., & Bartle-Haring, S. (2003). Family-of-origin experiences and adjustment in married couples. *Journal of Marriage and Family*, 65(1), 159–169. <https://doi.org/10.1111/j.1741-3737.2003.00159.x>
- Sarıkaya, Y., Boyacı, M., İlhan, T., & Aldemi, A. (2018). Adaptation of the differentiation of self-inventory short form (DSI-SF) to Turkish: Validity and reliability study. *Bartın University Journal of Faculty of Education*, 7, 365–380. <https://doi.org/10.14686/buefad.364196>
- Schnarch, D. (1998). *Passionate marriage*. W.W. Norton & Company.

- Skowron, E. A., & Friedlander, M. L. (1998). The differentiation of self-inventory: Development and initial validation. *Journal of Counseling Psychology, 45*(3), 235-246. <https://doi.org/10.1037/0022-0167.45.3.235>
- Skowron, E. A. (2000). The role of differentiation of self in marital adjustment. *Journal of Counseling Psychology, 47*(2), 229-237. <https://doi.org/10.1037/0022-0167.47.2.229>
- Skowron, E. A., Holmes, S. E., & Sabatelli, R. M. (2003). Deconstructing differentiation: Self-regulation, interdependent relating, and well-being in adulthood. *Contemporary Family Therapy, 25*(1), 111-129. <https://doi.org/10.1023/A:1022514306491>
- Skowron, E. A., & Schmitt, T. A. (2003). Assessing interpersonal fusion: Reliability and validity of a new DSI fusion with others subscale. *Journal of Marital and Family Therapy 29*(2), 209-22. <https://doi.org/10.1111/j.1752-0606.2003.tb01201.x>
- Spanier, G. B. (1976). Measuring dyadic adjustment: New scales for assessing the quality of marriage and similar dyads. *Journal of Marriage and Family, 38*(1), 15-28. <https://doi.org/10.2307/350547>
- Spanier, G. B., & Cole, C. L. (1976). Toward clarification and investigation of marital adjustment. *International Journal of Sociology of the Family, 6*(1), 121-146.
- Spanier, G. B., & Lewis, R. A. (1980). Marital quality: A review of the 1970s. *Journal of Marriage and the Family, 42*, 825-39. <https://doi.org/10.2307/351827>.
- Tabachnick, B. G., & Fidell, L. S. (2015). *Çok değişkenli istatistiklerin kullanımı* (6. baskı) M. Baloğlu (Çev. Ed.). Nobel Akademi Yayınları.
- Titelman, P. (2014). *Differentiation of self: Bowen family systems theory perspectives*. Routledge. <https://doi.org/10.4324/9781315809717>
- Tönbül, Ö. (2020). *Evli bireylerin erken dönem uyumsuz şemaları ile benlik farklılaşma düzeylerinin evlilik ilişkisi inançları üzerindeki etkisinin incelenmesi* (Publication no: 646474) [Master Dissertation, Çanakkale Onsekiz Mart]. CoHE Thesis Center.
- Wamboldt, F. S. & Reiss, D. (1989). Defining a family heritage and a new relationship identity: Two central tasks in the making of a marriage. *Family Process, 28*, 317-335. <https://doi.org/10.1111/j.1545-5300.1989.00317.x>
- Williams, K. (2003). Has the future of marriage arrived? A contemporary examination of gender, marriage, and psychological well-being. *Journal of Health and Social Behavior, 44*(4), 470-487. <https://doi.org/10.2307/1519794>
- Wickrama, K. A. S., Lorenz, F. O., Conger, R. D., & Elder, G. H. (1997). Marital quality and physical illness: A latent growth curve analysis. *Journal of Marriage and Family, 59*(1), 143-155. <https://doi.org/10.2307/353668>
- Xue, Y., Xu, Z.Y., Zaroff, C., Chi, P., Du, H., Ungvari, G.S., Chiu, H.F.K., Yang, Y.P. & Xiang, Y.T. (2018). Associations of differentiation of self and adult attachment in individuals with anxiety-related disorder. *Perspectives in Psychiatric Care, 54*, 54-63. <https://doi.org/10.1111/ppc.12200>

The Relationship Between Depression And Emotion Dysregulation: A Meta-Analytic Study

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ABSTRACT

The aim of the current study is to examine the relationship between emotion regulation difficulties and depression by meta-analysis method. As a result of the literature review, a total of 4582 studies were identified and these studies were analysed according to their titles and abstracts. As a result of the evaluations, 37 full texts were included in the analysis. The findings obtained from the analyses were examined and it was determined that there was no significant difference in all subgroups regarding the relationship between emotion regulation difficulties and depression, and the effect size between the two variables did not change. As a result of the REM analysis, it was seen that the generalised effect size of the relationship between difficulties in emotion regulation and depression was moderate (0.52). Considering the scanning process within the scope of this study, it can be stated that there are too many measurement differences and deficiencies in reporting.

Emotion regulation strategies that people use in their daily lives and interpersonal relationships have recently attracted considerable attention. These strategies are known to be adaptive or maladaptive (Gross & Thompson, 2007; Kring & Sloan, 2010). Studies have revealed that especially rumination and suppression among emotion regulation strategies are associated with depression (Aldoa et al., 2010; Nolen-Hoeksema & Aldoa, 2011; Min et al., 2013; Düsing et al., 2021). Regulation of positive and negative emotions is very important for healthy functioning (Kring & Werner, 2004).

Emotion regulation is known as the individual's capacity to use strategies to regulate emotional experiences. According to this capacity level, in emotion regulation processes, all factors of emotion such as emotions, thoughts, physiological reactions and behaviors are changed or maintained voluntarily or involuntarily (Gross, 1998). Emotion regulation is the processes used to remember, experience, control or change an individual's negative or positive emotion (Bridges et al., 2001). Dahl (2001) sees emotion regulation as the effort of individuals to manage their emotions.

Emotion regulation is known as the regulation of positive and negative emotions. In terms of their characteristics and their impact on human evolution, emotion regulation skills and strategies may differ for negative and positive emotions (Fredrickson, 2003; Fredrickson et al., 2008). Negative emotions mobilize people to take actions that help them survive in moments that are seen as a threat to human life (Fredrickson et al., 2008). Since this is not seen in individuals with emotion regulation difficulties, they are known to be prone to psychopathologies (Aldoa & Nolen-Hoeksema, 2010). The effects and nature of emotion regulation may differ. The strategies preferred by the person, the moment of using these strategies, the goals of emotion regulation and the context affect the success and adaptation of emotion regulation strategies (Gross &

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Thompson, 2007). The Emotion Regulation Process Model emphasizes that people regulate their emotions in order to increase their positive emotions and decrease their negative emotions (Gross, 1998). In this respect, if strategies that function like reappraisal commonly lead to positive outcomes, it is expected that everyone will always use reappraisal instead of suppression (which can lead to some negative outcomes) (Gross, 2008). However, the emotion regulation strategies used by individuals may differ and Gross (1998) explained that this is because individuals have different goals for emotion regulation.

Emotions play an important role in behavioral responses, recalling an important memory, facilitating interpersonal communication and decision-making. Maladaptive emotional reactions are known to be involved in many psychopathologies. Considering all these, it is seen how important a role successful emotion regulation plays in the well-being of individuals (Gross & Thompson, 2007).

Emotional dysregulation is defined as the maladaptive strategies that individuals use against the intense emotions they experience. This situation can be assessed as an inability to use the functional aspects of emotions and a decrease in cohesion (Gross, 2013). Emotional dysregulation is known to have a multidimensional structure. Accordingly, dimensions such as not being aware of emotional experience, difficulty in understanding and accepting emotions, focusing on the goal in case of emotional arousal, and having difficulty in impulse control express emotion dysregulation (Gratz & Roemer, 2004). These dimensions usually interact to cause problems in the individual's emotional, cognitive, and behavioral systems. Emotion dysregulation can lead to maladaptive behaviors as it causes difficulties in regulating negative emotions (Aldao et al., 2010).

Many psychiatric disorders in DSM-V are related to emotion and emotion regulation processes. When the related literature is examined, it is seen that there are studies examining psychopathologies and emotion regulation together (Aldao et al., 2010; Martin & Dahlen, 2005). In a study examining the relationship between emotion regulation and psychopathology groups, it was found that avoidance, suppression and rumination emotion regulation strategies had more effect on psychopathologies (Aldao et al., 2010).

Depression, which is known as one of the most common psychiatric disorders today (Öztürk & Uluşahin, 2014) and literally defined as depression, is defined as a set of symptoms such as unhappiness, hopelessness, sadness, pessimism, stagnation, and reluctance (Türkçapar, 2019). Studies on depression have emphasized the importance of emotion regulation processes in the onset and maintenance of depression (Joorman & Quinn, 2014). It is known that maladaptive emotion regulation strategies are seen with negative life events and depression symptoms (Stikkelbroek et al., 2018).

Depression is known to be associated with poor emotion regulation strategies (Joormann & Stanton, 2016). The views on this hypothesis have been explained by mood adaptation hypotheses (Ellis et al., 2009). Depressed mood is thought to increase the intensity of negative emotional reactivity. In addition, the lack of positive emotions in depression has a negative effect on the intensity of positive emotional reactivity (Bylsma et al., 2008). Individuals' negative cognitive evaluations and cognitive distortions cause the emergence of negative emotions (Türkçapar, 2019). The mood adjustment hypotheses emphasize that changes in emotion regulation may be related to people's negative mood. However, research shows that the decrease in emotional reactions of people with depression is valid not only for pleasurable stimuli but also for unpleasant stimuli (Rottenberg et al., 2005). In addition to the studies examining the relationship between emotion regulation and depression, the emotion context insensitivity hypothesis is also prominent. It suggests that depression differentiates individuals' emotional responses from context to context (Ellis et al., 2009). It is observed that depressed individuals show decreases in their reactions to both positive and negative emotional cues (Rottenberg, 2005).

Studies have shown that rumination, self-blame, catastrophizing, reduced positive reappraisal and acceptance, which are sub-dimensions of emotion regulation, affect depression independently of gender (Martin & Dahlen, 2005). In a study examining emotion regulation and depression with different samples, it was found that there was a strong relationship between depressive symptoms and catastrophizing, rumination and diminished positive reappraisal (Ehring et al., 2008; Min et al., 2013; Aldao & Nolen-Hoeksema, 2011; Rozemarijn et al., 2022).

Rumination, which emphasizes repetitive focus on individuals' negative emotions and their causes, is associated with depression (Garnefski et al., 2002). At the same time, studies have found that rumination

strategy has a positive predict on negative affect (Watkins & Teasdale, 2001) and affects the severity of depression symptoms (Just & Alloy, 1997). Studies show that adaptive emotion regulation strategies such as reappraisal have a negative effect on depression symptoms (Arditte & Joormann, 2011). Catastrophizing, which is defined as focusing on the negative aspects of stressful events, also predicts depression (Sullivan et al., 1995).

The current study aims to examine the relationship between emotion regulation and depression through meta-analysis. As a result of the literature review, not many meta-analysis studies on the relationship between depression and emotion regulation were found. To the best of our knowledge, there are three recent comprehensive reviews on major depressive disorder and self-reported emotion regulation (Aldao et al., 2010; Joormann & Stanton, 2016; Liu & Thompson, 2017). In the meta-analysis study conducted by Aldao et al. (2010), it was found that the effect size of depression was high with rumination and avoidance strategies, moderate with suppression and problem solving strategies, and low with acceptance and reappraisal strategies. However, the literature review related to this study was conducted in 2008. Furthermore, Aldao et al. (2010) did not only focus on samples diagnosed with depression, but also considered a wider range of psychopathologies as well as samples defined by self-reported symptoms of depression. Likewise, Joormann and Stanton (2016) reviewed studies with both clinical and non-clinical samples. More recently, Liu and Thompson (2017) reviewed a wide range of studies investigating emotion regulation strategies with more narrowly defined major depressive disorder. They focused their review on individuals diagnosed with major depressive disorder using validated diagnostic interviews. In addition to self-report measures of emotion regulation, they included a range of different study designs, including laboratory and naturalistic assessments. The review provides an important overview of the field of emotion regulation in major depressive disorder and offers valuable directions for future clinical trials and research. More specifically, they found that individuals with current and recovered major depression reported more rumination and less acceptance compared to healthy controls. They also report that the current status of suppression is unclear, as results from studies have not been consistent. However, the reviews by Liu and Thompson (2017) and Joormann and Stanton (2016) do not appear to be based on systematic literature reviews as no such procedure was reported. Therefore, studies that potentially should have been included in the scope of the research may have been omitted. Furthermore, he did not apply meta-analytic procedures within the scope of the relevant study. Quantification of the findings may illuminate group differences in self-reported emotion regulation. Furthermore, such methods enable moderator analyses to investigate whether certain characteristics have an effect on emotion regulation. Considering the studies on the variables addressed within the scope of the research, it is thought that addressing the relationships between depression and emotion regulation variables in a holistic manner will be beneficial to the literature. Therefore, this study examined the relationship between emotion regulation and depression in a holistic manner through meta-analytic method. For this aim, answers to the following questions were sought: What is the average effect size of the relationship between emotion regulation and depression?

Does the effect size of the relationship between depression and emotion regulation differ significantly according to the moderator variables of publication year, target population type and research area?

Method

In this section, the data collection process, the process of determining the criteria, the validity and reliability of the measurement results related to the coding form, and data analysis are discussed. This study was designed with the meta-analysis method. Meta-analysis is seen as a method based on combining the statistical findings of quantitative studies in a systematic way (Borenstein et al., 2009). Meta-analysis is a method that focuses on a series of studies with appropriate methods to summarize data addressing the same question using similar criteria (Hedges & Olkin, 1985), correcting artificially created differences between studies (Schmidt & Hunter, 2015) and combining them in a systematic way (Dinçer, 2020). The aim of meta-analysis is to use data from a series of studies to obtain information about effect size by performing operations on various constructs (Hedges, 1982).

Data Collection Process

In the international literature, it is recommended to use the flow diagram within the scope of the PRISMA statement and to follow the PRISMA guidelines in systematic review and meta-analysis studies in order to accurately perform and improve the presentation and reporting of systematic review and meta-analysis studies (The PRISMA Group, 2009). Almao et al. (2010) conducted a study on a similar topic. In the meta-analysis

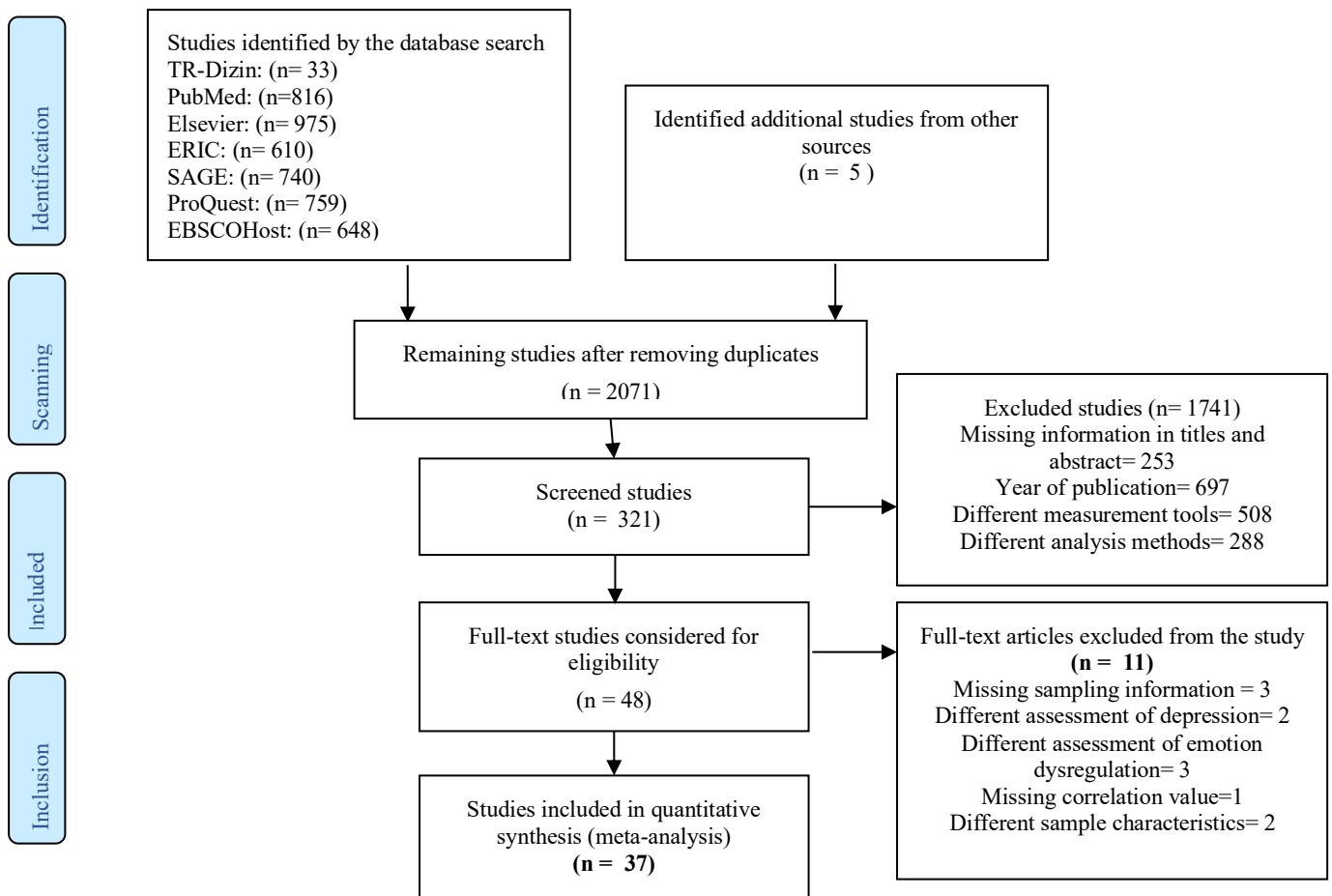
study conducted by Almaso et al. 114 studies conducted between 1986-2010 were included in the meta-analysis. For this reason, within the scope of this study, studies conducted between 2010-2022 were scanned. In this context, two researchers independently scanned the studies published in TR-Dizin, PubMed, ERIC, EBSCOHost, ProQuest, SAGE and Elsevier databases between 2010 and 2022, in which the SFL was used. The reason for selecting these databases is that they publish publications mainly in the fields of psychology, psychological counselling and guidance, and the publications are open access and generally include journals with high impact. In this context, it is considered that the studies examined in the current study can provide content validity. The mentioned databases were searched with the keywords "Emotion Dysregulation", "Difficulties in Emotion Regulation", "Major Depressive Disorder" and "Depression", and a total of 4582 studies were examined according to their titles and abstracts. Then, the same studies were removed and the full texts of the remaining studies were examined and the inclusion criteria were determined. The inclusion criteria are as follows:

The study examined the relationship (correlation) between emotion dysregulation and depression. The study includes statistical information required for meta-analysis, such as correlation coefficient and sample size.

The study includes Pearson correlation coefficient or statistics used to calculate Pearson correlation coefficient. The study includes information on publication language, research area, sample characteristics and year variable.

Twenty-eight studies that met the specified inclusion criteria were identified and the research was conducted using the information obtained from these 34 studies. In order to make the screening part of the study transparent, the flow diagram proposed by PRISMA is presented in Figure 1 (PRISMA, 2009).

Figure 1. Flow Diagram



Data Analysis

After the identical studies were removed, the full texts of the remaining studies were analyzed. At this stage, inclusion criteria were determined. The criteria determined are; i) ULAKBIM, and ELSEVIER databases, ii) the correlation between depression and emotion regulation was reported, iii) the sample group, sample size, average age of the sample, scale form or number of items were included in the study, iv) the sample group consisted of Turkish individuals and v) the language of the study was English or Turkish. According to the inclusion criteria, the studies were coded by two researchers and the percentage of inter-coder agreement was 90% and the Krippendorff Alpha coefficient was .88, and these results were considered as an indicator of high inter-coder reliability. As a result of compliance with the inclusion criteria and inter-coder reliability, it was determined that there were 37 studies suitable for meta-analysis and meta-analysis was performed with 37 studies. All analyses of the study were conducted using JAMOVI and R software.

The distributions of Cronbach's Alpha coefficients are not normally distributed. Therefore, the distribution of reliability coefficients was normalized by using Bonett (2002) transformation. The reliability generalization study was carried out using the coefficients obtained as a result of the transformation, and the comments were made by converting the last value obtained into Cronbach's Alpha coefficient. In determining whether the studies evaluated within the scope of meta-analysis show a heterogeneous distribution, that is, in determining the sources of variability of reliability values within the scope of individual studies, the Q statistic, the I² statistic, which is a function of the Q statistic, and the lower and upper confidence interval for the generalized reliability value were used. Considering that Bonett's VC model is basically a random effects model (Holland, 2015) and that the random effects model is a more realistic representation of the real world (Field, 2003b), the random effects model (REM) was preferred in the research. For the estimation of between-study variance under REM, the Sidik-Jonkman estimator, which has better features and produces better results than other estimators, was preferred.

During the coding of the studies selected according to the criteria for inclusion in the meta-analysis, the following study characteristics were considered: (i) study name, (ii) author(s) name, (iii) year of publication, (iv) language of publication, (v) reliability coefficient, (vi) type of reliability, (vii) sample size, and (viii) sample type. The studies were coded by two researchers according to the specified characteristics, and the percentage of inter-coder agreement was 93% and the Krippendorff Alpha coefficient was .91, and these results were considered as an indicator of high inter-coder reliability.

The present meta-analysis study, like other meta-analysis studies, has some limitations. The first one is the limitations of the meta-analysis method itself. Within the scope of the study, only the studies in which Cronbach's alpha value was calculated and only the studies conducted within the scope of Turkey sample were evaluated. At the same time, only articles were reviewed within the scope of the study. Although all of the postgraduate studies of individual researchers were reached, only those that were published and open to the access of readers could be reached due to the different dates of acceptance and publication of the articles in accordance with the publication policies of peer-reviewed scientific journals. Although a rich keyword pool was created for individual studies obtained with the help of search engines and databases, the fact that studies that were not shown or could not be reached as a result of the search could not be included in the list is seen as another important limitation. In addition, the study is limited to the analysis of coded moderator variables.

Within the context of the study, funnel diagram, Egger's regression test and Kendall's tau were used to examine publication bias. In addition, the fail-safe N method was also used to obtain information about how many studies with an effect size value of zero should be conducted in order to eliminate the significance of the meta-analysis result. Within the scope of the study, the year of publication (2010 and later), sample type (healthy/others), language of publication (English/Turkish) and field of study (Psychology/Psychiatry) were considered as moderator variables. Meta-regression and Analog ANOVA were used to determine the effect of these moderator variables on the variability of reliability estimation.

Findings and Interpretations

In this section, publication bias findings are presented first, followed by heterogeneity, effect size and moderator analysis findings.

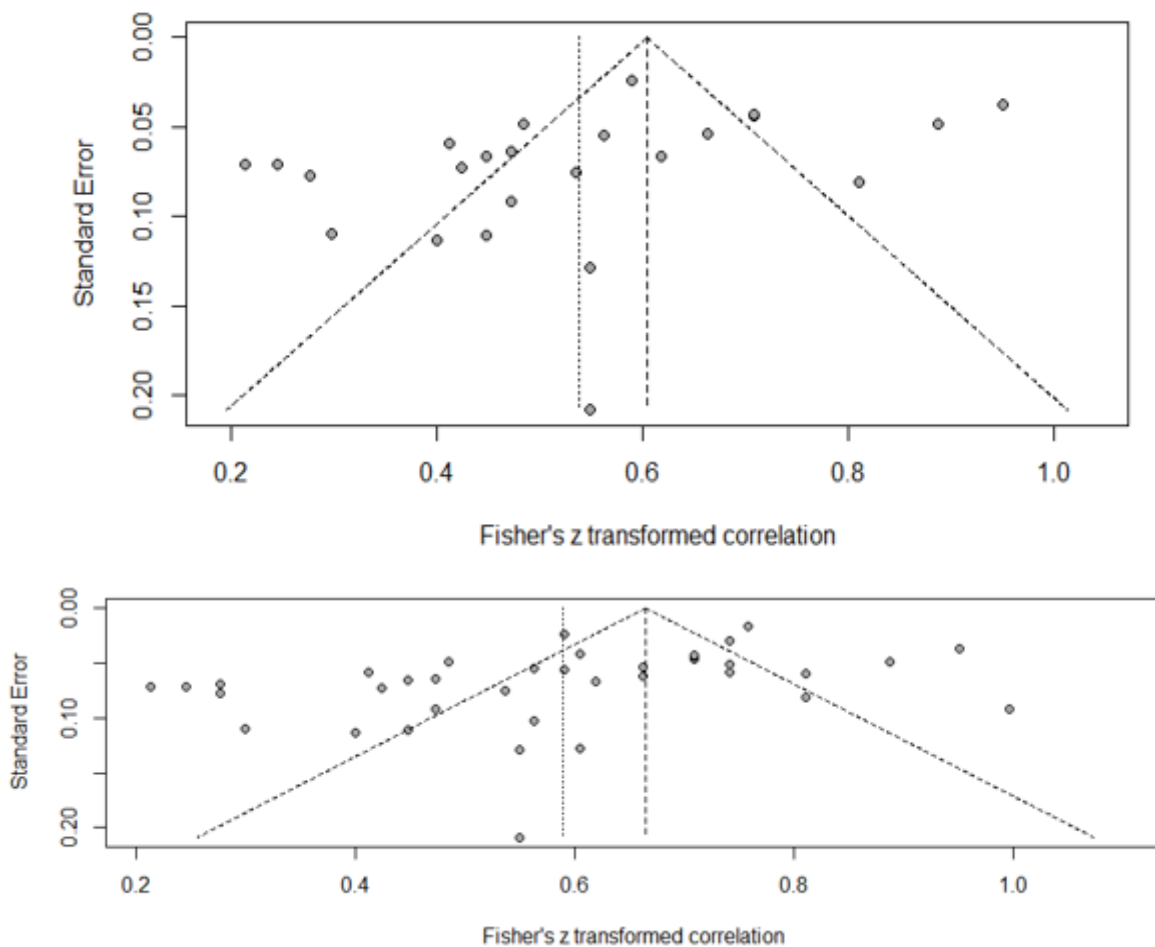
Findings and Interpretations on Publication Bias

Within the context of the research, before calculating the average effect size of the meta-analysis, evidence for the detection of publication bias in the studies examined within the scope of the analysis was sought. For this purpose, Mullen et al.(2001) formula, funnel plot, Egger's linear regression test, Kendall's tau value, and Duval and Tweedie clipping and filling method were used.

Mullen et al.(2001) pointed out that the resilience of the results of meta-analysis studies against future studies can only be realized when the value calculated using the formula $N/(5k+10)$ is greater than 1. Using the relevant formula, it was determined that the value obtained for the total population of 15750 people was greater than 1 (80.77). The fact that the calculation results for these values are greater than 1 can be interpreted as the publication bias of this meta-analysis study is very low.

One of the most widely used methods for collecting visual evidence of publication bias is the funnel plot. Figure 2 shows the funnel plot.

Figure 2. Funnel Chart



In a funnel chart, studies are expected to be symmetrically distributed around the uncertainty line (the line that cuts the overall effect size for reliability). Although Figure 2 shows that the effect sizes of individual studies are approximately symmetrically distributed to the right and left of the overall effect size, this interpretation is

subjective (Borenstein et al., 2013). For a more objective interpretation, Egger's regression test should be utilized. The fact that the result of Egger's Linear Regression test (EggerValue= -4.49, $p=0.0873>0.05$) was not statistically significant is another indication that there is no evidence of publication bias. Moreover, the Begg and Mazumdar rank correlations statistic was examined in terms of contributing/not contributing to the lack of asymmetry in the funnel plot. When the Begg and Mazumdar rank correlations statistic is analyzed, it is concluded that there is no asymmetry in the funnel chart (Kendall's Tau= -0.350, $p=0.169>0.05$). Finally, the Duval and Tweedie trimming and filling test result was examined and it was concluded that there was no difference between the observed and actual effect sizes. As a result of the tests on the asymmetry of the funnel chart, it was concluded that the funnel chart was symmetrical and there was no evidence of publication bias.

When the studies on publication bias in recent years are examined, it is stated that publication bias is mostly caused by significance levels and p-hacking, and therefore, it is recommended to interpret the outputs obtained as a result of p-curve and p-uniform analyses in the process of collecting evidence on publication bias (Simonsohn et al., 2014a; Harrer et al., 2019). For this aim, the results obtained from the p-curve analysis were finally interpreted in terms of examining publication bias. Figure 3 shows the result of the p-curve publication bias analysis.

Figure 3. P-Curve Plot

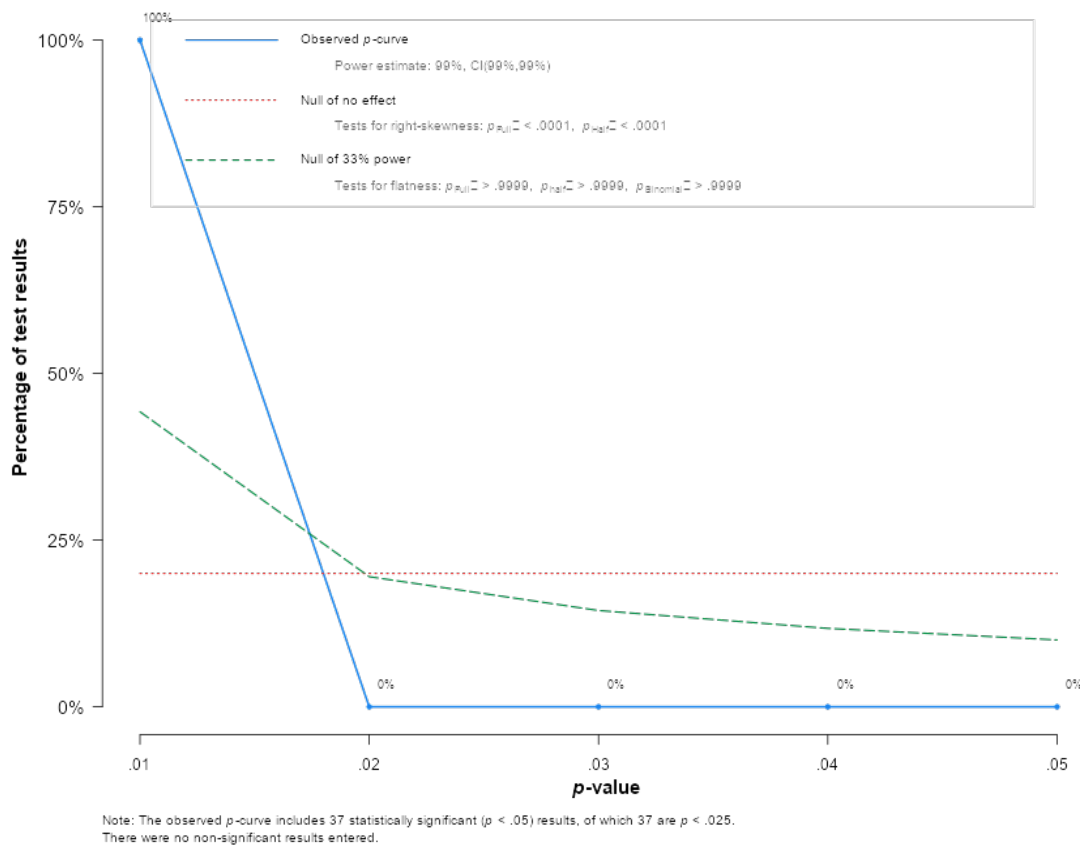


Figure 3 shows that the observed p-curve includes 37 studies at $p<0.05$ significance level and all of the studies are at $p<0.025$ significance level. The blue line represents the observed p-curve and the power estimate for the observed p-curve is 99%. In conclusion, when all the statistics and visualizations regarding publication bias were analyzed, it was determined that there was no evidence of publication bias.

Within the context of the study, the numerical output of the meta-analysis regarding the Fail-Safe N, which is a way of defining the p-value, was also analyzed. The fact that the p-value for the Fail-Safe N is smaller than the alpha value ($p<0.001$) indicates that the study is a strong study with low reliability. Within the scope of the study, it was determined that the p value for the Number of Error Protections was less than the alpha value of 0.05 (FSN=115083, $p<.001$). According to this result, it can be said that the study is a strong study with a high

level of reliability.

Findings and Interpretations on Risk of Bias

In order to evaluate the risk of bias in the research, a study identified as an outlier (Keleş-Altun & Atagün, 2019) was excluded from the analysis and the meta-analysis was performed again. As a result of the repeated analysis based on the random effects model, it was determined that the effect size obtained increased from 0.522 to 0.529. However, since this difference was very low, it was concluded that there was no risk of bias within the scope of the study.

Findings and Interpretation on Generalized Effect Size

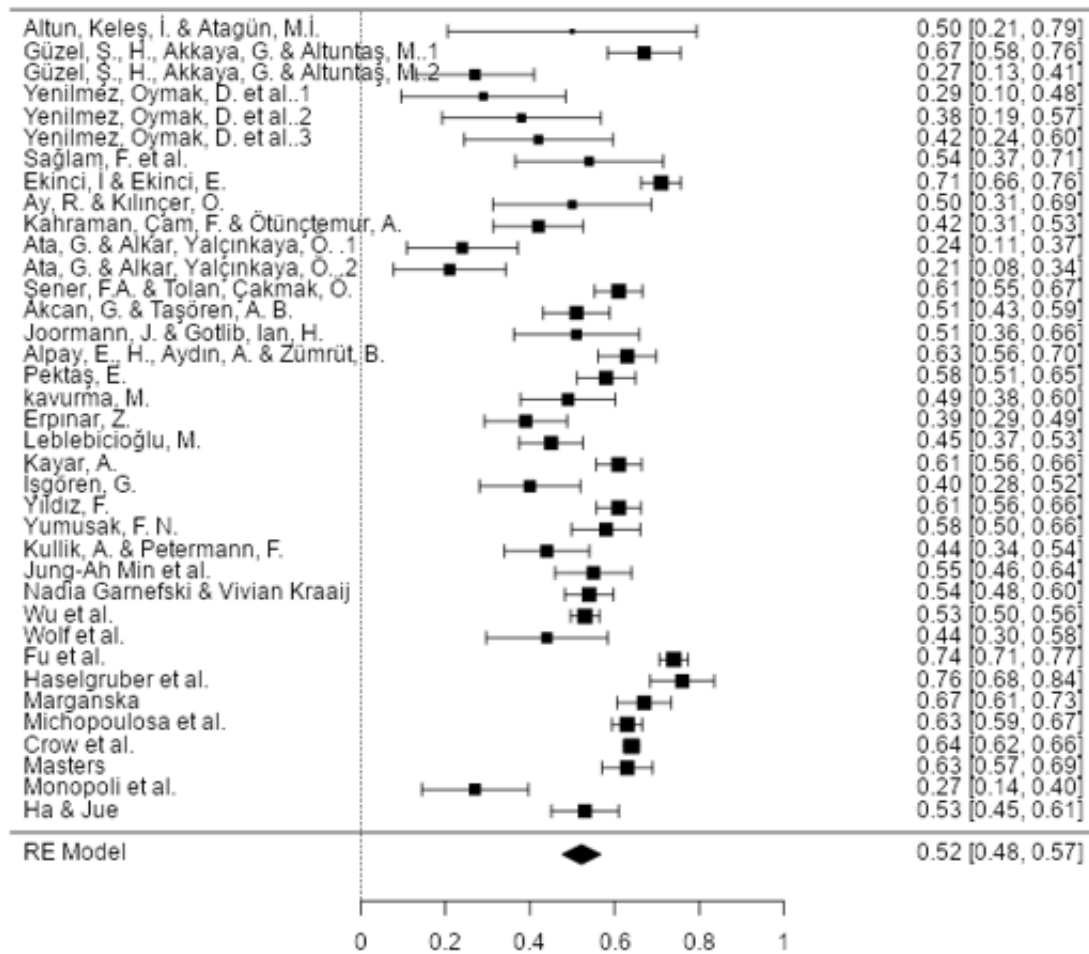
Following the process of searching for evidence of publication bias related to the studies included in the sample of the study, the generalized effect size should be calculated within the context of the preferred random effects model, taking into account the sampling frame of the study. Table 1 shows the overall effect size and the upper and lower confidence interval values for the overall effect size.

Table 1. Output for General Effect Size

Model	Effect Size	Standard Error	z	p	CI Lower	CI Upper
REM	0.522	0.02	22.5	<.001	0.47	0.56

When Table 1 is examined, it is observed that the generalized effect size value for the relationship between depression and emotion regulation is 0.52 with an error of 0.02. The lower limit of the generalized effect size is 0.47 and the upper limit is 0.56 at 95% confidence interval. When the point estimate value of 0.52 and the lower and upper confidence interval values of the generalized effect size are interpreted considering the effect size classification of Cohen et al. (2011), it can be said that the generalized effect size value is moderate. Another output of the meta-analysis is the forest plot. Figure 4. shows the forest plot.

Figure 4. Forest Graph



Considering the data on the effect sizes of the studies included in the study, it is seen that the effect size values for the studies vary between 0.76 (Haselgruber et al., 2021) and 0.21 (Ata et al., 2020). When the statistical results of the reliability values of the studies are evaluated holistically, it is noticeable that the reliability of all 37 of the 37 studies constituting the sample is above the acceptable level. The forest plot also includes study weights. The size of the square representing each study in the forest plot shows the weight of the study. When the study weights in the forest plot are analyzed, it can be said that the weight of the study conducted by Wu et al. (2013) is the highest.

After analyzing the forest graph, the heterogeneity statistics in Table 2 were analyzed.

Table 2. Heterogeneity Statistics

I^2	df	Q	p
%94.23	36	371.352	< .0001

Table 2 shows that the result of Cochran's Q Test is statistically significant ($Q \sim (df = 36) \sim = 371.352, p < .0001$). In other words, the change in effect size is larger than expected from sampling error. According to this result, it can be said that the actual effect size varies according to the studies. The I^2 statistic, another statistic that provides information about heterogeneity, shows the rate of change in the observed effect size that can be attributed to sampling error. Table 2 shows that $I^2 = 94.23\%$. I^2 provides information about the degree of inconsistency of the findings of the studies within the scope of meta-analysis and reflects the extent to which the confidence intervals obtained from different studies overlap with each other (Borenstein et al., 2009). The I^2 value obtained within the scope of meta-analysis is a relatively large I^2 value and this value means that the effect size varies significantly across studies. In addition to the Q and I^2 statistics, the lower limit value of 0.47 and the upper limit value of 0.56 in the 95% confidence interval for the mean effect size

provide information about how widely effect sizes vary between populations (based on standard deviation). Considering the statistically significant result of the Q statistic, the relatively high I² value and the relative width of the estimation interval, it can be said that there is a heterogeneity that needs to be examined. Within the context of the research, moderator analyses were used to explain the sources of heterogeneity.

Moderator Analysis

Meta-analysis finally examined whether the studies included in the analysis showed heterogeneous distribution. The heterogeneity of the combined studies was determined by Q test and I² value. In this framework, one of the aims of the study was to determine the differentiation of the relationship between depression and emotion regulation in terms of subgroups related to the language of publication, diagnosis and research field variable. Moderator analysis results are presented in Table 3.

Table 3. Distribution of Effect Sizes According to Subgroups of Moderator Variables

Moderator Variable	Levels of Moderator Variables	k	ES _{mean}	ES _{lower}	ES _{upper}	df	Q _B	p
Language of publication	Turkish	23	0.495	0.434	0.551	1	3.24	0.072
	English	14	0.578	0.507	0.640			
Sample type	Healthy	26	0.584	0.573	0.595	1	3.64	0.056
	Other	11	0.549	0.512	0.583			
Research area	Psychiatry	10	0.496	0.390	0.588	1	0.57	0.449
	Psychology	27	0.538	0.485	0.587			

The moderator analysis output regarding the sub-problem "Is there a statistically significant difference between the effect sizes of the studies according to the language of publication?" is given in the first row of Table 3. Within the scope of the relevant moderator analysis, the value to be examined for determining the sources of heterogeneity is the Q value. When the moderator analysis result for the first row is examined, it is concluded that there is no statistically significant difference between the effect sizes of the publication language (Turkish/English) variable (Q=3.24; p=0.07>.05). Accordingly, whether the studies are published in Turkish or English does not change the effect size.

The output of the moderator analysis conducted for the sub-problem "Is there a statistically significant difference between the effect sizes of the studies according to the target sample type?" is given in the second row of Table 3. Within the scope of the relevant moderator analysis, the value to be examined for determining the sources of heterogeneity is the Q value. When the moderator analysis result for the second row is analyzed, it is concluded that there is no statistically significant difference between the effect sizes of the target sample type (healthy/others) variable (Q= 3.64; p=0.056>.05). Accordingly, whether the target group is healthy or non-healthy does not change the effect size of the studies.

The output of the moderator analysis conducted for the sub-problem "Is there a statistically significant difference between the effect sizes of the studies according to the research area?" is given in the third row of Table 3. Within the scope of the relevant moderator analysis, the value to be examined for determining the sources of heterogeneity is the Q value. When the moderator analysis result for the third row is examined, it is concluded that there is no statistically significant difference between the effect sizes of the research field (psychiatry/psychology) variable (Q=0.57; p=0.44>.05). Accordingly, whether the research field of the studies is psychiatry or psychology does not change the effect size.

Discussion and Conclusion

The aim of the current meta-analysis study was to evaluate the studies on the relationship between emotion regulation difficulties and depression level with the help of meta-analysis method. In line with this purpose, meta-analysis was conducted with 37 individual studies (N= 15750) that met the inclusion criteria. In addition to the study purpose, moderator analyses were conducted to determine whether there was a possible statistical difference on the relationship between emotion regulation difficulties and depression according to the language of publication, sample type and research area. The findings obtained from these analyses were analyzed and it was found that there was no significant difference in the relationship between emotion regulation difficulties and depression in all subgroups. Since emotion regulation abilities and depression is a complex structure, it

can be highly affected by culture (Aldao et al., 2010). This situation can be affected by culture due to the expressiveness of emotions (Chen et al., 2022). In some cultures, emotional problems, difficulties in emotion regulation, mental health problems or depression may be perceived as a source of shame (Gromini et al., 2012). This may inhibit the recognition of emotional problems, sharing them with others and help-seeking behaviours. Because, in some cultures, forms of emotional expression may differ (Cheung et al., 2020). Cultural norms in which emotional expression is accepted or suppressed may affect a person's emotion regulation skills. In the current study, since the number and effect sizes of the articles published in Turkish and English are similar, it can be stated that there is no bias in the context of culture.

Within the scope of the study (Aldao et al., 2020) in which similar variables were used with emotional dysregulation and depression variables used in this study, it was observed that mixed samples resulted in larger effect sizes for the relationships between emotion regulation strategies and psychopathology. Considering this result, sample type was used as a moderator variable in the related study (Aldao et al., 2010). When the sample characteristics of the studies were analysed, it was seen that there was no difference between the effect sizes and the relationship between emotion regulation difficulties and depression did not change according to the sample characteristics. This result related to the sample type in the related study differs from the findings of Aldao et al. (2010). However, it should be taken into consideration that the relationships between emotion regulation and psychopathology are not different when two extreme groups such as healthy and unhealthy are compared (Kraft et al., 2023).

When the literature is examined, there are studies indicating that the relationships between psychological variables may vary in terms of worldviews, ideologies, values and concepts (Schwartz & Bardi, 2001; Matsumoto, 2006). Considering that the language of broadcasting can also be a variable related to the cultural context, the language of broadcasting was used as a moderator variable in the study. In the emergence of this result, it was concluded that the relationship between depression and emotion dysregulation was at a similar level in studies conducted in our country and studies conducted abroad, in other words, this relationship did not differ according to country or culture. This result is similar to the result of Hu et al. (2014) that culture is not a significant moderator variable between cognitive reappraisal and mental health between Eastern and Western cultures.

Considering that the concepts of emotion dysregulation and depression are among the study subjects of both psychology and psychiatry research (Berking & Wupperman, 2012), the variable of research area (psychology/psychiatry) was used as a moderator variable in the study. It was concluded that the relationship between depression and emotion dysregulation was at a similar level in psychiatry and psychology, in other words, this relationship did not differ according to research area. Although the related variable was accepted as a moderator variable in the scope of the research, it was determined that there was no variability between the two fields that constitute the study area in the relationship between emotion regulation and depression.

Within the context of the study, the results of 37 studies were evaluated by meta-analysis method in order to examine the relationship between emotion regulation difficulties and depression. In the study, it was determined that the effect sizes of the studies ranged between 0.21 and 0.76; at the same time, all of the effect sizes of the studies were positive and the generalized effect size value was 0.52, and according to this value, it was concluded that there is a relationship between emotion dysregulation and depression (Be et al., 2013). According to this result, studies examining the relationship between emotion regulation difficulties and depression show that there is a positive and moderate relationship between the two variables as a whole. Accordingly, when the studies conducted in different languages, in different fields and with different samples are evaluated as a whole, it is determined that emotion dysregulation positively increases the level of depression. It can be stated that the generalized effect size value calculated according to the random effect model represents a moderate effect according to Cohen et al.'s (2007) classification. It was observed that the effect size value obtained regarding the relationship between emotion regulation difficulties and depression was similar to the research results (Akcan & Taşören, 2020; Güzel et al., 2021; Keleş-Altun & Atagün, 2019; Wu et al., 2019).

As a result of the literature review, no study findings were found for the purpose of the study. The lack of a study on a similar topic does not allow for a comparison with the generalized effect size value obtained. Within the scope of the current study, it is thought that including not only the findings obtained from a single country but also the findings of studies with different sample characteristics increases the generalizability of the study

findings. The fact that there is no difference between the studies published in English and Turkish, with different sample characteristics and different research fields in terms of language of publication, sample characteristics and field of publication in measuring the effect of emotion dysregulation difficulties on the relationship between emotion dysregulation difficulties and depression shows that there is no difference between the theories discussed in terms of both languages of publication and the countries studied. This finding is thought to be due to the strength of the theories addressing the relationship between emotion regulation difficulties and depression.

The current meta-analysis study has limitations as in all other studies. The first one is the limitations of the meta-analysis method itself. The limitation of the current meta-analysis study is that correlational studies examining the relationship between variables were considered. In addition, only the studies that were accessible and within the scope of the study were evaluated in the study. Due to the different publication and acceptance dates of articles within the scope of the publication policies of peer-reviewed scientific journals, only the studies that were published and open to the access of readers were accessed and evaluated within the scope of the study. Although keywords were determined for the studies accessed with the help of scientific search engines and databases, the fact that the studies that could not be accessed could not be included in the current meta-analysis study is seen as another limitation of the study. When the literature review process within the scope of the current study was evaluated, it was seen that there was inadequate reporting practice regarding the studies. As a matter of fact, one of the most important limitations of the study is that 2510 of the 4582 studies accessed in scientific databases could not be included in the analysis due to lack of information. Of the remaining 2072 studies, 1744 were excluded from the analysis due to missing data and other reasons, and a total of 328 studies were screened and only 37 of them were included in the analysis. Another limitation is the use of analog ANOVA analysis, which is sensitive to different variables in subgroup analyses. The current study is also limited to the analysis of coded moderator variables. It is thought that the low numbers in some subgroups in the moderator analysis may have affected the results.

In meta-analysis studies, the problem of "publication bias" is encountered as a result of overestimating the actual population effects (Crocker & Algina, 1986; Pedhazur & Schmelkin, 1991; Thompson, 2003). The findings obtained as a result of the analyzes conducted within the scope of the current study revealed that there was no difference according to the language of publication, field of study and sample characteristics. For this reason, it is recommended that researchers should consider the variables considered in the study while interpreting the relationship between depression and emotion regulation difficulties and, if necessary, interpret the results of the analysis by controlling the variables that may cause possible differences.

Although the analysis of the current study with R and JAMOVI programs is considered as a limitation by some researchers, this is not considered as a limitation within the scope of the study due to the increasing use of open source and free programs instead of paid and closed-coded programs such as CMA in recent years and the findings obtained can be supported with richer materials. As a matter of fact, the results of p-uniform analysis and p-curve publication bias analysis performed within the scope of the study are considered as one of the superior aspects of the study.

The current study was conducted to determine the relationship between emotion dysregulation and depression, which is frequently used in the literature, and the generalised effect size value was 0.52. It is thought that this finding will guide future studies. Since psychopathologies are multi-structured and generally effective on emotions, determining the effect size between the two variables will be useful for the evaluation of psychopathologies. In addition, it will provide predictions for multifactor analyses such as structural equation modeling, which has been done frequently recently. The findings of the present study suggest that individuals with emotion regulation difficulties that may increase the risk of depression should be monitored and supported especially closely. In addition, it is an important point that emotion regulation difficulties should be addressed in depression treatments. Therefore, these findings are of great importance for the development of prevention and intervention strategies. Training programmes to improve emotion regulation skills, especially for young people and groups at risk, should also be expanded. These programmes offered in schools, workplaces and community centres can raise awareness about emotional resilience and emotion regulation from a young age.

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Conflicts of Interest: The authors declare that they have no conflict of interest.

Data Availability: Data is available upon request from the corresponding author.

Ethical Disclosure: Due to the utilization of secondary data for the meta-analysis in this study, ethical approval was not required.

References

- Akcan, G. & Taşören, A. B. (2020). Genç yetişkinlerde çocukluk çağı olumsuz yaşantıları, öz-şefkat ve duygu düzenleme becerileri depresyon belirtilerini yordar mı?. *Boğaziçi Üniversitesi Eğitim Dergisi*, 37 (2), 59-80. <https://dergipark.org.tr/tr/pub/buje/issue/58375/842241>.
- Aldao, A., Nolen-Hoeksema, S., & Schweizer, S. (2010). Emotion-regulation strategies across psychopathology: a meta-analytic review. *Journal of Clinical Psychology. Rev.* 30, 217–237. <https://doi.org/10.1016/j.cpr.2009.11.004>.
- Aldao, A., & Nolen-Hoeksema, S. (2010). Specificity of cognitive emotion regulation strategies: a transdiagnostic examination. *Behaviour Research And Therapy*, 48 (10), 974–983. <https://doi.org/10.1016/j.brat.2010.06.002>
- Alpay, E., H., Aydın, A., & Bellur, Z. (2017). The mediating role of the emotion regulation difficulties on the relationship between childhood traumas, post traumatic stress symptoms and depression. *Journal of Clinical Psychology*; 20 (3): 218-226. <https://doi.org/10.5505/kpd.2017.98852>
- Arditte, K. A. & Joormann, J. (2011). Emotion regulation in depression: Reflection predicts recovery from a major depressive episode. *Cognitive Therapy And Research*, 35 (6), 536-543. <https://doi.org/10.1007/s10608-011-9389-4>
- Ata, G. & Yalçınkaya Alkar, Ö. (2020). Kişilerarası duygu düzenleme anketi: Birlikte kara kara düşünme ve birlikte yeniden değerlendirme'nin türkçeye uyarlanması. *Klinik Psikoloji Dergisi*, 4 (2), 136-150. <https://doi.org/10.5455/kpd.26024438m000027>
- Ay, R. & Kılınçel, O. (2021). Depresyon tanısı alan hastalarda çocukluk çağı travması varlığı ve duygu düzenleme güçlüğü ile ilişkisi. *Düzce Üniversitesi Sağlık Bilimleri Enstitüsü Dergisi*, 11 (1) , 67-75 . <https://doi.org/10.33631/duzcesbed.819460>
- Berking, M., & Wupperman, P. (2012). Emotion regulation and mental health: recent findings, current challenges, and future directions. *Current opinion in psychiatry*, 25(2), 128–134. <https://doi.org/10.1097/YCO.0b013e3283503669>
- Bridges, L. J., Margie, N. G., & Zaff, J. F. (2001). *Background for community-level work on emotional well-being in adolescence: Reviewing the literature on contributing Factors*. Washington, Dc: Child Trends. <https://doi.org/10.1037/e316632004-001>
- Bylsma Lm, Morris Bh, & Rottenberg J. (2008). A meta-analysis of emotional reactivity in major depressive disorder. *Clinical Psychology Review*;28:676-691. doi: 10.1016/j.cpr.2007.10.001.
- Cheung, R. Y., Bhowmik, M. K., & Hue, M. T. (2020). Why does acculturative stress elevate depressive symptoms? A longitudinal study with emotion regulation as a mediator. *Journal of Counseling Psychology*, 67(5), 645. <https://doi.org/10.1037/cou0000412>
- Crow, T., Cross, D., Powers, A., & Bradley, B. (2014). Emotion dysregulation as a mediator between childhood emotional abuse and current depression in a low-income African-American sample. *Child abuse & neglect*, 38(10), 1590–1598. <https://doi.org/10.1016/j.chiabu.2014.05.015>
- Dahl, R. E. (2001). Affect regulation, brain development, and behavioral/emotional health in adolescence. *Cns Spectrums*, 6(1), 60-72. <https://doi.org/10.1017/s1092852900022884>.
- Düsing, R., Radtke, E. L., Kuhl, J., Konrad, C., Vandekerckhove, M., & Quirin, M. (2021). Emotion regulation ability compensates for the depression-related negativity bias. *Acta psychologica*, 220, 103414. <https://doi.org/10.1016/j.actpsy.2021.103414>
- Ehring, T., Fischer, S., Schnülle, J., Bösterling, A., & Tuschen-Caffier, B. (2008). Characteristics of emotion regulation in recovered depressed versus never depressed individuals. *Personality and individual differences*, 44, 1574-1584. <https://doi.org/10.1016/j.paid.2008.01.013>
- Ellis, A.J., Beevers, C.G., & Wells, T.T. (2009). Emotional dysregulation in dysphoria: support for emotion context insensitivity in response to performance based feedback. *Journal of Behavior Therapy and Experimental psychiatry*;40:443-454. <https://doi.org/10.1016/j.jbtep.2009.05.002>.

- Ekinci, İ., & Ekinci, E. (2021). Evaluation of anxiety, depression, difficulty in emotion regulation and sleep quality in healthcare professionals during the Covid-19 pandemic; *Comprehensive Medicine*, 13(2): 61-68. DOI: [10.4274/iksstd.2021.04809](https://doi.org/10.4274/iksstd.2021.04809)
- Erpınar, Z. (2017), *Duygu düzenleme, depresyon ve anksiyete arasındaki ilişkiler: yaş ve cinsiyet farklılıkları*. [Master Dissertation, Haliç University]. CoHE Thesis Center.
- Fredrickson, B. L. (2003). The value of positive emotions: the emerging science of positive psychology is coming to understand why it's good to feel good. *American Scientist*, 91(4), 330-335. <https://www.jstor.org/stable/27858244>
- Fredrickson, B. L., Cohn, M. A., Coffey, K. A., Pek, J., & Finkel, S. M. (2008). Open hearts build lives: positive emotions, induced through loving-kindness meditation, build consequential personal resources. *Journal Of Personality And Social Psychology*, 95(5), 1045-1062. <https://doi.org/10.1037/a0013262>
- Fu, L., Wang, P., Zhao, M., Xie, X., Chen, Y., & Nie, J. (2020). Can emotion regulation difficulty lead to adolescent problematic smartphone use? A moderated mediation model of depression and perceived social support. *Children and Youth Services Review*, 108, 104660. <https://doi.org/10.1016/j.childyouth.2019.104660>
- Garnefski, N., Legerstee, J., Kraaij, V., Van Den Kommer, T., & Teerds, J. A. N. (2002). Cognitive coping strategies and symptoms of depression and anxiety: a comparison between adolescents and adults. *Journal of Adolescence*, 25(6), 603- 611. <https://doi.org/10.1006/jado.2002.0507>.
- Garnefski, N. & Kraaij, V. (2016). Specificity of relations between adolescents' cognitive emotion regulation strategies and symptoms of depression and anxiety, *Cognition and Emotion*, <https://doi.org/10.1080/02699931.2016.1232698>
- Giromini, L., Velotti, P., de Campora, G., Bonalume, L., & Cesare Zavattini, G. (2012). Cultural adaptation of the difficulties in emotion regulation scale: Reliability and validity of an Italian version. *Journal of clinical psychology*, 68(9), 989-1007. <https://doi.org/10.1002/jclp.21876>.
- Gratz, K. L., & Roemer, L. (2004). Multidimensional assessment of emotion regulation and dysregulation: Development, factor structure, and initial validation of the difficulties in emotion regulation scale. *Journal of Psychopathology and Behavioral Assessment*, 26(1), 41–54. <https://doi.org/10.1023/B:JOBA.0000007455.08539.94>
- Gross, J. J. (1998). The emerging field of emotion regulation: an integrative review. *Review of general psychology*, 2, 271–299. <https://doi.org/10.1037/1089-2680.2.3.271>
- Gross, J. J., & Thompson, R. A. (2007). *Emotion regulation: conceptual foundations*. In j. J. Gross (ed.), handbook of emotion regulation (Pp. 3e24). New York: Guilford Press. <http://dx.doi.org/10.1080/00140130600971135>.
- Gross, J. J. (2008). Emotion and emotion regulation: personality processes and individual differences. In o. P. John, r. W. Robins, & l. A. Pervin (eds.), *Handbook Of Personality: Theory And Research* (Pp. 701–724). The Guilford Press.
- Gross, J. J. (2013). Emotion regulation: Taking stock and moving forward. *Emotion*, 13(3), 359–365. <https://doi.org/10.1037/a0032135>
- Güzel, H. Ş., Akkaya, G. & Altuntaş, M. (2021). Özgül öğrenme bozukluğu tanısı olan çocukların depresif belirtileri ve benlik algıları arasındaki ilişkinin incelenmesi: Duygu düzenleme güçlüğünün aracı rolü. *Klinik Psikiyatri Dergisi*, 24(2), 228-238. <https://doi.org/10.5505/kpd.2020.24008>
- Ha, J. H., & Jue, J. (2018). The mediating effect of emotion inhibition and emotion regulation between adolescents' perceived parental psychological control and depression. *SAGE Open*, 8(3). <https://doi.org/10.1177/2158244018793680>
- Haselgruber, A., Sölva, K., & Lueger-Schuster, B. (2020). Perspective matters: Differences between child- and caregiver-reports of emotion regulation mediating the relationship between cumulative childhood trauma and mental health problems in foster children. *Child abuse & neglect*, 107, 104558. <https://doi.org/10.1016/j.chiabu.2020.104558>
- Hu, T., Zhang, D., Wang, J., Mistry, R., Ran, G., & Wang, X. (2014). Relation between emotion regulation and mental health: a meta-analysis review. *Psychological Reports*, 114(2), 341–362. <https://doi.org/10.2466/03.20.PR0.114k22w4>.
- İşğören, G. (2018). *Genç erişkinlerde bilişsel duygu düzenlemenin mükemmelliyetçilik ve depresyon*

- ilişkisindeki rolü.* [Master Dissertation, Işık University]. CoHE Thesis Center.
- Joormann, J., & Gotlib, I. H. (2010). Emotion regulation in depression: Relation to cognitive inhibition. *Cognition & Emotion*, 24(2), 281–298. <https://doi.org/10.1080/02699930903407948>
- Joorman, J., & Siemer M (2014). *Emotion regulation in mood disorders*. In j. J. Gross, Handbook of Emotion Regulation (2nd Ed.). Guilford Press, New York, London.
- Joormann, J., & Stanton, C. H. (2016). Examining emotion regulation in depression: a review and future directions. *Behaviour research and therapy*, 86, 35–49. <https://doi.org/10.1016/j.brat.2016.07.007>
- Just, N., & Alloy, L. B. (1997). The response styles theory of depression: Tests and an extension of the theory. *Journal of Abnormal Psychology*, 106(2), 221–229. <https://doi.org/10.1037/0021-843x.106.2.221>
- Kavurma, M. (2014). *Büyük depresyon, yaygın endişe ve panik krizindeki duygu gidişatımızın etkisindeki gelişmeler.* [Master Dissertation, Dokuz Eylül University]. CoHE Thesis Center.
- Kayar, A. (2021). *Üniversite öğrencilerinde çocukluk çağı travmasının depresif belirtiler ve kendine zarar verme davranışı ile ilişkisinde öz eleştirinin ve duygu düzenleme güçlüğüünün aracı rolünün incelenmesi.* [Master Dissertation, Hacettepe University]. CoHE Thesis Center.
- Keleş Altun, İ., & Atagün, M. İ.(2019). Sınır kişilik bozukluğunda benlik saygısı, duygu düzenleme güçlüğü ve duygulanım ilişkisi. *Anadolu Psikiyatri Dergisi*, 20(5):506-514. <https://doi.org/10.5455/apd.26250>
- Kraft, L., Ebner, C., Leo, K., & Lindenberg, K. (2023). Emotion regulation strategies and symptoms of depression, anxiety, aggression, and addiction in children and adolescents: A meta-analysis and systematic review. *Clinical Psychology: Science and Practice*. Advance online publication. <https://doi.org/10.1037/cps0000156>
- Kring, A. M., & Werner, K. H. (2004). *Emotion regulation and psychopathology*. in p. philippot, & r. s. feldman (eds.), the regulation of emotion (1st ed.), (pp. 359- 385). Mahwah, Nj: Lawrence Erlbaum Associates, Inc.
- Kring, A. M., & Sloan, D. S. (2010). *Emotion regulation and psychopathology*. New York: Guilford Press.
- Kullik, A., & Petermann, F. (2013). Attachment to parents and peers as a risk factor for adolescent depressive disorders: the mediating role of emotion regulation. *Child psychiatry and human development*, 44(4), 537–548. <https://doi.org/10.1007/s10578-012-0347-5>
- Leblebicioğlu, M. (2018). *Algılanan stres, bilişsel duygu düzenleme stratejileri ve yeme tutumları arasındaki ilişkinin incelenmesi.* [Master Dissertation, Maltepe University]. CoHE Thesis Center.
- Marganska, A., Gallagher, M., & Miranda, R. (2013). Adult attachment, emotion dysregulation, and symptoms of depression and generalized anxiety disorder. *The American journal of orthopsychiatry*, 83(1), 131–141. <https://doi.org/10.1111/ajop.12001>
- Martin, R. C., & Dahlen, E. R. (2005). Cognitive emotion regulation in the prediction of depression, anxiety, stress, and anger. *Personality and Individual Differences*, 39, 1249–1260. <https://doi.org/10.1016/j.paid.2005.06.004>
- Masters, M. R., Zimmer-Gembeck, M. J., & Farrell, L. J. (2019). Transactional associations between adolescents' emotion dysregulation and symptoms of social anxiety and depression: a longitudinal study. *The Journal of Early Adolescence*, 39(8), 1085–1109. <https://doi.org/10.1177/0272431618806053>
- Matsumoto, D. (2006). Are cultural differences in emotion regulation mediated by personality traits?, *Journal of Cross-Cultural Psychology*, 37 (4), 421 - 437 . <https://doi.org/10.1177/0022022106288478>
- Michopoulos, V., Powers, A., Moore, C., Villarreal, S., Ressler, K. J., & Bradley, B. (2015). The mediating role of emotion dysregulation and depression on the relationship between childhood trauma exposure and emotional eating. *Appetite*, 91, 129–136. <https://doi.org/10.1016/j.appet.2015.03.036>
- Min, J. A., Yu, J. J., Lee, C. U. & Chae, J. H. (2013). Cognitive emotion regulation strategies contributing to resilience in patients with depression and/or anxiety disorders. *Comprehensive Psychiatry*, 54(8), 1190–1197. <https://doi.org/10.1016/J.Comppsy.2013.05.008>
- Monopoli, W. J., Evans, S. W., Benson, K., Allan, N. P., Owens, J. S., DuPaul, G. J., & Bunford, N. (2020). Assessment of a conceptually informed measure of emotion dysregulation: Evidence of construct validity vis a vis impulsivity and internalizing symptoms in adolescents with ADHD. *International journal of methods in psychiatric research*, 29(4), 1–14. <https://doi.org/10.1002/mpr.1826>
- Nolen-Hoeksema, S., & Aldao, A. (2011). Gender and age differences in emotion regulation strategies and their relationship to depressive symptoms. *Personality and Individual Differences*, 51(6), 704–708.

<https://doi.org/10.1016/j.paid.2011.06.012>

- Oymak Yenilmez, D., Atagün, M. İ., Keleş Altun, İ., Tunç, S., Uzgel, M., Altınbaş, K., & Oral, E. T. (2019). Bipolar bozukluk ve yineleyici depresif bozuklukta çocukluk çağı travmaları ve duygu düzenleme güçlükleri ile bilişsel süreçler arasındaki ilişki. *Türk Psikiyatri Dergisi*, 32(1), 8-16.. <https://www.doi.org/10.5080/u23415>
- Ötünçtemur, A., & Çam Kahraman, F. (2020). Bilişsel duygu düzenleme stratejileri ile depresyon ve psikolojik yardım almaya ilişkin tutumlar arasındaki ilişkilerin incelenmesi. *İstanbul Kent Üniversitesi İnsan ve Toplum Bilimleri Dergisi*, 1 (2), 50-74. <https://dergipark.org.tr/tr/pub/itbfkent/issue/56863/789750>
- Öztürk, M. O., & Uluşahin, A. (2014). *Ruh Sağlığı ve Bozuklukları I*. (12. Baskı). Ankara: Bayt Ltd. Şti.
- Pektaş, E. (2015). *Üniversite öğrencilerinin algıladıkları ebeveyn kabul-reddi ile depresyon ve sürekli kaygı düzeyleri arasındaki ilişkinin incelenmesi: Duygu düzenleme güçlüklerinin aracı rolü*. [Master Dissertation, Hacettepe University]. CoHE Thesis Center. .
- Rottenberg, J., Gross, J. J., & Gotlib, I. H. (2005). Emotion context insensitivity in 509ajör depressive disorder. *Journal of abnormal psychology*, 114(4), 627–639. <https://doi.org/10.1037/0021-843X.114.4.627>.
- Türkçapar, M. H. (2019). *Fark Et, Düşün, Hisset, Yaşa*. 1. Baskı. İstanbul: Epsilon Yayınevi.
- Sağlam, F., Aslan, E., & Hurşitoğlu, O. (2020). BD patients and there is a positive correlation between difficulty in emotion regulation and impairment in functioning in depressive episodes, *Anatolian Journal of Psychiatry*, 21(1):30-36. <https://doi.org/10.5455/apd.36087>
- Schwartz , S. H., & Bardi , A. (2001). Value hierarchies across cultures taking a similarities perspective . *Journal of Cross-Cultural Psychology*, 32(3) , 268 – 290. <https://doi.org/10.1177/0022022101032003002>
- Stikkelbroek, Y., Boddien, D., Kleinjan, M., Reijnders, M., & Van Baar, A. L. (2018). Correction: Adolescent depression and negative life Events, the mediating role of cognitive emotion regulation. *PLOS ONE*, 13(1), e0192300. <https://doi.org/10.1371/journal.pone.0192300>
- Sullivan, M., Bishop, S. M., & Pivik, J. (1995). The Pain Catastrophizing Scale: Development and validation. *Psychological Assessment*, 7(4), 524–532. <https://doi.org/10.1037/1040-3590.7.4.524>
- Şenel, A. F. & Çakmak Tolun, Ö. (2022). Ergenlerde internet bağımlılığının algılanan ebeveyn kabul/ reddi, duygu düzenleme ve psikolojik belirtiler bağlamında incelenmesi, *International Journal of Eurasia Social Sciences (IJOESS)*, 13(47), 1-22. DOI: <http://dx.doi.org/10.35826/ijoess.3062>
- Watkins, E., & Teasdale, J. D. (2001). Rumination and overgeneral memory in depression: effects of self-focus and analytic thinking. *Journal Of Abnormal Psychology*, 110(2), 353-357. DOI: [10.1037/0021-843x.110.2.333](https://doi.org/10.1037/0021-843x.110.2.333)
- Wolf, J., Danno, D., Takeshima, T., Vancleef, L., Yoshikawa, H., Gaul, C. (2019). The relation between emotion regulation and migraine: A cross-cultural study on the moderating effect of culture. *Cephalalgia*. 40. <https://doi.org/10.1177/0333102419885394>.
- Wu, H., Tang, P., Huang, X., Hu, X., & Luo, Y. (2013). Differentiating electrophysiological response to decrease and increase negative emotion regulation. *Chinese Sci. Bullet.* 58, 1543–1550. <https://doi.org/10.1007/s11434-013-5746-x>
- Yıldız, F. (2018). *Ergenlerde bilişsel esneklik ile psikolojik belirtiler arasındaki ilişkide duygu düzenleme güçlüğü'nün aracı rolünün incelenmesi*. [Master Dissertation, Mersin University]. CoHE Thesis Center.
- Yumuşak, F. N. (2019). *Üniversite öğrencilerinde duygu düzenleme güçlüğü ve duygusal tepkiselliğin psikolojik belirtiler ile ilişkisinin incelenmesi*. [Master Dissertation, Fatih Sultan Mehmet University]. CoHE Thesis Center.



Cognitive Behavioral Therapy In Posttraumatic Stress Disorder and Social Anxiety Disorder: A Case Report

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ABSTRACT

Domestic violence is common in Turkey and can lead to the development of post-traumatic stress disorder (PTSD). Cognitive behavioral therapy (CBT) is an effective approach for treating posttraumatic stress disorder (PTSD). It has been found that there are various reasons for the development of social anxiety disorder. Therefore, it can be evaluated by considering details such as life history, personal characteristics, the environment in which anxiety is experienced, and a lack of skills. CBT has also been found to be an effective method of reducing social anxiety. In this study, a 16-year-old patient who developed PTSD after witnessing long-term violence against her mother and recovered as a result of CBT is presented. In addition to PTSD symptoms, the patient reported that she felt significant anxiety and fear in many social situations where she could be evaluated by people, and that she engaged in safety and avoidance behaviors. CBT was administered for these complaints, and her symptoms improved significantly.

Introduction

Domestic violence is commonly considered an aggressive and coercive behavior that can cause emotional and psychological disorders, sexual coercion, physical injuries, and financial losses (Raja et al., 2017). Research has shown that most women are victims of physical and sexual violence from their partners or intimate partners, and this rate is increasing daily. According to the 2015 data, 36% of women have been subjected to physical violence, whereas 12% have been subjected to sexual violence (Hünee, 2015). Domestic violence can have negative long- and short-term consequences for witnesses and victims. Empirical evidence suggests that children growing up in violent domestic environments have cumulative effects that can be carried into adulthood and jeopardize their personal abilities and developmental progress (Yanık & Çiçek, 2022). Moreover, studies have shown that children who witness or directly experience domestic violence experience PTSD symptoms (Graham-Bermann & Levendosky, 1998; Lehmann, 1997; Levendosky et al., 2002). In other words, these children are at risk of developing PTSD. Post-traumatic stress disorder (PTSD) is defined as, a condition that manifests with specific symptoms that occur after severe traumatic events, such as an event that threatens physical integrity, death or threat of death, serious injury, or witnessing such a situation (Özgen & Aydın, 1999). The symptoms of PTSD can be listed as follows: recurrent, involuntary distressing memories and dreams; dissociation reactions, in which events are felt or acted as if they were happening again; experiencing psychological distress for a long time in case of encountering an internal or external stimulus that symbolizes the traumatic event; reacting to or avoiding stimuli; inability to remember some of the traumatic

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events; having persistent and exaggerated negative beliefs or expectations about oneself, others, or the world; persistence of negative emotional state; failure to experience consistently positive emotions; significant decrease in interest or participation in important activities; feelings of detachment or alienation from others; expression of verbal or non-verbal aggressive behavior towards others and objects; failure to exercise self-restraint and engaging in harmful behavior; startle response; the state of being on guard at all times; difficulty focusing; and sleep disorder (Köroğlu, 2013).

The DSM-5 defines social anxiety disorder as significant anxiety and fear while performing one or more social actions in environments where people are likely to be evaluated (DSM-5, 2013). Individuals with high levels of social anxiety may feel humiliation, inadequacy, and disappointment with the thought that they are negatively evaluated and judged by others, and may think that they are disgraced by magnifying their smallest mistakes (Mercan & Yavuzer, 2007). Moreover, in social settings, they may blush, tremble, have difficulty breathing, and engage in various safety-seeking behaviors such as standing in the corner, talking fast, and avoiding eye contact. Individuals in such situations prefer to endure or avoid anxiety and fear. When explaining social anxiety, which has many causes, it is important to look at details such as life history, personal characteristics, the environment in which anxiety is experienced, and lack of skills (Öztürk, 2014).

In this manuscript, we describe a case who experienced symptoms of PTSD after witnessing domestic violence and subsequent low self-confidence and social anxiety. First, traumatic experiences were studied using CBT. CBT was then applied to the social anxiety symptoms. The treatment results are discussed below:

The Case

SK, the first child of a family with two children, was a 16-year-old high school student. Her parents separated 3 years ago due to long-standing severe incompatibility. After separating from her parents, SK lived with her 12-year-old brother, mother, grandmother, and grandfather.

SK was admitted to a psychological counseling center in Istanbul with the help of her mother. It was previously said that SK went to a psychiatrist due to her complaints and was diagnosed with post-traumatic stress disorder and social anxiety. Her complaints were as follows: being startled by loud or sudden noises such as flushing toilets and telephone ringtones, involuntarily withdrawing when someone makes a sudden movement, displaying aggressive behaviors with feelings of anger, inability to concentrate and decreased success in classes, loss of interest in social activities and hobbies, lack of sleep patterns, she complained of having nightmares, not going to shopping malls, restaurants, cafes, and markets alone to avoid contact with strangers, not taking public transportation such as minibuses alone, and only being able to pay the bill or fare through her close friend or mother. SK reported that her complaints started with the separation of her parents and have increased recently. As a recent change in her life, it has been observed that SK's grandmother and grandfather have started controlling. They approved of her being calm, quiet, and at home. For this reason, her social life was limited and she was asked to go out less.

SK's mother was told that the sessions would continue within the scope of Istanbul Aydın University's clinical practice and supervision course, and the approval was obtained. As a result of the clinical assessment, a diagnosis was made by one of the authors, working as a psychologist under the supervision of supervisors.

History

SK's parents met when she was in high school and married at an early age. Her mother worked as a customer representative and her father worked in transportation. At the time of SK's birth, the family had financial difficulties and lived in the basement of a building in a small neighborhood. SK witnessed her father's physical, sexual, and psychological violence against her mother from childhood through adolescence.

When asked about her preschool period, she reported that she wetted herself until seven age of 7 years. She stated that she loved her father very much as a child, that she wanted to sleep with him because she was afraid of the dark, and that she often went to him, but now she says that she hates her father. She stated that she welcomed the birth of her brother, was happy, and was not an older sister but the mother of her brother. She

takes on most of her responsibilities. She had nail-biting behavior during the preschool period, but she was not in such behavior at the moment.

She began kindergarten at an early age when her mother was working. In primary school, she stated that she had a good relationship with her teachers and that her primary school teacher had a fatherly affection for her.

During secondary school, domestic violence increased, and SK separated from her mother and began living with her aunt. Her focus was on her studies, and she took up hobbies, such as poetry and literature. During this period, her parents divorced. After SK's mother divorced her father, she moved to SK's grandparent's house, taking her children with her. SK does not prefer to communicate with her father unless there are financial demands. Her father moved out of the city and had a relationship with another person. SK is unhappy when she hears that this person is caring for her child.

SK started high school close to home. The beginning of high school coincided with the pandemic, and she reported feeling lonely as online education began. She said that she usually spent the day in her room and had limited communication with other family members. The interviews revealed, that SK had witnessed domestic violence for a long time. However, since the beginning of high school, domestic violence has ceased. As a result of the events experienced, SK's complaints of overreaction to stimuli, alertness, aggression, constant negative emotional state, decreased participation in activities and hobbies, insomnia, and concentration, which met the symptoms of PTSD, increased during this period, and her school success decreased. In addition, the place where children socialize first and most often is the family. When evaluated in this context, domestic violence negatively affected children's sense of self, social skills, and social lives. It has been observed that SK, who did not grow up in a safe family environment, began to experience social anxiety and lack of self-confidence problems that may be caused by PTSD. When discussing friendships in high school, she said that she was worried about humiliation. Therefore, she said that the more corners there were, the better it was. Moreover, she reported that she cared too much about what people said about her, was distrustful of others, and distanced herself. She said that she was not in a social situation because she felt intense anxiety and fear, and that she went with her mother or a close friend when she had to. She also used the phrase "I am nothing without academic success" when discussing her complaints. This shows that she has high and uncertain standards, which can cause intense anxiety.

Clinical Impression and Treatment

At the first meeting, SK and her mother met the clinician together and separately on October 16, 2022. The client's life history was recorded. SK stated that she had not been able to talk about the difficult events she had experienced until now with others, but she wanted to talk, that she would participate in therapy regularly, and that her motivation was high. She stated that her complaints have continued since her parents' separation and are now increasing. In this process, she said that, she ignored her emotional thoughts instead of accepting or trying to understand them. This situation was considered a factor perpetuating the problem. After learning the symptoms and possible diagnosis of SK, the clinician decided to apply CBT. It was agreed to hold a 50-minute online or face-to-face meeting once a week. As the sessions continued, her parents became cooperative and had a positive impact on the process.

In the second meeting, it was decided that SK would be used to diagnose PTSD. SK and her mother were given psychoeducation about PTSD and the cognitive behavioral model. PTSD was understood by the client, and the reactions and consequences of the trauma were discussed. A safe place study was conducted to reduce stress and regulate affect. The client was asked to think of an imaginary or real-life calm and peaceful place where she felt safe. Positive emotions and feelings of comfort were also observed. Additionally, the client was informed that she could perform this exercise when she was lonely or felt distressed.

In the second meeting, she reported that she generally remembered bad memories of the past and described the events that affected her the most in the order of discomfort: SK learned that her mother was held at gunpoint by her father while her family was in the process of divorce and spent that night at the police station; her mother's sexually explicit photos were sent to her relatives by her father, who heard that her mother was forced by her father to have sexual intercourse without her consent, her mother was injured, and her leg bled as a

result of her father's violence; SK received abusive and threatening phone calls from her father when she went out of town with her mother.

In the third meeting, the client stated that she wanted to remove her negative memories. It was discussed that this would not be possible. It was agreed that rather than suppressing the thought, one should allow these thoughts to pass through the mind, like a train passing through the station. Experiment was carried out while reaching agreement. The experiment involved making the person realize what would happen when they were told not to think about the pink rabbit or when the person said this to them. As a result of this experiment, the client determined that she would involuntarily have a pink rabbit in her dreams and thoughts. Thus, the client gained the insight that not talking about the traumatic event created the problems she stated during the application to the clinician. After the experiment, it was agreed that mentally reenacting challenging events would be beneficial. A non-traumatic memory was first selected for her to learn to re-enact. She was told to be comfortable, and that she could close her eyes if she wanted. While describing the event in the present tense language, the patient was asked to describe sensory details, feelings, and thoughts. During the reenactment, the client was supported by asking questions such as, "What is going through your mind? What do you see? How does this feel? Where do you feel this feeling?"

First, during the third meeting, her father detained her mother at the gunpoint, who worked with the reenactment. Upon receiving the news, SK spent the night at the police station and worried that something would happen. On the following day, her father left SK's mother. After this incident, the matter went to court, and her father harassed SK and her mother for a while, but now SK's father does not pose any threat to her mother. After this incident, SK had cognitions such as "I am powerless, I am inadequate, something bad will happen to my mother, and I had to do something". These cognitions continued after the session, and there was no decrease in the discomfort level of the memory.

The client started the fourth meeting by saying that the cognitions of "I am powerless, I am inadequate, something bad will happen to my mother, I had to do something". Work continued by reenacting the moment her father held a gunpoint. SK realized that the most disturbing memory was not her mother's abduction, and changed it to her father's memory, sending sexually explicit photographs of her mother to her mother's relatives. She said that the moment she saw these photos on her aunt's phone was the worst. Cognitions such as "if my mother had told me, I would have prevented it, I should have known, and I should have protected my mother. She felt angry because her mother had not told her about the situation. Alternative thinking was created by asking questions such as "What could be the reasons for her mother not telling her?". CBT was continued. Later, her anxiety and anger that something bad would happen to her mother disappeared, and her negative cognitions were replaced by cognitions such as "I did the best I could, I did my best, I am enough, and I am strong". The positive inner voice took over and said "This is a memory; this is in the past, this is not the same as the past". There was a decrease in the level of discomfort, assessed on a scale of 0 to 10. However, she stated that she was angry because her father had put her mother, brother, or herself.

The fifth meeting continued with the same memory reenactment. After the session, she said that she was very sick this week, and her father worried about her and took her to the hospital. "The events that happened are in the past, if my father had known that we would be so affected, he would not have acted like that," she said. At the end of the session, the discomfort ratings were 0. In addition, she said that events with her parents did not affect her. She said, "This was the worst memory for me, the others no longer affect me" and that her level of discomfort was 0 among the other memories.

At the sixth meeting, SK, who felt uncomfortable talking to her father on the phone or face to face before CBT, said that she no longer felt uncomfortable, and even felt safe. Next, she was given psychoeducation that harmless things became triggers because they were present in the environment during the trauma, and she was consciously exposed to triggers that she had previously avoided, such as the sound of a phone ringing or the sound of a siphon. The triggers did not bother SK, but she reported that she continued to be anxious about many social situations in which she might have been watched by others. She ranked these social situations:

ordering at a restaurant, going to the market alone, using public transportation alone, going to the mall alone, paying bills, and giving money.

Comprehensive psychoeducation was provided at the seventh and eighth meetings in the problem areas. To determine automatic thinking about social threats, questions such as "What is the worst thing that can happen in that situation? What was going through your mind at that moment?" questions were asked. According to CBT, when dysfunctional automatic thoughts change, behaviors and emotions change (Beck, 1995). It was found that SK had automatic thoughts such as "I will be disgraced, she thinks I am disgraced, I did something bad for sure, I will do something wrong for sure." Automatic thoughts can be used to evaluate how individuals perceive and construct their world (Calvete & Connor-Smith, 2005). Thus, they are expected to be negatively evaluated by others. Anticipatory anxiety was studied and evidence was sought by asking "What makes you think this way?" However, no valid evidence has been found. However, various counter-evidences such as "I have overcome many things before and I did it right, I thought I was disgraced, but the other person did not think so." She also became aware that perfectionist expectations of how she would perform, such as "I must speak very well and fluently," reinforced her negative thoughts. Cognitive distortions include unrealistic evaluation and automatic thinking. Psycho-education was provided to participants to realize that high cognitive distortion tendencies cause them to feel inadequate in the face of social situations, thus causing anxiety (Karabacak et al., 2015). In this direction, she was asked to write down her cognitive distortions as homework, and an insight was formed that she frequently used cognitive errors such as all or nothing (I am nothing if there is no academic success, I am a failure), catastrophizing (I definitely did something bad), and mind reading (she thinks I am disgraced).

At the ninth and tenth meeting, 'Intermediate beliefs such as "I will be disgraced if I say the wrong thing while talking to people, I will be disgraced if I give the wrong money while paying the bill, I will be disgraced if I give the wrong money" were identified, and instead of these beliefs, they were asked to produce realistic alternative thoughts by considering the possibilities, such as "Will everyone see it? Will all those who see it think you are disgraced? How much of these thoughts will stay with the other person for a long time?" In return, answers such as "Not everyone will see, there may be some people who think that I am absent-minded or sympathetic, not that I am disgraceful, the thoughts will not stay for a long time, they will forget immediately." SK reported that these questions had a positive effect on reducing their anxiety about giving the wrong money and saying the wrong thing.

SK was asked to maintain a record before, during, and after the social situation, and ruminated for a long time before the event. Instead of solving an active problem, rumination involves repeated passive focus on the symptoms of distress and the possible causes and consequences of these symptoms, causing them to become stuck in their feelings about them (Nolen-Hoeksema et al., 2008). During the tenth meeting, when she was asked to create a list of the advantages and disadvantages of rumination, no advantages were identified. The disadvantages that she worried all day and that this anxiety negatively affected her school and social lives were added to this list. A consensus was reached on keeping a rumination diary and reading a list of the disadvantages of these thoughts came to mind. In addition, attention-focusing training was provided and SK learned to focus her attention in another direction when she noticed rumination. In this way, SK learned to intervene in rumination. Additionally, it has been said that the behaviors we engage in to prevent fear of happening are called safety behaviors. It has been determined that she has security behaviors such as directing attention to her body, wearing too much makeup, rehearsing what she will say in her mind, repeatedly monitoring how she looks, and attending meetings and on the road with her friend or mother. Audio and video recordings of the session were taken with the permission of SK and her mother, and it was ensured that SK, who was uncomfortable with her voice and image, was exposed to it every day for a week and became accustomed to it by exposure.

By the eleventh meeting, it was found that communicating with a stranger caused anxiety in SK, and an experiment was conducted to address this. The experiment consisted of two stages. These phases included two separate interviews with strangers. In social anxiety, attention is given to internal stimuli (Beck, Emery & Greenberg, 2011, as cited in Tezcan et al., 2015) in which, SK is asked to focus her attention on herself, her body, her worries, and how she looks from the outside. They were asked to perform safety behaviors, such as

avoiding eye contact, thinking about what to think about, and responding quickly. Foreigners are expected to act naturally and engage in daily conversation. After the topic was determined, the foreigner was included in the session and the time was set. After the time was over, for the second interview, SK was asked not to perform safety behaviors, let the conversation flow, and focus their attention outward. After this experiment, SK reported that her anxiety disappeared when she focused on conversation and the outside. In previous interviews, it was agreed that safety behaviors provide temporary relief from the feared situation but maintain anxiety and avoidance in the medium and long-term, and awareness was raised about the existence of safety behaviors. Moreover, psychoeducation was given to the effect of paying attention to oneself and the outside world on the level of anxiety, while homework was given to pay attention to the outside world in daily life. Therefore, with pre-experimental preparations, increased skills, and awareness, SK has made rapid progress.

Exposure, one of the frequently used methods among cognitive behavioral therapy techniques, is used in a hierarchical order from least anxiety to most anxiety in order to reduce anxiety in the face of feared problem situations. During the twelfth and thirteenth meetings, she was gradually exposed to her anxieties about ordering in a restaurant, going to the market alone, taking public transportation alone, going to the shopping mall alone, and paying money in the places she went to, in line with the assignments. All anxiety levels gradually decreased and eventually disappeared.

At the fourteenth and fifteenth meetings, her biggest fear of saying the wrong thing and giving money was again emphasized. "What is the worst thing about this? How would people react?" questions were asked. After discussing what might happen, how to deal with it was considered. It has been determined that in such a situation, she can use the expressions "I'm absent-minded and confused, I'm sorry I made a mistake" to others. Thus, it was determined that the anxiety levels decreased. Later, she was expected to do so intentionally. It was observed that she did not encounter any evidence to confirm her worst-case scenario, that she would be humiliated when she gave missing money, and said things that were irrelevant to the topic discussed. It has been realized that people can think differently. When SK gave the wrong money, the cashier said it was normal. SK continued to communicate with people when she told the other party the wrong things unrelated to the subject. When others did not understand her, she stated that they did not understand her and SK had the opportunity to explain herself again.

Discussion

SK reported that her complaints began as a result of the pandemic and the transition to online education; however, this period coincided with the end of domestic violence and the separation of her parents. Early recognition and intervention for PTSD plays an important role in preventing symptoms from becoming chronic (Oflaz et al., 2010). Symptoms of PTSD have been observed in patients exposed to repetitive traumatic life events. Studies investigating the effectiveness of the trauma-focused CBT model in children and adolescents found that the PTSD criteria were not met after treatment (Cohen et al., 2007; Nixon et al., 2012). In addition, it has been observed that CBT, which is a short-term treatment, maintains the results obtained after the end of treatment (Shubina, 2015). Considering this specific case, SK was traumatized due to domestic violence, and the possible diagnosis was PTSD based on the DSM-5 criteria. Studies have also reported that individuals with posttraumatic stress disorder have a high rate of social anxiety disorders (Memiş & Şen, 2015). This situation was considered in this case. Another possible diagnosis was social anxiety disorder based on the DSM-5 criteria.

Social anxiety disorder, which begins in childhood and adolescence, involves individuals remaining silent and in the background of social environments and is defined as calm, timid, and dignified by society and therefore not seen as a problem (Kaval & Sütçü, 2016). The fact that the case was applied for therapy despite being characterized as dignified, timid, and calm by her environment and receiving approval shows that she has a high level of insight. In addition to her insight level, it can be said that her willingness to talk, high motivation, and intellectual level by the cognitive model affected her achievements. Many studies have shown a relationship between automatic thoughts and psychological symptoms (Calvete & Connor-Smith, 2005; Esbjörn et al., 2021), SK applied the techniques she had learned during the sessions, while the psychotherapy

process continued during the period between the two meetings. She recognized and examined her automatic thoughts in terms of functionality, and created alternative thoughts instead of those she deemed inappropriate. This made a significant contribution to the problem areas.

After the safe place study was conducted, the traumatic events that she experienced were studied with reenactment. She was then exposed to psychoeducation in which the sounds of the telephone and toilet became triggers because they were present in the environment during the traumatic event. SK reported no discomfort during the procedure. At the end of the sixth meeting, distressing memories of the incident, avoidance behaviors, aggressive behaviors accompanied by feelings of anger, and blaming thoughts towards herself and her mother disappeared. She established sleep patterns, and her school success increased. The decrease in the level of discomfort towards the events she experienced quickly may be due to the support of her parents. Her father was sorry for what happened and was trying to make up for the past by changing his behavior. In addition, she could easily change her perspective on the events and create alternative thoughts. This shows that she was prone to undergoing CBT. Later, CBT continued to be studied because social anxiety and lack of self-confidence problems continued. In the seventh and eighth meetings, psychoeducation was provided, and expectations of anxiety and perfectionist expectations were discussed. Insight has shown that cognitive distortions can create unrealistic evaluations. In the ninth and tenth meetings, her biggest fear beliefs such as "If I say the wrong thing while talking to people, I will be an embarrassment to everyone, if I give the wrong money while paying the bill, I will be an embarrassment to everyone". The possibilities were evaluated, and alternative ideas were produced. Additionally, psychoeducation on rumination and safety behavior was provided at the tenth meeting. SK was exposed to her own voice and image every day of the week, except for the meeting, to help her get used to her own voice and image. At the eleventh meeting, an experiment was conducted to understand how the level of anxiety changed during communication with a stranger. The clinician asked SK to pay attention to herself and the outside and to use or not use safety behaviors. This experiment was beneficial for SK because she paid attention to the outside world instead of focusing on her body and abandoned her security behaviors. At meetings, the clinician gave SK gradual exposure tasks, such as ordering at a restaurant, going to the market alone, taking public transportation alone, going to the shopping mall alone, and paying money at places she went to. Finally, in the fourteenth and fifteenth meetings, her biggest fear, which was saying the wrong thing in a social environment and giving the wrong money, was emphasized. She was made to deliberately do these things. It was observed that SK did not encounter any evidence that would confirm her worst-case scenario, "I would be disgraced." Fifteen meetings were held in total. Later, she regularly participated in social activities with friends. In addition, it was found that she stopped her security behavior and went to shopping malls, markets, restaurants, and cafés alone, took public transportation, and did not feel uncomfortable while paying bills and fares.

Conclusions and Recommendations

As a result of these meetings, it was determined that the symptoms of PTSD caused by domestic violence and accompanying social anxiety were successfully treated with CBT.

This case study highlights that not only children exposed to domestic violence but also those who witness it are at a risk for PTSD. It is also emphasized that violence experienced in the family environment, where children first and most socialize, may cause them to experience self-confidence and social anxiety problems in the future. In discussing the consequences of witnessing domestic violence, which is common in society, a case study draws attention to an important issue in the literature. Thus, preventive studies on children who witness domestic violence may accelerate. Additionally, there are insufficient case studies in the literature. Therefore, it is thought that this case study will serve as an example in the literature and lead to an increase in case studies on children who witness domestic violence.

Social anxiety disorder, which begins in childhood and adolescence, causes individuals to be defined as calm, timid, and dignified not to be seen as a problem by society (Kaval & Sütçü, 2016), and to receive approval. The case study exemplifies this situation. Therefore, society can be considered a condition that sustains symptoms of social anxiety disorders. To address this issue, parents and teachers require psychoeducation.

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References

- Beck, J. S. (1995). *Cognitive therapy: Basics and beyond*. New York: The Guilford.
- Cohen, J. A., Mannarino, A. P., Perel, J. M., Staron, V. (2007). A pilot randomized controlled trial of combined trauma-focused CBT and sertraline for childhood PTSD symptoms. *Journal of the American Academy of Child & Adolescent Psychiatry*, 46(7), 811-819. doi: 10.1097/chi.0b013e3180547105. PMID: 17581445.
- Esbjörn, B., Falch, A., Walczak, M., Normann, N., & Breinholst, S. (2021). Social anxiety disorder in children: Investigating the relative contribution of automatic thoughts, repetitive negative thinking and metacognitions. *Behavioural and Cognitive Psychotherapy*, 49(2), 159-171. <https://doi.org/10.1017/S1352465820000430>
- Graham-Bermann, S. A., & Levendosky, A. A. (1998). Traumatic stress symptoms in children of battered women. *Journal of interpersonal violence*, 13(1), 111-128. <https://doi.org/10.1177/088626098013001007>
- Hacetepe Üniversitesi Nüfus Etütleri Enstitüsü (HUNEE). (2015). *Türkiye’de Kadına Yönelik Aile İçi Şiddet Araştırması [Research on Domestic Violence Against Women in Turkey]*. Elma Teknik Basım ve Matbaacılık.
- Karabacak, A., Yıldırım, N., Adıgüzel, E., & Ediz, K. (2015). Üniversite öğrencilerinin bilişsel çarpıtma ve sosyal kaygı düzeyleri arasındaki ilişkinin aile ile ilgili değişkenler açısından incelenmesi *[Examining the relationship between university students' cognitive distortion and social anxiety levels in terms of family-related variables]*. *Bayburt Eğitim Fakültesi Dergisi*, 10(2).
- Kaval, N. O., & Sütcü, S. T. (2016). Çocuk ve ergenlerde sosyal anksiyete bozukluğunun tedavisinde bilişsel-davranışçı grup terapisinin etkililiği: Sistematik bir gözden geçirme *[Effectiveness of cognitive-behavioral group therapy in the treatment of social anxiety disorder in children and adolescents: A systematic review]*. *Psikiyatride Güncel Yaklaşımlar*, 8(1), 3-22.
- Köroğlu E. (2013). *DSM-5 Tanı Ölçütleri Başvuru El Kitabı [Desk Reference to the Diagnosis Criteria from Dsm-5]*. Hekimler Yayın Birliği.
- Lehmann, P. (1997). The development of posttraumatic stress disorder (PTSD) in a sample of child witnesses to mother assault. *Journal of family violence*, 12, 241-257.
- Levendosky, A. A., Huth-Bocks, A. C., Semel, M. A., & Shapiro, D. L. (2002). Trauma symptoms in preschool-age children exposed to domestic violence. *Journal of interpersonal Violence*, 17(2), 150-164. <https://doi.org/10.1177/0886260502017002003>

- Memiş, Ç. Ö., & Şen, H. G. (2015). Sosyal anksiyete bozukluğu ve diğer psikiyatrik eş tanılar [*Social anxiety disorder and other psychiatric comorbidities*]. *Türkiye Klinikleri Dergisi*, 8(3), 29-38.
- Mercan, Ç. S., & Yavuzer, H. (2007). Bilişsel davranışçı yaklaşımla bütünleştirilmiş sosyal beceri eğitiminin ergenlerin sosyal kaygı düzeyine etkisi [*The effect of social skills training integrated with cognitive behavioral approach on adolescents' social anxiety level*]. *Elektronik Sosyal Bilimler Dergisi*, 16(63), 1187-1202.
- Nixon, R. D. V., & Sterk, J., Pearce, A. (2012). A randomized trial of cognitive behaviour therapy and cognitive therapy for children with posttraumatic stress disorder following single-incident trauma. *Journal of Abnormal Child Psychology*, 40, 327-337. doi: 10.1007/s10802-011-9566-7. PMID: 21892594.
- Nolen-Hoeksema, S., Wisco, B. E., & Lyubomirsky, S. (2008). Rethinking rumination. *Perspectives on psychological science*, 3(5), 400-424. <https://doi.org/10.1111/j.1745-6924.2008.00088.x>
- Oflaz, F., Özcan, C. T., Taştan, S., Çiçek, H., Aslan, Ö., & Vural, H. (2010). Hemşirelerin travma sonrası stres bozukluğu belirtilerini tanıma durumları [*Nurses' recognition of post-traumatic stress disorder symptoms*]. *Psikiyatri Hemşireliği Dergisi*, 1(1), 1-6.
- Özgen, F. & Aydın, H. (1999). Travma sonrası stres bozukluğu [*Post-traumatic stress disorder*]. *Klinik Psikiyatri*, 1(34-41).
- Öztürk, A. (2014). Sosyal kaygıyı açıklayan yaklaşımlar [*Approaches explaining social anxiety*]. *Elektronik Sosyal Bilimler Dergisi*, 13(48), 15-26.
- Raja, A. J., Alam, I., & Sarir, S. (2017). Domestic violence against women in union council watala, District Bhimber Azad Kashmir. *Peshawar Journal of Psychology and Behavioral Sciences (PJPBS)*, 3(2), 135-143. <https://doi.org/10.32879/pjpbs.2017.3.2.135-143>
- Shubina, I. (2015). Cognitive-behavioral therapy of patients with ptsd: literature review. *Procedia-Social and Behavioral Sciences*, 165, 208-216. <https://doi.org/10.1016/j.sbspro.2014.12.624>
- Tezcan, G. (2015). Çocukluk döneminde sosyal kaygının gelişiminde ebeveyn kabul-red algısı: Otomatik düşüncelerin aracı rolü. (Publication no: 393347) [Master Dissertation, Ankara Sosyal Bilimler University]. CoHE Thesis Center.
- Yanık, D., & Çiçek, E. (2022). Aile içi şiddetin sessiz mağdurları: Çocuklar [*Silent victims of domestic violence: Children*]. *Meyad Akademi*, 3(1), 272-284.



Mindfulness and Satisfaction of Psychological Needs as Predictors of Adolescents' Social Media Disorder

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ABSTRACT

Objectives: In this study, mindfulness (MN) and satisfaction of psychological needs (SPN) were considered as structures that protect adolescents' mental health against social media disorder (SMD). The main purpose of the study was to examine the relationships between MN levels, SPN levels and SMD levels of adolescents and to examine the predictive level of MN and SPN on SMD levels of adolescents. *Methods:* The model was predictive associational survey model. The sample was consisted of 521 adolescents (Mage: 16,02; SD: 1,16; %37 girls, %67 boys) from the central districts of Izmir province in Turkey. Data were collected by Social Media Disorder Scale, Mindful Attention and Awareness Scale – Adolescents, Psychological Need Satisfaction Scale with a questionnaire to gather demographic information. *Results:* Results showed that there were negative correlations between mindfulness levels and SMD levels, between the satisfaction of competence need levels and SMD levels. There were positive correlations between the satisfaction of relatedness need levels and the SMD levels. There was no significant relationship between the satisfaction need for autonomy and social media disorder. Mindfulness, satisfaction of competence need and relatedness need together, predict the social media disorder levels of adolescents significantly and they explain 26,1% of the total variance. *Conclusion:* Mindfulness and competence need satisfaction protect adolescents from social media disorder more than a quarter. However as the need to be related increases, social media disorder increase.

Recently, the use of online information technologies such as social media (Vural & Bat, 2010) has been associated with enjoyment, communicating with family and friends, access to knowledge, increasing social capital and social interaction as positive features (Boyd & Ellison, 2007; Lin et al., 2013; Park & Kim, 2013). Today, adolescents' social culture has evolved into communicating through digital media such as e-mail, social media or messaging (Allen, Ryan, Gray, McInerney, & Waters, 2014; Griffiths, 2010). Most adolescents spend an average of two hours a day on social media (Dawley, 2009). Words such as like, retweet, trend topic, spam, mention, add to story, which are frequently used on social media platforms, have become part of adolescents' daily language (Eraslan, 2018). In time, the overuse of social media and especially the potential of users to become "addicted" have emerged (Andreassen, 2015; Kuss et al., 2014). The definition of social media addiction has two meanings. One is meeting the diagnostic criteria for internet addiction, and the other is mainly using the social features of the internet such as chat rooms, internet forums and instant messaging (Qian et al., 2006). Many studies with children and adolescents reveal that mindfulness has a high correlation with

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well-being and life satisfaction (Brown, West, Loverich, & Biegel, 2011; İkiç & Uygur, 2019) and a low correlation with psychological problems such as depressive mood, anger and addiction (Black, Sussman, Johnson, & Milam, 2012; Brown et al., 2011; Calvete, Sampedro, & Orue, 2014).

Through social media adolescents engage in a variety of social activities, such as self-disclosure and interaction with others. These social activities greatly improve the efficiency of social relationship management and satisfy people's psychological needs (Feng et al., 2017). According to the self-determination theory (Ryan & Deci, 2000); there are 3 basic needs of the individual: perception of autonomy, relatedness and sense of competence. According to self-determination theory, psychological development, psychological integrity and psychological well-being of the individual are possible by meeting these needs (Reis, Sheldon, Gable, Roscoe, & Ryan, 2000). In addition, individuals can develop and express their true selves when they are in environments where they can fulfil these three psychological needs (Deci & Ryan, 2000).

Since adolescence is the most important period of life for social media addiction tendencies (Asıcı, 2019; Kuss & Griffiths, 2012; Kuss et al., 2014), the role of adolescents' mindfulness levels and psychological needs in predicting their social media disorder levels is important. This study aims to determine whether adolescents' social media disorder levels are predicted by adolescents' mindfulness and psychological needs satisfaction.

Addiction Symptoms and Social Media Disorder in Adolescence

The concept of internet addiction is multidimensional in nature (Caplan, 2010) and refers to different forms of compulsive online behavior. Individuals do not appear to be addicted to the Internet itself, but to specific online activities (Griffiths & Szabo, 2014). Some online activities cause more compulsive use than others, and social media use is one of them (Asıcı, 2019). Although an “addiction” related to the social media use or that it is a disorder are not diagnosed in DSM-V, the addiction related to the social media is considered as a behavioral addiction type in the literature (Eryılmaz & Deniz, 2019; Griffiths & Szabo, 2014).

To characterize individuals as social media addicts, the literature evaluates the individuals in terms of being mentally and constantly busy with social media use, thinking about nothing but the time an individual can use social media, not satisfying the desire to spend time, feeling bad when not using it, not having positive results for the effort of using it less, an occupied mind, tolerance, withdrawal and continuity (Satici, 2019; Van den Eijnden et al., 2016). Besides, when channeling their ideas towards activities related to the internet due to the desire of social media use is considered, it is seen that individuals neglect other vital activities and real social activities (Andreassen, 2015; Barry et al., 2017; Weinstein et al., 2021). It compels attention that this situation causes interpersonal problems with significant others in the lives of the individuals who use social media and even cause arguments with family members; that the individuals make deceptive statements about the duration spent on the social media; and that they use the social media as a method to escape from their negative emotions (Oberst et al., 2017; Subrahmanyam & Greenfield, 2008). It is stated that individuals with social media disorder have several different behavioral addiction symptoms such as displacement, facing some problems, lying, escape behavior and conflicting (Asıcı, 2019; Satici, 2019; Savi- Çakar, 2018, Van den Eijnden et al., 2016).

Xu and Tan (2012) suggested that when the social networks are considered by an individual as a solution mechanism to ease stress, loneliness or depression, the transition from a normal to a problematic social network use occurs. They also stated that the ones who are frequently present on the social networks are not good at socializing in real life. For these individuals, being on the social media, using it constantly and sophisticatedly can be supportive to their self-efficacy perceptions and can provide with almost a reward by making them content with the process. The more an individual obtains this reward, the more he/she uses the social networks; after that, this overuse starts to pose a problem. This situation causes these individuals to increase social media use as a way of easing their dysphoric psychological states after a while. As a result, when social network users repeat this cyclical model in order to ease their undesired psychological states through social media use, their level of psychological addiction to social networks increase (Griffiths et al., 2014).

Although each individual who has internet access has the potential risk to develop addiction regardless of age, gender or social status (Kuss et al., 2014), especially the individuals who are at a young age have a higher risk of developing addiction (Andreassen, 2015; Asıcı, 2019; Kuss & Griffiths, 2012; Kuss et al., 2014; Satici, 2019; Van Deursen et al., 2015). Passing towards adolescents is a process in which individuals experience different social, emotional, biological and cognitive changes and developments after childhood. An adolescent

individual who is in a process of change searches about issues related to what kind of a career path he/she will choose related to his/her character and what kind of a life he/she desires (İkiz & Savi-Çakar, 2010). In this process, along with experiencing distrust, individuals may feel desperate, may be hopeless about the future and even may feel alone in what they live and think (İkiz, 2020; Ünalın et al., 2007). Therefore, the risk of developing addictions such as social media addiction is high during adolescence.

Importance of Needs And Mindfulness on Social Media Use in Adolescence

When the recent literature is scrutinized, it is seen that self-determination theory dwells upon increasing the functionality and well-being of individuals, and many studies have been carried out both in our country and in the world (Vansteenkiste & Ryan, 2013). According to self-determination theory (Ryan & Deci, 2000), individuals have three basic needs which are the perception of (a) autonomy, (b) competence and (c) relatedness. When the theory is examined, the psychological development, psychological integrity and psychological well-being of individuals can be achieved by satisfying these needs (Reis et al., 2000). Also, individuals can develop and express their real self-concepts in the environments where they can satisfy these three psychological needs (Deci & Ryan, 2000). At this point, the question of how much satisfaction can be achieved for these psychological needs for the adolescents in the virtual world becomes a current issue.

The term autopilot implies that the individual is not aware of his/her own emotional perception at the time he/she is in or that the individual acts without a conscious purpose and has a blurred perception of now (Kınay, 2013). However, instead of driving on autopilot, creativity increases, stress decreases and performance increases when attention is paid to the present moment (Langer, 2009). This situation reveals the importance of the concept of mindfulness, which has been emphasized in recent years. Due to its nature which stems from the meditation studies in Eastern culture, mindfulness is that the individual connects with the experienced moment by directing his/her attention and conscious in a deep, acquiescent and non-judgmental way towards the experiences lived in the moment which can be understood completely solely by experiencing it (Brown & Ryan, 2003; Chambers et al., 2009; İkiz & Uygur, 2019; Kabat-Zinn, 2003) so that, mindfulness can be conceptualized as a characterization as well (Garland, 2013).

Several studies carried out with children and adolescents reveal that the correlation between mindfulness and wellbeing as well as life satisfaction is high (Brown, West, Loverich, & Biegel, 2011; İkiz & Uygur, 2019) and that the correlation between mindfulness and psychological problems such as depressive emotional state, anger and addiction is low (Black, Sussman, Johnson & Milam, 2012; Brown et al., 2011; Calvete, Sampedro, & Orue, 2014). Also, it is reported that mindfulness in adolescents is negatively correlated on a high level with individual's having problem in controlling their behavior (Güldal, 2019). Hereunder, such a correlation may be present between mindfulness and social media addiction.

The Present Study

The process of satisfying aforementioned psychological needs does not proceed for each individual; consequently, some individuals may experience having difficulty. Especially during adolescence, individuals may sometimes experience stress, feel a deep anxiety as a result of their evaluations and even sometimes think that they are desperate within the situation they are in which can consequently result in getting angry with other people. In this case, an individual may choose to relax and regulate his/her emotions through social media use. Individuals with high level of mindfulness have better interpersonal skills since they tend to express themselves more frequently and live less social anxiety (Dekeyser et al., 2008). According to these results, it was thought that individuals with a higher level of mindfulness may use online social interactions more purposefully and in a controlled manner or choose to use it less.

When it was searched for social media disorder, we found many studies on social media addiction or internet addiction, as addiction is a kind of disorder. Social Media Disorder Scale is used in this study and it searches this unhealthy phenomena by each item covers one of the addiction diagnosis criteria. So it was concluded that social media addiction is accepted as a social media disorder; disorders and addictions both have a base of satisfying needs. In this study, social media addiction literature was also used while making quotations and references about social media disorder.

The main purpose of the study was to examine the relationships between mindfulness levels (MN), satisfaction of psychological needs levels (SPN) and social media disorder levels (SMD) of adolescents and to examine the predictive level of MN and SPN on SMD levels of adolescents. The present study will hopefully make a unique contribution to understand the social media use of adolescents and reflect the importance of mindfulness and satisfaction of psychological needs on social media disorder of adolescence. Moreover, it is thought that it will help determine and realize the psychological needs of adolescents as well as provide awareness about the relationship between social media use and psychological need satisfaction. In the light of this, the answers of the questions below will be sought.

1. What are the relationships between mindfulness levels, satisfaction of psychological needs levels and social media disorder levels of adolescents?
2. Do the mindfulness levels of adolescents predict the social media disorder levels of adolescents significantly?
3. Do the psychological need satisfaction levels of adolescents predict the social media disorder levels of adolescents significantly?

Materials and Methods

In the current study, the aim is to research the role of mindfulness levels and psychological needs of adolescents on predicting the social media disorder levels of adolescents. With this aim, stepwise regression analysis was used. For the implementation of the research, the ethics committee approval was obtained from Dokuz Eylul University Institute of Educational Sciences Ethics Committee with the decision numbered 12018877-604.01.02- E.23583534.

Participants and Procedure

The sample of the study consists of the 9th, 10th, 11th 12th grade state high school students which are located in central districts of İzmir province. When the sample group was formed, multi-stage sampling model was used. The state schools in the central districts of İzmir province were clustered into three as “Vocational and Technical Anatolian High Schools”, “Religious Vocational High Schools” and “Anatolian and Science High Schools”. Then, the percentage of high school types in the population were calculated, and these percentages were considered when the sample group was formed. It was determined that 201 students from Vocational and Technical Anatolian Schools, 30 students from Religious Vocational High Schools and 169 students from Anatolian and Science High Schools were needed to represent the sample. It was planned that the scales will be given to the 9th, 10th, 11th and 12th grade students for each school. The sample consist of 521 adolescents, 187 female and 322 male and 12 participants did not specify their biological gender (M_{age} : 16,02, SD: 1,16, %37 girls, %67 boys).

Measures

In the study, “Demographic Information Questionnaire” developed by the researcher, “Social Media Disorder Scale (SMDS)”, “Mindful Attention and Awareness Scale – Adolescents”, “Psychological Need Satisfaction Scale” were used in order to collect data.

Demographic Information Questionnaire. The data related to gender, grade level, age and school type of the students were gathered with the demographic information questionnaire developed by the researcher.

Social Media Disorder Scale (SMDS). Social Media Disorder Scale (SMDS) was developed by Van den Eijnden et al. (2016) and consists of 9 items. The scale has one subscale. Savcı et al. (2018) carried out the Turkish adaptation study. In the original scale, the items of SMDS items are scored as yes-no. However, it is adapted into Turkish language with five-point Likert (0=Never, 5=Always) in order to obtain more delicate results. Each item covers one of the addiction diagnosis criteria. For the reliability and validity study, data from 553 adolescents was gathered. When the sampling was determined, four different categories had been formed as the ones who use the social media every day for the last one year and who has at least one social media account.

To test the construct validity, both Exploratory and Confirmatory Factor analyses were used. The analyses results determined that SMDS items were gathered under one factor. The internal consistency reliability coefficient of SMDS was calculated and Cronbach Alpha level was found .86, and criterion-related validity

score was found .83. For the test-retest analysis, data from 66 adolescents was gathered three weeks apart, and test- retest analysis result was found .80,5.

Mindful Attention and Awareness Scale – Adolescents. It was developed by Brown et al. (2011) in order to measure the mindfulness levels of 14-18-year-old adolescents. The scale items are gathered under a one- factor construct. The scale consists of 14 items. The high scores obtained from the scale show that the individual has high mindful attention and awareness level. The highest score to be obtained from the scale is 84 whereas the lowest score is 14. Sünbül (2016) adapted the scale into Turkish language. The reliability and validity studies were carried out with 383 high school students. The confirmatory factor analysis for construct validity showed that 14 items were gathered under on factor ($\chi^2 = 162.5$, $df = 75$, $\chi^2 / df = 2.17$; GFI =0.94, CFI = 0.92; TLI = .90; RMSEA = 0.06). The Cronbach Alpha coefficient of the scale was calculated as .81.

Psychological Need Satisfaction Scale. The original scale was developed by Deci and Ryan (1991). Psychological Need Satisfaction scale consists of 21 items and 3 subscales which are competence, autonomy and relatedness. While the highest score to be obtained from the scale is 47, the lowest score is 21. The scale was adapted into Turkish language by Cihangir-Çankaya and Bacanlı (2003). The reliability and validity studies were carried out with 250 university students. The internal consistency coefficients were found .80 for competence; .82 for autonomy and .81 for relatedness. Obtaining high scores from the subscales indicates that the individuals satisfy their needs. In the reliability and validity studies carried out by Eryılmaz (2011) with 326 high school students, the interpreted variance was found %53.96. As a result of the study, three-factor construct of the original scale was confirmed. For the total scale, Cronbach Alpha was calculated as .84.

Statistical Analysis

The forms in which one of the scales were not filled, in which a page is not filled, and which includes three or more empty items as well as the ones that leave the impression of being filled indiscriminately were not included in the analysis. After this process of overall evaluation, extreme values were determined and excluded; the final analysis was carried out with the remaining 521 data. All the statistical analyses were done via Statistical Package for the Social Sciences (SPSS) program 21.0. Stepwise regression analysis was also used in order to determine the prediction strength of the independent variables of the study on the social media addiction levels of adolescents

Results

In this section, there are descriptive statistics related to dependent and independent variables, and the correlation analysis results are presented afterwards. Finally, the stepwise regression analysis results carried out in order to determine if mindfulness and psychological need satisfaction of adolescents predict the social media disorder levels of adolescents are presented.

Descriptive Statistics

The obtained mean scores and standard deviations related to dependent and independent variables of adolescents are displayed in Table 1.

Table 1. Descriptive Statistics of Study Variables

Variables	n	Mean	S.d
Social Media Disorder	521	18.5189	6.46823
Autonomy	521	29.7132	6.97693
Competence	521	27.4340	6.49912
Relatedness	521	46.1717	9.07326
Mindfulness	521	56.2208	13.29946

Correlation and Regression Statistics

Table 2. Correlation Coefficients between Dependent and Independent Variables

Variables	SMD	Autonomy	Competence	Relatedness	Mindfulness
SMD	1				
Autonomy	-,267*	1			
Competence	-,250*	,524*	1		
Relatedness	-,146*	,500*	,495*	1	
Mindfulness	-,476*	,391*	,402*	,346*	1

As seen in Table 2, a negative and significant correlation ($r=-.27$) between the social media disorder levels and psychological need satisfaction levels of adolescents was found; a negative and significant correlation ($r=-.25$) between the social media disorder levels and the satisfaction of autonomy psychological need was found; and a negative and significant correlation ($r=-.14$) between the social media disorder levels and the satisfaction of relatedness psychological need was found. There is a negative and significant correlation ($r=-.48$) between their social media disorder levels and their mindfulness levels. As can be seen, a correlation over .90 is not present between predictive variables, and this indicates that there is no multicollinearity problem (Tabachnick & Fidell, 2006).

After the correlation values between variables were examined, univariate normality and multicollinearity was examined in the next step in order to determine if it meet the assumptions of multivariate analysis (Kline, 2011). Univariate normality was examined according to the ± 1 criterion of Skewness and Kurtosis values, and it is determined that the data related to all the measuring tools are within these limits and shows normal distribution. For multiple correlation, variance inflation factors (VIF) were also examined in addition to binary correlation. According to Büyükoztürk (2014), In order to achieve the assumption of multi correlation between independent variables, the tolerance value described as the variance ratio that other independent variables cannot describe one variable must not be less than 0.2, it must have a value close to 1, and the VIF value; in other words, the variance inflation factor must be less than 2. In Table 3, multiple correlation assumption is confirmed as can be seen.

Table 3. Tolerance and VIF Values Related to the Variables

	Tolerance	VIF
Autonomy	.623	1.606
Competence	.687	1.456
Relatedness	.718	1.393
Mindfulness	.805	1.242

The analyses revealed that the assumptions are confirmed in order to proceed to the regression analysis; therefore, regression analysis was carried out as the next step. The stepwise regression analysis related to the prediction of the social media disorder levels of adolescents was completed in three steps. In the first step, mindfulness, in the second step competence and in the third step relatedness was included in the analysis, and they were found to be significant predictors of social media disorder levels of adolescents.

Table 4. R and R2 Changes Regarding Predicting Social Media Disorder Levels of Adolescents

N: 521	Multiple R	R2	R2 Variation	F Variation	Sd1	Sd2	F Variation p
Mindfulness	.502	.251	.252	174.898	1	519	.000
Competence	.508	.256	.006	4.458	1	518	.035
Relatedness	.515	.261	.007	4.604	1	517	0.32

In the first step, as the best predictor of the social media disorder levels of adolescents, mindfulness, was included in the analysis and explained 25.1% of the total variance ($R=.502$, $R^2 = .251$, $F(1, 519)= 174.898$, $p<.005$). In the second step, competence subscale of psychological need satisfaction variable was included in the analysis in addition to mindfulness variable. With the contribution of this variable the total variance increased in the scores of the social media disorder to 25,6% ($R=.508$, $R^2=.256$, $F(1,518)=4,458$, $p<.005$). In the third step, relatedness subscale of psychological need satisfaction variable was included in the analysis in

addition to mindfulness and competence variable. With the contribution this variable total variance increased in the scores of the social media disorder to 26.1% ($R=.515$, $R^2=.261$, $F(1,517)=4,604$, $p<.005$).

As a result, the variables mindfulness, competence psychological need satisfaction and relatedness psychological need satisfaction significantly predict the social media disorder levels of adolescents, and altogether these variables explain 26.1% of the total variance.

Discussion

According to the findings of the current study, mindfulness, satisfaction of competence needs and satisfaction of relatedness needs significantly predict the social media disorder levels of adolescents and explain 26,1% of the total variance altogether.

When the analyses carried out to find out if mindfulness levels of adolescents predict their social media disorder are examined, it is seen that as the mindfulness scores of the adolescents increase, their social media disorder scores decrease. Low levels of mindfulness and high levels of social media disorder may stem from the fact that individuals with low levels of mindfulness behave more impulsive (Kuss & Griffiths, 2012) and have weaker self-control (Lattimore et al., 2011). People repeat the behavioral disorder that intensely as a way of creating a reliable and consisted change in their own life (Griffiths, 2005); sometimes it becomes as a strategy to feel better or as a way of coping. Mindfulness is a phenomenon that decreases stress and anxiety (Shapiro et al., 2006; Shapiro et al., 2007), and the literature is consistent with this finding indicating that there is a negative correlation between problematic internet use, gambling and mindfulness (Arslan, 2017; Riley, 2014).

The literature shows that the individuals with higher levels of social media use adopt the coping methods of emotional base rather than problem-oriented problem-solving methods in coping with stress (Charoensukmongkol, 2014). When we searched social media disorder, we found many studies on social media addiction or internet addiction, as addiction is a kind of disorder. Literature emphasize that the social media use driven by low levels of mindfulness, potentially may cause social media addiction (Andreassen et al., 2012) and the ones deprived of mindfulness may have difficulties in controlling their social media use behaviors (Kuss & Griffiths, 2011). The founder of Mindfulness Based Stress Reduction technique, Kabat-Zinn (2003) defines mindfulness as “the awareness emerging from paying attention purposefully to the aim in the present moments”. However, individuals cannot pay attention to what they do when they surf on the social media and walk or do other activities at the same time. For instance, Rosen et al. (2013) reported that multi-screen computer environments, smart phones that offer multiple applications and multi-tasks when using the social media cause individuals to turn their attention from one communication screen to another. It is known that adolescents tend to act risk-taking and cannot anticipate threats. When there is a cognitive disposition towards mindfulness, it has been determined that the adolescent shows awareness in the here and now, paying more attention to the decision-making processes underlying the behavior. Thus, increased instant attention may affect the performance of risky behaviors (Black, Sussman, Johnson & Milam, 2012). Also, integrating mindfulness into life allows the adolescents to approach their problems in life with another point of view; thus, decreases their stress related to life (Edwards et al., 2014) and that psychoeducation based on mindfulness can be used as an effective intervention which helps behavioral addictions of individuals as well as it can help individuals to focus on their job when using social networking sites at the same time (Shonin et al., 2014).

Realizing our feelings and thoughts that occur in our minds about the occasions and situations and allowing them belongs in the nature of mindfulness (Gilbert, 2005). Problematic social media use prevents that. Therefore, it can be said that the finding that the individuals with high mindfulness have low levels of social media addiction is consistent with the findings in the literature. Thus, increasing the mindfulness levels of adolescents may decrease maladaptive coping strategies use risk such as participating in online activities addictively (Arslan, 2017; Brand et al., 2016).

Our findings show that the satisfaction of competence need which is one of the psychological needs increase, the scores of the social media disorder of the adolescents decrease, and that as the satisfaction of relatedness need increase, the scores of the social media disorder of the adolescents increase as well. It is determined that

there is no correlation between autonomy need satisfaction levels and the social media disorder levels of adolescents.

When the negative correlation between the satisfaction of competence need and the social media disorder is considered, it is seen that the finding of the current study is in line with the literature. For example, Can and Zeren (2019) reported a significant and negative correlation between competence need satisfaction and internet addiction. The need of competence can be defined as the desire of affecting the environment where individuals live (Kowal & Fortier, 1999) and their capacity to communicate with their environment effectively. Satisfying psychological needs is required to achieve developments, consolidations and growths and consequently to achieve mental health of individuals (Deci & Ryan, 2000). Competence means that an individual feels effective in their interaction with their social environment; that is, it expresses that an individual uses his/her capacity and skills, broadens them and experiences opportunities to express them (Deci & Ryan, 1980; Deci & Moller, 2005; Ryan & Moller, 2016). It is reported that individuals with high level of competence need satisfaction make an effort in order to achieve their goals (Williams et al., 2002). Thus, it can be thought that adolescents who work hard in order to achieve their goals in life will not develop social media disorder. Additionally, it can be concluded that when it is thought that competence need is the capacity of an individual to interact with the environment effectively (Deci & Ryan, 1980), an adolescent who can satisfy competence need does not try to prove him/herself or to achieve satisfaction by using the social networking sites.

The finding of the current study which shows that as the relatedness need satisfaction of the adolescents increases, their social media addiction increases will be understood more clearly. When adolescents cannot satisfy their need of relatedness, power/control, their problematic internet use levels increase (Tanrikulu et al., 2015), and it is a fact that when the adolescent cannot build an appropriate relationship with their families, their risk of developing addiction becomes higher (Wang & Wang, 2013). In parallel, it has been found that adolescents who perceive their parents as retributive individuals who provide limited support and love tend to have higher levels of Internet addiction (Lam et al., 2009; Xiuqin et al., 2010; Yen et al., 2007). In this respect, it can be said that adolescents who cannot satisfy their need to relate to their families and friends in real life choose to satisfy this need virtually. All in all, it can be seen that the result of the study is in line with several studies in the literature.

It is determined in the current study that the satisfaction of autonomy need of adolescents does not predict their social media disorder levels. This situation may stem from the fact that when considered in terms of developmental approach, adolescents with a sense of self-knowledge (i.e., positive self-concept, confidence in abilities, sense of right from wrong when making decisions) may be better equipped to manage daily stresses and form connections to others (Leung, Rawana, & Klein, 2023). When the task solution performances of the adolescents were examined according to their autonomy levels, it was statistically determined that the performance in the last part of the task decreased in the group with low self-confidence; for the group characterized by low autonomy, task performance varies among adolescents (Bobková, & Lovaš, 2023). It is thought that the egocentric nature of adolescents and their limited reasoning capacity may be effective.

There are some limitations to the current study. The sample of the study is limited to the students studying at state high schools located in the central districts in İzmir province in 2019-2020 academic year. Therefore, the findings of the current study can be generalized to the students who study at these high schools and the ones studying at similar high schools.

These results provide a better understanding of some of the risk factors for the development of social media addiction.

Social media use is growing. The consequences of addictive use of social media are harmful. In order to provide effective interventions, a holistic theoretical understanding of the development of social media addiction is needed.

Conclusion and Suggestions

Major conclusion indicated that as the adolescents' mindfulness levels and the satisfaction for competence need increase, their social media disorder levels decrease. However as the need to be related increases, social media disorder increase. It should be considered principally that mindfulness, competence need satisfaction and relatedness need satisfaction explain 26,1% of the total variance of the social media disorder. It is

suggested for further studies to study with a larger sample taking different cultural, familiar and economical characteristics into account. It would be beneficial to provide psychoeducational interventions to adolescents about social media addiction and the effective use of social media. They should be taught about the healthy and the beneficial ways of satisfying their psychological needs. Psychological counseling services should be organized to enable adolescents to be more controlled in their lives and to stay away from addictions by gaining mindfulness skills.

According to the study results, it is substantial to study with a larger population and sample group with different socio-economic status living in different regions of Turkey and to support the findings of the current study with new studies carried out with adolescents and same variables in order to detect the generalizability of the results. In addition, it is also deemed important that including psychological needs in the curriculum of Psychological Counselling and Guidance bachelor's degree education can be beneficial as well as informing school counsellors about the use of social media and the variables affecting it.

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References

- Allen, K. A., Ryan, T., Gray, D. L., McInerney, D. M., & Waters, L. (2014). Social media use and social connectedness in adolescents: The positives and the potential pitfalls. *The Australian Educational and Developmental Psychologist*, 31(1), 18–31. <https://doi.org/10.1017/edp.2014.2>
- Andreassen, C. S. (2015). Online social network site addiction: A comprehensive review. *Current Addiction Reports*, 2(2), 175-184. <https://doi.org/10.1007/s40429-015-0056-9>
- Andreassen, C. S., Torsheim, T., Brunborg, G. S., & Pallesen, S. (2012). Development of a Facebook addiction scale. *Psychological Reports*, 110(2), 501-517. <https://doi.org/10.2466/02.09.18.PR0.110.2.501-517>
- Arslan, G. (2017). Psychological maltreatment, forgiveness, mindfulness, and internet addiction among young adults: A study of mediation effect. *Computers in Human Behavior*, 72, 57-66. <https://doi.org/10.1016/j.chb.2017.02.037>
- ASICI, E. (2019). Affetme Esnekliğinin Ergenlerin İyi Oluşunu Yordayıcı Rolü [-The Predictive Role of Flexibility in Forgiveness on Adolescents' Well-Being -]. *Erzincan Üniversitesi Eğitim Fakültesi Dergisi*, 21 (3), 17-31. <https://doi.org/10.17556/erziefd.440497>
- Barry, C. T., Sidoti, C. L., Briggs, S. M., Reiter, S. R., & Lindsey, R. A. (2017). Adolescent social media use and mental health from adolescent and parent perspectives. *Journal of Adolescence*, 61, 1-11. <https://doi.org/10.1016/j.adolescence.2017.08.005>
- Bányai, F., Zsila, Á., Király, O., Maraz, A., Elekes, Z., Griffiths, M. D., Andreassen, C.S., Demetrovics, Z. (2017). Problematic social media use: Results from a large-scale nationally representative adolescent sample. *PLoS One*, 12(1). <https://doi.org/10.1371/journal.pone.0169839>
- Black, D. S., Sussman, S., Johnson, C. A. & Milam, J. (2012). Trait mindfulness helps shield decision-making from translating into health-risk behavior. *Journal of Adolescent Health*, 51(6), 588-592. <https://doi.org/10.1016/j.jadohealth.2012.03.011>
- Bobková, M. & Lovaš, L. (2023). The goal gradient hypothesis: Does performance increase with proximity to goal when autonomy is low?. *Current Psychology* 42, 1103–1111. <https://doi.org/10.1007/s12144-021-01487-z>

- Boyd, D. M. & Ellison, N. B. (2007). Social network sites: Definition, history, and scholarship. *Journal of Computer Mediated Communication*, 13(1), 210-230. <https://doi.org/10.1111/j.1083-6101.2007.00393.x>
- Brand, M., Young, K. S., Laier, C., Wölfling, K., & Potenza, M. N. (2016). Integrating psychological and neurobiological considerations regarding the development and maintenance of specific Internet-use disorders: An Interaction of Person-Affect-Cognition-Execution (I-PACE) model. *Neuroscience & Biobehavioral Reviews*, 71, 252-266. <https://doi.org/10.1016/j.neubiorev.2016.08.033>
- Brown, K. W. & Ryan, R. M. (2003). The benefits of being present: Mindfulness and its role in psychological well-being. *Journal of Personality and Social Psychology*, 84(4), 822. <https://doi.org/10.1037/0022-3514.84.4.822>
- Brown, K. W., West, A. M., Loverich, T. M. & Biegel, G. M. (2011). Assessing adolescent mindfulness: Validation of an Adapted Mindful Attention Awareness Scale in adolescent normative and psychiatric populations. *Psychological Assessment*, 23(4), 1023. <https://doi.org/10.1037/a0021338>
- Büyüköztürk, S. (2014). *Sosyal bilimler için veri analizi el kitabı: İstatistik, araştırma deseni, SPSS uygulamaları ve yorum [-Data analysis handbook for social sciences: Statistics, research design, SPSS applications and commentary -]*. Pegem Akademi.
- Calvete, E., Sampredo, A. & Orue, I. (2014). Adaptation of the Mindful Attention Awareness Scale-Adolescents (MAAS-A) to assess the mindfulness trait in Spanish adolescents. *Psicología Conductual*, 22(2), 275-289.
- Caplan, S. E. (2010). Theory and measurement of generalized problematic Internet use: A two-step approach. *Computers in Human Behavior*, 26(5), 1089-1097.
- Can, S. & Zeren, Ş. G. (2019). The role of internet addiction and basic psychological needs in explaining the academic procrastination behavior of adolescents. *Cukurova University Faculty of Education Journal*, 48(2). <https://doi.org/10.14812/cufej.544325>
- Chambers, R., Gullone, E., & Allen, N. B. (2009). Mindful emotion regulation: An integrative review. *Clinical Psychology Review*, 29(6), 560-572. <https://doi.org/10.1016/j.cpr.2009.06.005>
- Charoensukmongkol, P. (2014). Effects of support and job demands on social media use and work outcomes. *Computers in Human Behavior*, 36, 340-349. <https://doi.org/10.1016/j.chb.2014.03.061>
- Cihangir-Çankaya, Z. & Bacanlı, H. (2003). İhtiyaç doyum ölçeği uyarlama çalışması [Proceeding paper]. In *VII. National Psychological Counseling and Guidance Congresses*. İnönü University, Malatya.
- Dawley, L. (2009). Social network knowledge construction: Emerging virtual world pedagogy. *On the horizon*, 17(2), 109-121.
- Deci, E. L., & Moller, A. C. (2005). The concept of competence: A starting place for understanding intrinsic motivation and self-determined extrinsic motivation. In A. J. Elliot & C. S. Dweck (Eds.), *Handbook of competence and motivation* (pp. 579–597). Guilford Publications.
- Deci, E. L. & Ryan, R. M. (1980). Self-determination theory: When mind mediates behavior. *The Journal of Mind and Behavior*, 1 (1), 33-43.
- Deci, E. L. & Ryan, R. M. (1991). A motivational approach to self: Integration in personality. In *Nebraska Symposium on Motivation*, 38 (1), 237-288.
- Deci, E. L. & Ryan, R. M. (2000). The " what" and " why" of goal pursuits: Human needs and the self-determination of behavior. *Psychological Inquiry*, 11(4), 227-268. https://doi.org/10.1207/S15327965PLI1104_01
- Dekeyser, M., Raes, F., Leijssen, M., Leysen, S. & Dewulf, D. (2008). Mindfulness skills and interpersonal behaviour. *Personality and Individual Differences*, 44(5), 1235-1245. <https://doi.org/10.1016/j.paid.2007.11.018>
- Edwards, M., Adams, E. M., Waldo, M., Hadfield, O. D., & Biegel, G. M. (2014). Effects of a mindfulness group on Latino adolescent students: Examining levels of perceived stress, mindfulness, self-compassion, and psychological symptoms. *The Journal for Specialists in Group Work*, 39(2), 145-163. <https://doi.org/10.1080/01933922.2014.891683>
- Eraslan, L. (2018). *Sosyal medya ve algı yönetimi: Sosyal medya istihbaratına giriş [-Social media and perception management: Introduction to social media intelligence -]*. Anı Yayıncılık.

- Eryılmaz, A. & Deniz, M. E. (Eds.) (2019). *Tüm yönleriyle bağımlılık [-Addiction in all its aspects -]*. Pegem Akademi Yayıncılık.
- Eryılmaz, A. (2011). Satisfaction of needs and determining of life goals: A model of subjective well-being for adolescents in high school. *Educational Sciences: Theory and Practice*, 11(4), 1757-1764.
- Feng, W., Ramo, D. E., Chan, S. R., & Bourgeois, J. A. (2017). Internet gaming disorder: Trends in prevalence 1998–2016. *Addictive behaviors*, 75, 17-24.
- Garland, E. L. (2013). Mindfulness research in social work: Conceptual and methodological recommendations. *Social Work Research*, 37(4), 439-448. <https://doi.org/10.1093/swr/svt038>
- Gilbert, P. (Eds.). (2005). *Compassion: Conceptualisations, research and use in psychotherapy*. Routledge.
- Griffiths, M. D. (2005). A 'components' model of addiction within a biopsychosocial framework. *Journal of Substance Use*, 10(4), 191-197. <https://doi.org/10.1080/14659890500114359>
- Griffiths, M. D. (2010). Gaming in social networking sites: a growing concern?. *World Online Gambling Law Report*, 9(5), 12-13.
- Griffiths, M. D., Kuss, D. J., & Demetrovics, Z. (2014). Social networking addiction: An overview of preliminary findings. In K. P. Rosenberg & L. Curtiss Feder (Eds.), *Behavioral addictions: Criteria, evidence, and treatment* (pp. 119–141). Elsevier Academic Press. <https://doi.org/10.1016/B978-0-12-407724-9.00006-9>
- Griffiths, M. D. & Szabo, A. (2014). Is excessive online usage a function of medium or activity? An empirical pilot study. *Journal of Behavioral Addictions*, 3(1), 74-77. <https://doi.org/10.1556/jba.2.2013.016>
- Güldal, Ş. T. (2019). *Bilinçli farkındalık temelli ergenlere yönelik psikoeğitim programının karakter güçleri, bilinçli farkındalık ve akademik başarı gelişimine etkisinin incelenmesi*. (Publication no: 605318) [Doctoral Dissertation, Marmara University]. CoHE Thesis Center.
- İkiz, F. E., & Savi-Çakar, F. (2010). Perceived social support and self-esteem in adolescence. *Procedia-Social and Behavioral Sciences*, 5, 2338-2342. <https://doi.org/10.1016/j.sbspro.2010.07.460>
- İkiz, F. E. & Uygur, S. (2019). The effect of mindfulness-based programs on coping with test anxiety: A systematic review. *Journal of Human Sciences*, 16(1), 164-191.
- İkiz, F. E. (2020, 24-25 October). *Ergenlerde sosyal medya kullanımı ve psikolojik iyi oluş* [Paper presentation]. In 7. International Conference on Social Research and Behavioral Sciences, Antalya, Türkiye.
- Kabat Zinn, J. (2003). Mindfulness based interventions in context: Past, present, and future. *Clinical Psychology: Science and Practice*, 10(2), 144-156. <https://doi.org/10.1093/clipsy.bpg016>
- Kınay, F. (2013). *Beş Boyutlu Bilinçli Farkındalık Ölçeği'ni Türkçe'ye uyarlama, geçerlik ve güvenilirlik çalışması* (Publication no: 345735) [Master Dissertation, Istanbul Bilim University]. CoHE Thesis Center.
- Kline, R. B. (2011). Convergence of structural equation modeling and multilevel modeling. In *The SAGE handbook of innovation in social research methods* (pp. 562-589). SAGE Publications Ltd, <https://www.doi.org/10.4135/9781446268261>
- Kowal, J. & Fortier, M. S. (1999). Motivational determinants of flow: Contributions from self-determination theory. *The journal of social psychology*, 139(3), 355-368. <https://doi.org/10.1080/00224549909598391>
- Kuss, D. J. & Griffiths, M. D. (2011). Online social networking and addiction—a review of the psychological literature. *International Journal Of Environmental Research And Public Health*, 8(9), 3528-3552. <https://doi.org/10.3390/ijerph8093528>
- Kuss, D. J. & Griffiths, M. D. (2012). Internet gaming addiction: A systematic review of empirical research. *International Journal of Mental Health and Addiction*, 10(2), 278-296. <https://doi.org/10.1007/s11469-011-9318-5>
- Kuss, D. J., Griffiths, M. D., Karila, L. & Billieux, J. (2014). Internet addiction: A systematic review of epidemiological research for the last decade. *Current Pharmaceutical Design*, 20(25), 4026–4052. <https://doi.org/10.2174/13816128113199990617>

- Lam, L. T., Peng, Z. W., Mai, J. C. & Jing, J. (2009). Factors associated with Internet addiction among adolescents. *Cyberpsychology & Behavior*, 12(5), 551-555. <https://doi.org/10.1089/cpb.2009.0036>
- Langer, E. J. (2009). *Counterclockwise: Mindful health and the power of possibility*. Ballantine Books.
- Lattimore, P., Fisher, N., & Malinowski, P. (2011). A cross-sectional investigation of trait disinhibition and its association with mindfulness and impulsivity. *Appetite*, 56(2), 241-248. <https://doi.org/10.1016/j.appet.2010.12.007>
- Leung, T., Rawana, E. & Klein, R. (2023). Exploratory analysis of strength domains and association with subjective and psychological well-being among Canadian adolescents. *Current Psychology* 42, 990–1001. <https://doi.org/10.1007/s12144-021-01407-1>
- Lin, M. F. G., Hoffman, E. S. & Borengasser, C. (2013). Is social media too social for class? A case study of Twitter use. *TechTrends*, 57(2), 39-45. <https://doi.org/10.1007/s11528-013-0644-2>
- Oberst, U., Wegmann, E., Stodt, B., Brand, M., & Chamarro, A. (2017). Negative consequences from heavy social networking in adolescents: The mediating role of fear of missing out. *Journal of Adolescence*, 55, 51-60. <https://doi.org/10.1016/j.adolescence.2016.12.008>
- Park, C. H., & Kim, Y. J. (2013). Intensity of social network use by involvement: A study of young Chinese users. *International Journal of Business and Management*, 8(6), 22-33. <http://dx.doi.org/10.5539/ijbm.v8n6p22>
- Qian, Y., Hu, J., & Zhang, M. (2015). Study on the online travel information search: A perspective of social media. *Advances in Applied Sociology*, 5(08), 219.
- Reis, H. T., Sheldon, K. M., Gable, S. L., Roscoe, J. & Ryan, R. M. (2000). Daily well-being: The role of autonomy, competence, and relatedness. *Personality and Social Psychology Bulletin*, 26(4), 419-435. <https://doi.org/10.1177/0146167200266002>
- Riley, B. (2014). Experiential avoidance mediates the association between thought suppression and mindfulness with problem gambling. *Journal of Gambling Studies*. 30; 163-171. <https://doi.org/10.1007/s10899-012-9342-9>
- Rosen, L. D., Whaling, K., Rab, S., Carrier, L. M. & Cheever, N. A. (2013). Is Facebook creating “iDisorders”? The link between clinical symptoms of psychiatric disorders and technology use, attitudes and anxiety. *Computers in Human Behavior*, 29(3), 1243-1254. <https://doi.org/10.1016/j.chb.2012.11.012>
- Ryan, R. M. & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55(1), 68.
- Ryan, R. M. & Moller, A. C. (2016). Competence as a necessary but not sufficient condition for high quality motivation: A self-determination theory perspective. *Handbook of Competence Motivation*, 214-231.
- Satıcı, B. (2019). Sosyal Medya Bağımlılığı ve İyilik Hali: Romantik İlişkilerde Mükemmeliyetçiliğin Aracılık Rolü [-Social Media Addiction and Well-Being: The Mediating Role of Perfectionism in Romantic Relationships -] .*OPUS Uluslararası Toplum Araştırmaları Dergisi*, 14 (20), 699-727. <https://doi.org/10.26466/opus.597950>
- Savci, M., Ercengiz, M., & Aysan, F. (2018). Turkish adaptation of the Social Media Disorder Scale in Adolescents. *Noro Psikiyatri Arsivi*, 55(3), 248–255. <https://doi.org/10.5152/npa.2017.19285>
- Shapiro, S. L., Brown, K. W. & Biegel, G. M. (2007). Teaching self-care to caregivers: Effects of mindfulness-based stress reduction on the mental health of therapists in training. *Training and Education in Professional Psychology*, 1(2), 105. <https://doi.org/10.1037/1931-3918.1.2.105>
- Shapiro, S. L., Carlson, L. E., Astin, J. A. & Freedman, B. (2006). Mechanisms of mindfulness. *Journal of Clinical Psychology*, 62(3), 373-386. <https://doi.org/10.1002/jclp.20237>
- Shen, C. X., Liu, R. D. & Wang, D. (2013). Why are children attracted to the Internet? The role of need satisfaction perceived online and perceived in daily real life. *Computers in Human Behavior*, 29(1), 185-192. <https://doi.org/10.1016/j.chb.2012.08.004>
- Shonin, E., Van Gordon, W., Dunn, T. J., Singh, N. N. & Griffiths, M. D. (2014). Meditation awareness training (MAT) for work-related wellbeing and job performance: A randomised controlled trial. *International Journal of Mental Health and Addiction*, 12(6), 806-823. <https://doi.org/10.1007/s11469-014-9513-2>
- Subrahmanyam, K., & Greenfield, P. (2008). Online communication and adolescent relationships. *The Future of Children*, 18(1), 119-146. Retrieved July 10, 2021, from <http://www.jstor.org/stable/20053122>

- Sünbül, Z. A. (2016). *The Relationship between mindfulness and resilience among adolescents: mediating role of self-compassion and difficulties in emotion regulation*. (Publication no: 481527) [Doctoral Dissertation, Middle East Technical University]. CoHE Thesis Center.
- Tabachnick, B. G. & Fidell, L. S. (2006). *Using multivariate statistics*. Bearson.
- Tanrıkulu, T., Öztürk, R. & Yeşil, E. (2015). Ergenlerde sosyal ağ bağımlılığı ve temel ihtiyaçlar arasındaki ilişkinin incelenmesi [-Examining the relationship between social network addiction and basic needs in adolescents -]. *Psikolojik Danışma ve Eğitim Dergisi*, 1(2), 22-30.
- Ünalın, P. C., Kaya, Ç. A., Akgün, T., Yıkılkan, H. & İşgör, A. (2007). Birinci basamakta ergen sağlığına yaklaşım. *Journal of Medical Sciences*, 27(4), 567-576.
- Van Den Eijnden, R. J., Lemmens, J. S. & Valkenburg, P. M. (2016). The social media disorder scale. *Computers in Human Behavior*, 61, 478-487. <https://doi.org/10.1016/j.chb.2016.03.038>
- Van Deursen, A. J., Bolle, C. L., Hegner, S. M. & Kommers, P. A. (2015). Modeling habitual and addictive smartphone behavior: The role of smartphone usage types, emotional intelligence, social stress, self-regulation, age, and gender. *Computers in Human Behavior*, 45, 411-420. <https://doi.org/10.1016/j.chb.2014.12.039>
- Vansteenkiste, M. & Ryan, R. M. (2013). On psychological growth and vulnerability: Basic psychological need satisfaction and need frustration as a unifying principle. *Journal of Psychotherapy Integration*, 23(3), 263. <https://doi.org/10.1037/a0032359>
- Vural, Z. B. A., & BAT, M. (2010). Yeni bir iletişim ortamı olarak sosyal medya: Ege Üniversitesi İletişim Fakültesine yönelik bir araştırma [-Social media as a new communication medium: A research on Ege University Faculty of Communication -]. *Yaşar Üniversitesi E-Dergisi*, 5(20), 3348-3382.
- Wang, E. S. T. & Wang, M. C. H. (2013). Social support and social interaction ties on internet addiction: Integrating online and offline contexts. *Cyberpsychology, Behavior, and Social Networking*, 16(11), 843-849. <https://doi.org/10.1089/cyber.2012.0557>
- Weinstein, E., Kleiman, E. M., Franz, P. J., Joyce, V. W., Nash, C. C., Buonopane, R. J., & Nock, M. K. (2021). Positive and negative uses of social media among adolescents hospitalized for suicidal behavior. *Journal of Adolescence*, 87, 63-73. <https://doi.org/10.1016/j.adolescence.2020.12.003>
- Xiuqin, H., Huimin, Z., Mengchen, L., Jinan, W., Ying, Z. & Ran, T. (2010). Mental health, personality, and parental rearing styles of adolescents with Internet addiction disorder. *Cyberpsychology, Behavior, and Social Networking*, 13(4), 401-406. <https://doi.org/10.1089/cyber.2009.0222>
- Xu, H., & Tan, B. C. (2012). Why do I keep checking Facebook: Effects of message characteristics on the formation of social network services addiction. Retrieved June 17, 2022, from <https://aisel.aisnet.org/icis2012/proceedings/ResearchInProgress/31/>



Teachers' Knowledge and Experience on Trauma: A Qualitative Evaluation

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ABSTRACT

In this study, the knowledge and experiences of teachers working in schools regarding the traumas experienced by children were investigated. The study group of this research, which is based on a qualitative research design, was determined by purposive sampling and consists of 88 teachers working in secondary and high schools. The thematic analysis method was used in the analysis of the data. As a result of the analysis, four main themes and many sub-themes were determined, which represent the knowledge and experience of teachers about trauma, the effects of trauma on the teacher's life functions, obstacles to trauma intervention, and recommendations for the future. As a result, it was observed that teachers had significant educational and equipment deficiencies in both trauma knowledge and trauma intervention, as well as having experiences with student traumas. As a result, it can be said that increasing the knowledge and intervention skills of teachers about trauma will be an important approach.

The World Health Organization (WHO) emphasizes that a total of 40 million children under the age of 15 are exposed to violence and other traumas each year, and these traumas may change depending on the extent of violence and the child's personal experience, but may have long-term medical and psychosocial consequences (WHO, 2022). Studies conducted in this field report that two out of every three school-age children experience at least one traumatic event until the age of 17 (Perfect et al., 2016). It was determined that exposure to childhood trauma is associated with low academic achievement, low IQ scores, and deterioration in working memory, language, and vocabulary in students (Perfect et al., 2016). It was even reported that traumatized students exhibit poorer attention, destructive behaviors, aggression, hyperactivity and impulsivity, withdrawal from school, absenteeism, and grade repetition, as well as depression, anxiety, social withdrawal, and low self-esteem (Perfect et al., 2016). In a previous study, it was determined that children with Post-Traumatic Stress Disorder (PTSD) display more school-related problem behaviors than children without PTSD (Weems et al., 2013). Whatever the source and effects of trauma, workers who can support children (i.e., teachers and mental healthcare employees, etc.) must have a deeper understanding of how trauma affects child development and what intervention systems are effective in children's recovery.

It is already known that traumas have effects on children in the school system and their academic achievement. Considering that the primary mission of schools is to provide education and teachers are under tremendous pressure to make academic progress each year, the key point for adopting trauma-related early intervention services in school collaboration is the effects of traumas on academic achievement. As traumatic events continue to increase and affect large numbers of children, the community and schools must discuss the mental health services provided by schools, create trauma-informed school models, provide the necessary resources

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for a trauma-informed school, and support the trauma-related staff (i.e., teachers) other than mental healthcare professionals in schools. However, it was reported in previous studies that both teachers' ignorance of their roles in supporting traumatized students and their limited knowledge of the uncertainty and traumas cause them to experience indirect traumas (Alisic, 2012; Berger et al., 2016). As well as the problems caused by teachers' incomplete knowledge of trauma, it was emphasized that they experience school-related dysfunction, including behavioral problems, social and emotional problems, and academic inadequacy because of their exposure to traumas. On the one hand, these dysfunctions experienced by the teachers, on the other hand, the failure of teachers who intervene in student traumas in the school setting in performing an accurate intervention process may bring bigger problems. Because it is considered that the people who can be consulted by students who are exposed to traumas in their childhood must have good mental health and have the necessary equipment for the intervention process.

As studies continue to show an association between school outcomes and traumas, limited literature has explored teachers' experiences with traumatized children. In this context, some studies reported that trauma-informed practices in schools facilitate the process to increase support for teachers, healing traumatized children, and reducing the behavioral and academic problems of students (Alisic, 2012; Alisic et al., 2012; Mendelson et al., 2015). In trauma-informed schools, staff from all levels have a basic understanding of traumas and an understanding of how trauma affects student learning and behaviors in the school setting (Cole et al., 2013). However, previous studies conducted on school teachers and students reported that teachers face uncertainties about childhood traumas, are inadequate, and have limited educational and policy information about traumas (Alisic, 2012; Dyregrov, 2009; Papadatou et al., 2002). In this context, more teaching experience, trauma-oriented training, and establishing relationships with traumatized children will play important roles in building trust based on traumas (Alisic et al., 2012).

Typically, trauma-focused training aims to create a shared understanding of the problem of trauma exposure, build consensus for trauma-informed approaches, and build attitudes, beliefs, and behaviors that help adopt trauma-informed approaches in the system. Previous studies showed that trauma-focused education given to service providers in clinical or school settings raises awareness, changes attitudes, and encourages practices appropriate for trauma-informed approaches (Brown, Baker & Wilcox, 2012; Green et al., 2015). Similarly, a school-based resilience program has positive effects on reducing PTSD and secondary traumas in teachers, increasing self-efficacy and optimism, and improving teachers' coping skills (Berger et al., 2016). It was also reported in previous studies that a universal, school-based, and trauma-oriented program will improve students' emotion regulation, social competence, academic performance, behavior in the classroom environment, and acceptance of authority (Mendelson et al., 2015). Also, in a recent literature review, Berger (2019) reported that whole-school trauma interventions and teacher training increase staff's knowledge of traumas and students' orientation, improve students' school engagement, reduce their disruptive behaviors and expulsions from school, and reduce post-traumatic stress and depression in traumatized students (Berger, 2019).

As in any traumatic experience, if teachers' knowledge of trauma is not increased and their experiences are not taken into account, this may force teachers on how to behave towards trauma and follow an intervention system, and may put students with trauma or who are likely to be exposed to traumatic experiences at risk. It can cause PTSD and Anxiety Disorders, which are psychiatric symptoms associated with stress. In general, it may not be a healthy approach to ask or expect only school mental healthcare staff to intervene in school-based traumatic experiences, without giving importance to teachers' knowledge and experience of traumas. For this reason, it is considered that faster solutions can be produced with the cooperation of school mental healthcare employees and trauma-informed teachers in preventive, protective, and remedial studies for traumatic experiences. Based on this perspective, the evidence supporting the effectiveness of school-based interventions (Jaycox et al., 2009; Kataoka et al., 2011) and aroused interest in the development and implementation of trauma-sensitive schools (Overstreet & Chafouleas, 2016) sparked an interest in the professional development of teachers regarding traumas in educational settings. Although the effects of education on traumas and their knowledge and experience regarding traumas have not been fully assessed, there are limited studies that directly investigate teachers' knowledge and experience regarding trauma (Berger, Bearsley & Lever, 2021). In this context, the present study aimed, to evaluate teachers' reactions, lack of education and resources, and school policy needs by examining teachers' knowledge and experiences about school-oriented traumas. The

results of the study are important in terms of improving the effectiveness and presentation of teacher resources and training, reducing student learning and behavioral problems, and achieving teaching and learning outcomes in a better school setting for teachers and students. As teachers' understanding of trauma exposure grows and uses trauma-based universal screenings to identify the needs of traumatized students, it will be critical to establishing effective prevention and intervention techniques in line with the identified needs. Based on this purpose and importance, the following questions were formed.

1. What are teachers' knowledge and experience about student traumas, and what are the sources they use regarding traumas?
2. What is the perception of teachers about the effects of the resources they use on traumas and what other resources do they need?
3. What obstacles do teachers face in dealing with traumas and what are their recommendations regarding this?

Background

Trauma

The American Psychological Association (APA) (2013) defined trauma as "an emotional response to a horrific incident, such as an accident, rape, or natural catastrophe. The Substance Abuse and Mental Health Services Administration (SAMHSA) (2014) defined trauma as "an event or series of events that is experienced by an individual as physically or emotionally harmful or life-threatening and that has a lasting effect on mental, physical, social, emotional, or spiritual health". Exposure to psychological trauma has become almost universal in human life. An estimated two out of three people worldwide have experienced one or more traumatic life events (McLaughlin et al., 2014; Norris & Sloan 2014). Examples of traumatic events are the witnessing of death or serious injury, physical or sexual assault, motor vehicle accidents, and childhood maltreatment. Although many individuals are mentally resilient, many are diagnosed with disorders associated with trauma, such as post-traumatic stress disorder (PTSD), as outlined in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5). Many childhood traumatic experiences are inflicted by those who are in their care and custody. These traumatized children may develop posttraumatic stress symptoms, but also impaired affect regulation and dysfunctional interpersonal relationships (Olf, 2013).

Complicated Trauma

Complex trauma describes both children's exposure to multiple traumatic events (often invasive, interpersonal in nature) and the far-reaching, long-lasting effects of this exposure. They often occur early in life and can disrupt many aspects of a child's development and sense of self. Because these events often happen to the caregiver, they can disrupt the child's ability to form secure attachments. Many aspects of a child's healthy physical and mental development depend on this essential source of security and stability. Adverse childhood experiences encompassed by complex trauma often begin in early childhood, are long-lasting or repeated, and are perpetrated by others. Where teachers need to be effective is in both monitoring and supporting children to recover from their complex trauma or other traumatic events (Rolfesnes & Idsoe, 2011). In addition to teaching academic skills, educators serve as role models, mediate interactions among children, and provide emotional support (Hamre & Pianta, 2001). If they are knowledgeable, they can also provide assistance with coping skills, including emotional processing, distraction, and the re-establishment of familiar roles and routines (Prinstein, La Greca, Vernberg, & Silverman, 1996). Although some studies suggest that teachers are uncertain about their role and what they should do to effectively help children after their students have been exposed to traumatic stressors (Alisic et al., 2012; Rodger et al., 2020), teachers can even be instrumental in supporting children's posttraumatic recovery. On the other hand, trauma-informed educational settings (teachers) are increasingly recognized as a critical environment for addressing the effects of trauma-informed and complicated childhood trauma that can thrive with trauma-informed educators, given the significant amount of time students spend at school, the relative safety of the school environment, and the buffering effect provided by supportive and positive relationships (Pelayo, 2020; McClain, 2021).

Adverse Childhood Experience (ACE). Adverse childhood experiences (ACEs) were developed to study the relationship between adverse childhood experiences (ACEs) and adult health problems. ACEs include emotional, physical, or sexual abuse; emotional or physical neglect and substance abuse; mental disorders; criminal behavior; domestic violence; or parental separation (Goldenson, Kitollari & Lehman, 202). Adverse

childhood experiences are events a child experiences that cause stress and can lead to chronic stress reactions and trauma. Studies show a strong relationship between the number of adverse events experienced in childhood and the number of health risk factors associated with leading causes of death in adulthood (Felitti et al., 1998). Globally, childhood adversity accounts for 29.8% of all disorders across life stages (Kessler et al., 2010) and is strongly associated with family dysfunction and maltreatment, physical/psychological suffering, and significant healthcare costs (Felitti and Anda, 2010). Indeed, in a study of 1784 socioeconomically and racially diverse samples, 73% of participants had at least one adverse childhood experience (Cronholm et al., 2015). Therefore, as these children enter the educational system, it is inevitable that school systems will be affected. School systems need to be prepared, and therefore teachers need to be informed about trauma, in order to provide intervention strategies for children exposed to trauma.

The Impact of Trauma in the School Environment. Since students spend most of their weekdays in the classroom, they experience cognitive, behavioral or academic problems when exposed to a traumatic event. The institution primarily responsible for dealing with these problems is the school and teachers. Traumatized students may lack a sense of security or trust in relationships due to previous unsafe experiences (Courtois & Ford, 2009). Therefore, students may misinterpret teachers' verbal or implicit language due to their previous negative experiences. Because unresolved and negative life experiences may condition them to be overly critical of teacher behavior. Trauma-induced behaviors often manifest as outbursts of anger, crying spells, peer and cyber bullying, or lack of engagement in academic and social life, all of which have a direct impact on student-teacher and student-student relationships and academic performance (Terr, 1991). Educators have a great responsibility to apply the trauma lens when delving deeper into the potential causes of traumatic and disruptive behaviors. However, educators need to be knowledgeable about traumatic stress symptoms, trauma-informed strategies, and how to create a trauma-informed learning environment for all students. Research suggests that teachers feel a responsibility to help students with and without traumatic experiences but feel unprepared to intervene due to a lack of knowledge about how to meet their mental health needs (Rothi et al., 2008). Some researchers emphasize that teachers and school-based mental health providers should consider screening for symptoms of mental health diagnoses to identify the functions of behaviors and the appropriate response or strategy (Porche et al., 2016). However, it is also known that this is not easy and that teachers should receive specialized trauma training.

The effects of psychological trauma and post-traumatic stress disorder (PTSD) are known to vary according to individual differences, the social and cultural context, and the culturally specific lessons and resources available to individuals, families and communities. The framework developed (Kira et al., 2011) distinguishes between the effects of (i) personal, unique physical characteristics of the individual or group, including skin colour, ethnic background, gender and sexual orientation; and (ii) family, ethno-cultural and community membership, including majority or minority group status, religious beliefs and practices, socio-economic resources and political and civic affiliations. Personal and social factors can be a positive resource contributing to safety and wellbeing, but they can also result in harming the individual or group concerned. This poses a unique challenge, particularly for refugee students who have migrated from countries experiencing protracted conflict and war to other countries. The multiple potential traumas and adversities they experience can have a cumulative effect and increase their risk of mental health problems and learning delays (Sullivan & Simonson, 2016). They are at high risk of mental health disorders (Derluyn et al., 2009). Therefore, students who have experienced difficulties in their home countries and schools due to various traumas, as well as students who have migrated from different countries and cultures, are likely to be unable to adjust to school. Therefore, a different approach is needed to support refugee students and their families (Szente et al., 2006). One of these approaches is that the integrity of the family, parental support, supportive friendships, and the sense of security felt at school after reacculturation can mitigate the effects of multiple traumas for students from different cultures (Reed et al., 2012). It has been reported that the role of educators is particularly important in providing these supports, but teachers lack training in trauma for students from different cultures. As a result, teachers lack cultural sensitivity and trauma-informed teaching skills (Nagasa, 2014). It has been found that teacher training that specifically focuses on improving intercultural relations, cultural identity support, language barrier management and the implementation of trauma-informed teaching practices will contribute to teachers' ability to support the adjustment of students from different cultures (Nagasa, 2014; Szente, Hoot & Taylor, 2006).

Method

Participants

The study group was determined by purposive sampling and the study was based on a qualitative design. In this context, 88 teachers who were working in secondary and high schools in Bingöl were contacted. The participants were identified in accordance with the interview form prepared by the author and in accordance with the inclusion criteria. The participants were selected according to the criteria of having previously experienced a traumatic event (violence, sexual abuse, death, disaster, accident, suicide, etc.) in the school environment, having been directly involved (intervened) in the traumatic events and not being from the field of school psychological counselling. In the present study, the author conducted qualitative interviews by selecting a small group representing teachers who make up a large part of the education community. Before the face-to-face interviews written consent was obtained from the participants. Also, informed consent of the participants was obtained through e-mails before the interviews. The sample of the study consisted of 88 teachers (49 male (46%) and 39 female (44%)). Regarding the years of service of teachers, 46 people (52.20%) had worked in their profession between 1-6 years, 11 people (12.50) between 6-10 years, and 31 people (35.30%) between 10 years and above. The types of traumas (cases) faced by teachers were sexual abuse in 12 cases (13.63%), violence in 51 (57.95%), natural disasters in 3 (03.40%), accidents in 4 (05.68%), suicide in 2 (02.27%), and death in 15 cases (17.04%). The sample consisted of 88 teachers and 10 subjects: 16 Turkish, 15 Religious Culture and Moral Knowledge, 13 English, 11 Mathematics, 9 Biology, 7 History, 6 Science, 5 Physical Education and Sports, 5 Philosophy Group and 1 Automotive. All teachers had at least one traumatic experience in the school environment. Forty-three of the teachers were compelled to take part in the events because of the pedagogical knowledge they had received in some in-service training, and the rest of the teachers experienced various difficulties as described in the findings.

Three open-ended questions were created by the author to receive the teachers' knowledge and experiences about traumas and these questions were asked to the participants in the interviews. Whenever possible, the participants were also asked probing questions to detail their knowledge and experience of school-related traumas. Teachers' knowledge and experience of student traumas, resources for responding to student traumas, interactions, and recommendations for their colleagues about education and the future were investigated with the semi-structured interview form. Sample questions were: "*What are teachers' knowledge and experience about student traumas and what are the sources they use for traumas?*", "*What is the perception of teachers about the effects of the resources they use regarding traumas and what other resources do they need?*", "*What kind of barriers do teachers face in dealing with traumas and what are their recommendations regarding this?*". Individual interviews with the participants lasted approximately 20 minutes for each participant and audio recordings of the interviews were taken to be deciphered later with the permission of the participants.

Data Analysis

The knowledge and experiences of the participants regarding student traumas were collected through qualitative semi-structured interviews. All interviews were transcribed verbatim and logged into NVivo 10 for thematic analysis. Qualitative analysis of interview transcripts was performed by using Inductive Thematic Analysis (Braun & Clarke, 2006). The thematic analysis includes the procedures of reading the data, identifying inclusive themes and blending sub-themes, and reviewing, identifying, and naming themes and sub-themes (Braun & Clarke, 2006). To facilitate familiarity with the data obtained in the interviews, the transcripts were read multiple times by the researcher and two experts who were competent in thematic analysis and were coded systematically throughout the dataset. The appropriate themes were then induced from the codes (Patton, 1990). The themes were reviewed for consistency by examining all sections of coded text for each possible theme and seeing whether the themes reflected the meanings evident in the data accurately and clearly (Attride-Stirling, 2001). Also, to ensure the reliability of the analysis, reflective notes were written by the researcher during the data analysis to record the early interpretations of the data and the relationships between the concepts (Birks & Mills, 2014). A journal was kept periodically throughout the data collection and analysis period to recognize the effects of the researcher's previous experiences, considerations, and assumptions and to avoid premature or biased interpretation of the data (Morrow, 2005) and all participants were given nicknames.

Results

As a result of the analysis, four main themes and many sub-themes that represented teachers' knowledge and experiences about traumas were determined. Sample citations, the gender of participants, and the number of ranks were included in each theme. A summary of the themes is given in Table 1.

Table 1. A Summary of The Themes

Themes	Sub-themes
Information on Trauma	1.1. Trauma Information 1.2. Experiences of Trauma Faced 1.3. Trauma Intervention
Effects of Trauma on Teacher's Life Functions	2.1. Effect on Mental Health and Social Relationships 2.2. Effect on Academic Performance
Barriers to Trauma Intervention	3.1. Lack of Teacher Education 3.2. Lack of Resources 3.3. Lack of Trauma Informed Protocol
Recommendations for the Future	

Information on Traumas

Teachers' definitions of traumas vary. For example, "*The situation where the brain is affected biologically or the psychological structure is affected by a danger or distress*" (Female, 75), "*Emotional depression experienced by the individual*" (Male, 66), and "*Emotional processes affecting an individual's mental health*" (Female, 74). However, unlike their colleagues, some teachers made definitions of the effect of traumas on the psyche and body. For example, "*Injury in the soul and body*" (Female, 7) and "*The deterioration of the integrity of the soul and body*" (Female, 71). However, some teachers defined traumas and it was determined that there was a difference between traumas and other negative behaviors and that they experienced mental confusion about what exactly traumas were. For example, "*I say that they are bad events affecting an individual's life, but I have difficulty in distinguishing which situations occur as a result of traumas or which situations are considered as impertinence*" (Female 5), "*I can define the harassment of young students, especially the abuse of young girls by their boyfriends who break up or who decide to break up with their boyfriends, the effects of peer bullying on children, but I do not know if negative teacher attitudes and expressions cause traumas to the child*" (Female, 70).

Experiences Regarding the Traumas Faced. The traumas faced by the teachers and their experiences associated with these traumas are discussed in this theme. It was found that the traumas conveyed by the teachers were the traumas that the teacher personally encountered and the traumas experienced by their students. Regardless of whom the traumas were directed at, it can be argued that the teachers experienced significant difficulties in the traumas they faced. For example, "*There was an incident of harassment at our school and I did not know how to respond to it*" (Female, 58), "*Injuries that result from traumatic events that I faced, in general, were peer bullying among students, student fights (brass knuckles, knives, iron bars used in fights)*" (Male, 85), "*The biggest trauma I faced at school was the mobbing against me by the administration*" (Female, 4), "*My student lost his parents in a traffic accident*" (Male, 80), "*Last year, I witnessed frequent fainting of a female student who came to our school after a transfer from another school. We always kept cologne in the classroom, she said when she was going to pass out. The family was informed and she was taken to the hospital. In the examinations, they said that the situation was psychological and that she acted like this to attract attention. We learned that her parents were in the stage of separation and for this reason, she acted like this. In such cases, I observed that the situation is very worrying and frightening for a student who constantly faints and for other students who see her*" (Female, 75). Also, although the teachers may be affected emotionally or spiritually by the traumatic experiences they face, it was observed that they guide the victims and have awareness about the subject. For example, "*I noticed that one of my students, whose parents were in the process of separating, was emotionally disconnected from reality. When I realized this, I consulted the school counselor*" (Male, 66), "*I had a student who stuttered after his brother was born, and it lasted for two years*" (Female, 5), "*I had a student who was bitten by a dog and he was very afraid of dogs. This fear even pushed him back academically. He was even afraid to go down the stairs in the apartment and school. Because he considered that if he went down the stairs, a dog would suddenly appear in front of him*"

(Female, 74), *“The traumas I have faced most were ... students growing up in a disinterested family environment, parents’ divorces, peer bullying. For example, I had a student preparing for the LGS Exam. His parents were divorced, and the boy lived with his mother. This student was mocked and humiliated by his friends because of the low scores he received in the trial exams. He had had constant seizures for several weeks and he did not want to come to school. His mother also told about the negative situation at home in tears”* (Female, 6), *“I noticed that a student who was exposed to the traumatic death of a relative (Female, 2), was exposed to parental violence and also exhibited violent behaviors at school, he was constantly inflicting violence on his friends”* (Female, 9), *“I witnessed my student being physically and emotionally abused by his family”* (Female, 71).

Trauma Intervention. How teachers have intervened in traumatic experiences so far has also been assessed in the study. Except for psychotherapy, interventions such as psychoeducation, psychological first aid, and referral to a specialist were indicated in this context. For example, *“I did not take any action because I did not receive psychological first aid training”* (Female, 75), *“I conveyed the matter to the Guidance Service because I did not know the subject”* (Male, 80), *“I referred to the school counselor”* (Male, 66), *“I talked to the student’s family and explained the situation”* (Female, 54), *“I referred the student to other institutions”* (Female, 9), *“I referred the student to the guidance service”* (Female, 7), *“Firstly, I provided psychological first aid support and then I directed him to the guidance service”* (Male, 16). However, it was also seen that the teachers who were supposed to help the students who had a crisis after the traumatic experience themselves had a crisis and were affected by the event. For example, *“I left the traumatized student and tried to calm myself down, but it did not work”* (Female, 2), *“When I saw the crisis the student was in, I was afraid and ignored the student’s request for help”* (Female, 71), *“I have never intervened so far, I have avoided, I have suppressed”* (Female, 19). On the other hand, it was also found that some teachers intervened in the incident directly and even performed preventive work. For example, *“In an incident of violence involving the students of our school and resulting in the benefit of seven people, we noticed the situation and reported it to the administration before this incident took place. The administration also reported the situation to the police, but we still could not prevent the incident. After the incident, we talked to the parents and tried to ensure the safety of the students”* (Male, 85), *“I removed the people at the scene, started to take control, and started talking to the student to stay in the moment”* (Female, 28).

Effects of Trauma on Teacher’s Life Functions

Effect on Mental Health and Social Relationships. Teachers reported reactions such as emotional exhaustion, shock, fear, weakness, guilt, brooding, emotional pain, depersonalization, and anxiety when dealing with students’ traumas. Teachers also reported the following regarding the psychological effects of the traumas they faced on them. *“I am constantly worried about what will happen at school today”* (Male, 85), *“The traumas I faced exhausted me both emotionally and psychologically. I started having nightmares at night”* (Female, 4), *“I still feel fear and anxiety when I think of it”* (Female, 2). The teachers said that they felt the need for counseling, support, and information after being exposed to the reports and negative behaviors of the students affected by traumas. For example, *“I read a book, watched a movie to forget the event, but when I was idle, it would always come to my mind and it would make me unhappy. I went to a consultant as a last resort”* (Female, 74), *“I tried to forget the incident, but somehow it kept replaying in my memory. Then I received support from a mental health specialist about my experiences”* (Male, 25). On the other hand, the teachers also said that they were affected by the events mentally and this affected them negatively both mentally and in terms of social relations. For example, *“I was very touched spiritually and did not want to talk to anyone for days”* (Female, 7), *“I had trouble concentrating for a long time. When I was at school, my mind was always busy with that event”* (Female, 6). Participants also mentioned that their social relations were greatly affected by this during the process of encountering and helping students who were affected by traumas. *“Of course, seeing the events negatively affects our social life. We can be under the influence of the event for a few days and this affects our adaptation to social life”* (Female, 75), *“I was unhappy because of the trauma I faced at school and this started to reflect on both my family and my social relationships”* (Female, 4), *“I have a negative psychological atmosphere, I am unhappy in my social relationships”* (Male, 81), *“I started to withdraw, meeting people and spending time with them became a fear for me”* (Female, 74), *“The people around me trying to calm me down made me more crisis and I remember that I gave sudden reactions to those around me”* (Female, 2).

Effect on Academic Performance. Teachers said that the behaviors of traumatized students affected their ability to engage in effective and confident behavior management and their academic performance negatively and even create a domino effect. *“I am afraid of going to school. I cannot be productive during the classes”* (Male, 85), *“The events that I experienced keep my mind busy all the time, I have difficulty in continuing my profession”* (Male, 80), *“The negative events experienced by my students disrupted both my focus on the lesson and the motivation of my students. Other students who heard about the events were similarly affected negatively. Especially regarding the day of the incident, we cannot get efficiency from the education, because our mind is always on the incident”* (Female, 75), *“My former efficiency in the course has decreased, my motivation has decreased, I had difficulty focusing on my work for a while because I was emotionally affected. Teaching is a profession that requires energy, and my energy was exploited in other ways, which inevitably affected me in academic terms”* (Female, 9).

Barriers to Trauma Intervention

Lack of Teacher Training. The teachers also stated that they were incapable of intervening in students' traumas, and they had limited training in school-wide critical incident response training and trauma knowledge. They gave the following answers regarding the teachers' lack of training in trauma intervention. *“Unfortunately, I do not think I have enough equipment and experience in this regard”* (Male, 8), *“It depends on the type of trauma, but in general, I do not think I have enough equipment (training) on this subject”* (Male, 80). Teachers also expressed a lack of understanding of trauma and trauma-induced behaviors and difficulties with the realities of traumatized students. *“Our biggest shortcoming is our lack of psychological first aid training as teachers. On the other hand, we have deficiencies in school psychological counselors in controlling the events and in informing other teachers”* (Female, 75), *“As a teacher, I cannot say that I am equipped about traumas”* (Male, 66), *“Unfortunately, I do not have enough equipment, because I do not have any training in this field, but I think that training must be received”* (Female, 74).

Lack of Resources. Teachers also claimed that their trauma training level was positively associated with their confidence and effectiveness as teachers, and they felt more confident in supporting trauma-exposed students after the training. *“I do not have training in psychological first aid and I do not have both knowledge and experience in trauma. I need these and I think that when I receive training, I can intervene more effectively in traumatic experiences”* (Male, 80), *“Generally speaking, knowing the existence of clinical solutions and applying individual-centered therapies will provide better results with a low level consciousness”* (Female, 4), *“I think that there must be personnel who will provide security in the school before the events occur, and school psychological counselors must work in every school besides the school nurses”* (Male, 85), *“I do not think I have enough equipment. I do not know how to act in case of any crisis or seizure. I try to get help from other teachers in this regard”* (Female, 75). Teachers said that they needed professional development on traumas as well as training and recorded training such as books, short films, videos, and DVDs. *“As well as providing psychological support, I need books, especially on intervention in traumatic experiences”* (Female, 58), *“We have significant shortcomings in providing free psychotherapy support, especially to poor students with traumas because it is a serious problem for poor students to receive trauma treatment”* (Female, 6).

Lack of Trauma Informed Protocol. Teachers also said that there were deficiencies in school policies to intervene in student trauma. For example, *“The ministry and our school have significant deficiencies in terms of trauma policy, who will intervene in trauma first, what is the function of the teacher, can the teacher intervene in traumas, or is it just school psychological guidance service? I do not know if the advisors are intervening. There must be an explanatory and clear study on this issue”* (Female, 5), *“Informed protocols about trauma must be prepared especially in schools for parents. Conferences and seminars must be organized to inform parents about traumatic experiences. Psychological support must be offered immediately to parents who have a traumatized child”* (Male, 8), *“There are important deficiencies in identifying students who are at risk because of their traumatic experiences, on the one hand, and providing professional assistance support for these students on the other hand”* (Female, 6). On the other hand, it was also stated that the preventive, protective, and remedial system of the school for trauma-informed practices is not operated in due form. *“I think that schools must have trauma-informed protocols within the framework of certain laws and regulations because teachers lack knowledge about traumas”* (Male, 85), *“On the day of the incident, the families of the students came in front of the student and the school. Then, fights started between the parents of the students,*

and the students were involved in the situation. We could not protect our students. I do not know what kind of intervention must be made in such a situation” (Male 85).

Recommendations for the Future

Teachers suggested that more things must be done to help teachers in trauma responses, and trauma-related education and training will help in dealing with traumatized students in classrooms. For example, *“I think that teachers must be trained by experts on trauma, and students who are undergraduates in the teaching profession must be taught courses on trauma and its intervention” (Male, 85), “Symposiums can be organized, informative booklets and magazines can be published, and informative short videos can be released by establishing a commission consisting of experts and experienced people in this field” (Male, 80), “I think that the Ministry must provide all teachers with psychological first aid, psychoeducation, and crisis intervention training on traumas” (Female, 75), “I would recommend that all teachers receive training about traumas to better support students and psychologists must take part as well as school counselors” (Female, 58), “In-service training on this subject must be made widespread” (Male, 66), “In-service training must be organized and mental health screenings must be performed at schools regularly by specialists to determine the mental status of students” (Female, 74), “Seminars on traumas can be given in schools, and meetings can be held at regular intervals to raise awareness of parents and teachers in this regard” (Female, 9).*

Discussion

This study aimed to explore teachers' knowledge, experience, training, and school policy needs related to student trauma. Teachers expressed their views on different responses to student trauma, different levels of training, policies regarding trauma-informed practices, and suggestions for the future of their colleagues. On the other hand, barriers and shortcomings to the success of trauma interventions by teachers in school settings were also highlighted. In this context, research examining a child's trauma and school staff's (i.e. teachers') experiences in defining trauma, identifying intervention needs and dealing with traumatised students was found to be lacking. However, the results of this study showed that teachers experience significant deficits in identifying student traumas, providing the necessary resources (teacher training and other resources) for trauma intervention, managing their mental processes, and providing the necessary assistance to students when they encounter traumatic experiences (Alisic, 2012).

The first outcome obtained in the present study was that teachers had limited knowledge about traumas and the difficulties they experienced in their interventions associated with traumas. Considering these, it can be argued that the most basic problem of teachers is that they do not have enough equipment for traumas during their undergraduate education and after they start their profession. Trauma knowledge is defined as knowing about traumatic events such as domestic violence, motor vehicle accidents, loss of a loved one, peer bullying, cyberbullying, and natural disasters. It was seen that schools also deal with crises, disasters, and other trauma-related issues, but the types of crisis or trauma students experience and teachers lack the trauma knowledge they need to best serve their traumatized students (Fu & Underwood, 2015). In some previous studies, consistent with the findings of the current study, it was reported that teachers and schools did not have enough knowledge about traumas (Overstreet & Chafou Leas, 2016), which intervenes student traumas difficult (Phifer & Hull, 2016). Although there are various support systems such as parents, teachers, and school counselors for children immediately after traumas, previous studies showed that there are inconsistencies in children's use and satisfaction with these support networks and services (Buckley, Holt & Whelan, 2007). The main reason for this is that teachers in general are poorly equipped and have not received adequate training on the subject of trauma (Reinke et al., 2011). Research continues to show that teachers are not yet prepared to adequately and comprehensively support students affected by trauma, despite the growing international interest and development of trauma-informed educational practices. This lack of preparedness has been reported to be even more pronounced among teachers and even among new graduates and pre-service teachers (Brown et al., 2020).

As a result, it can be argued that the fact that teachers do not have sufficient knowledge and equipment about traumas prevents the accurate and effective implementation of trauma interventions.

Another result obtained in the study was that student traumas negatively affect teachers' mental health, retardation in social relations, declines in academic performance, and deterioration in life functions. Teachers are exposed to various traumatic events during their daily work with children in schools. It is already known

that secondary exposure to traumatic events has significant impacts on teachers as the effects of exposure to these events become clear and schools have to learn more about traumas (e.g., the teacher and the school who have to learn the details of an abuse event or the details of a suicide event). According to the findings of the study, traumatic experiences (e.g., domestic violence, divorce, separation, and death) are the events that teachers are most exposed to. For this reason, it was found that teachers' apparent lack of confidence and knowledge about student traumas caused them to have secondary traumatic stress disorders (Berger, Abu-Raiya & Benatov, 2016). The results of previous studies that teachers exposed to traumatic experiences of students show academic regression, destructive behavior, and PTSD symptoms (Stein et al., 2003) also overlap with the finding of the present study. It was reported in another study that the teachers affected by the traumas of the students showed emotional exhaustion and fatigue behaviors, were disconnected from the students and were indifferent to them, and reported emotional burn-out, depersonalization, and decreased personal success, affecting their work performance and personal well-being, professional inadequacies, and problems in attending school (Leiter and Maslach, 2017; Skaalvik and Skaalvik, 2010). The main reason why teachers are so intensely affected by the traumas of their students may be that they do not have enough information on traumas and the traumas they face today are affected by their past traumas and they have difficulty in managing the spiritual process occurring because of this. It is stated in the literature that recent traumas (i.e., experiencing traumas in person, seeing traumatic experiences, and hearing about traumatic experiences) might trigger the traumas that the individual experienced in the past, and for this reason, although the individual seems to act under the influence of the current trauma the present trauma traces the past. A study supporting our findings (Eddy et al., 2020) states that the behavioral and mental health problems of children in schools inherently affect the mental health of teachers. In fact, approximately 30 per cent of young people with emotional and behavioral disorders show symptoms of post-traumatic stress (Mueser & Taub, 2008), which suggests that teachers who work with pupils may be more likely to be working with traumatized young people.

Another result obtained in the study was the obstacles experienced by teachers in intervening in traumas. Barriers to trauma intervention include the teacher's lack of trauma-related training, the lack of resources to consult in the trauma process, and the school's Lack of Trauma Informed Protocol. Recommendations included more training activities, trauma policies, and processes, access to staff and student counseling, and teacher information. It is stated that the trauma processes and frameworks in schools and the educational deficiencies and uncertainties of school mental health staff, teachers, and student traumas hinder the planned interventions for traumas (Alisic, 2012). Despite this fact, it was found that teachers intervene and provide mental health interventions to students who have problems, including traumas (Franklin, Kim, Ryan, Kelly & Montgomery, 2012). It was determined that these teachers generally intervene even though they are inadequately equipped and receive insufficient training in the intervention of childhood traumas (Reinke, Stormont, Herman, Puri & Goel, 2011). It's consistent with previous research that teachers experience barriers, such as lack of training and resources related to trauma, when intervening with students experiencing trauma. However, according to Alisic (2012), teachers who have more experience and training in trauma are more confident and have more knowledge about how to deal with trauma. However, such teachers are in the minority, with the majority of teachers reporting a lack of training and experience in dealing with trauma and in ongoing classroom management.

The limited number of studies conducted on teachers' trauma knowledge and trauma training, and the specific findings of this study, support the need for increased awareness and trauma training in the profession of teachers. Teachers can support their future colleagues by developing and integrating teaching materials about working with traumatized students into their current programs. It is reported in some studies that students can integrate issues associated with student traumas, such as lifelong development, crisis and trauma management, and family systems, or by offering in-service seminars and/or workshops in this regard (Rumsey, McCullough & Chang, 2020).

Another barrier to trauma intervention is the school's lack of trauma-informed protocols. Students who have a history of trauma may have difficulty controlling their emotions when exposed to trauma reminders and may even become physically aggressive and break the rules. School policies without trauma knowledge may not be able to address these issues and instead students who are exposed to trauma reminders and who become aggressive because of it may be suspended or subject to harsh or punitive reactions such as expulsion from school. Because the school has targets associated with safety on campuses, strict enforcement of these policies

might cause undesirable consequences, such as higher dropout rates or more dropouts of schoolchildren into the juvenile justice system. Some previous studies report that the lack of trauma-informed protocols is an important factor in teachers' intervention to traumas and it is critically important to have trauma-informed models within existing multi-level, school-based support systems to increase the delivery and accuracy of trauma-sensitive policies and practices in schools (Plumb, Bush & Kersevich, 2016; Reinbergs & Fefer, 2018). Although there are various frameworks for trauma-informed schools (Cole et al., 2013; Wisconsin Department of Public Instruction, 2013), empirical studies have not identified the factors that cause the adoption, successful implementation, and maintenance of trauma-informed approaches. However, initial reports from uncontrolled studies of trauma-informed schools reported drastic decrease rates in of expulsions (Stevens, 2012). However, it is still not clear (a) what specific elements of trauma-informed schools may have contributed to these changes, and (b) what short-term consequences (e.g., changes in classroom management approaches, changes in school discipline policies) are.

The participants made various recommendations to the authorities who are responsible for education and training (Higher Education Institutions and the Ministry of National Education) for their colleagues who have just started or will start their profession regarding the intervention of students exposed to traumas. Firstly, it was emphasized that as well as teaching the courses on trauma intervention during the undergraduate period, newly appointed teachers must receive training. Similarly, it was suggested that teachers, who are professionals in trauma intervention, organize meetings at regular intervals to receive seminars, and in-service training at schools, and to raise awareness among parents and teachers. The results were that expert support regarding student traumas was lacking, but when teachers were able to consult with more experienced colleagues, this resulted in improved strategies and more adaptive school responses to student traumas. It was emphasized that this result must also be assessed in light of studies that emphasize the inadequacies of teacher knowledge and education about student traumas and classroom management (Alisic, 2012; Howard, 2018). For this reason, the recommendations of this study focus on more general training and feedback for teachers, more specialized training and individualized counseling for school mental health staff, and whole-school graded approaches to training and supervision for the staff.

Results

The traumatic experiences that teachers encounter most are; harassment, abuse, peer bullying, violence at school, accidents, separation-divorce of parents, disappearances and deaths, domestic violence.

The teachers' lack of knowledge and skills related to trauma and trauma (psychological first aid, psychoeducation, crisis intervention, etc.) made it difficult to intervene in trauma.

Traumatic experiences at school, psychological problems such as emotional exhaustion, fear, helplessness, guilt, deep contemplation, emotional pain, and situations that affect academic performance such as inability to be productive in the lesson, difficulty in maintaining the profession, professional depersonalization.

The most important issues preventing teachers' intervention in trauma were identified as the lack of training of teachers on trauma, lack of resources, and the lack of protocols of schools regarding trauma.

Limitations

A limitation of the present study was that it was based on self-report measurements. Self-preservation and enhancement motives and potential self-deception and limited memory problems might have affected the reliability of the self-report measurements (Robins et al., 2009). The teachers might have answered the questions according to how they felt that day, rather than taking them as a whole. Participants might also have answered the questions in a socially desirable, self-sustaining, or self-improving manner.

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References

- Alisic, E. (2012). Teachers' perspectives on providing support to children after trauma: A qualitative study. *School Psychology Quarterly, 27*(1), 51–59. <https://doi.org/10.1037/a0028590>.
- Alisic, E., Bus, M., Dulack, W., Pennings, L., & Splinter, J. (2012). Teachers' experiences supporting children after traumatic exposure. *Journal of Traumatic Stress, 25*, 98–101. <https://doi.org/10.1002/jts.20709>.
- Attride-Stirling, J. (2001). Thematic networks: an analytic tool for qualitative research. *Qualitative research, 1*(3), 385–405.
- Barrett, D. (2020). Dreams about COVID-19 versus normative dreams: trends by gender. *Dreaming 30*, 216–221. doi: 10.1037/drm0000149
- Berger, E. (2019). Multi-tiered approaches to trauma-informed care in schools: A systematic review. *School Mental Health, 11*, 650–664.
- Berger, E., Bearsley, A., & Lever, M. (2021). Qualitative evaluation of teacher trauma knowledge and response in schools. *Journal of Aggression, Maltreatment & Trauma, 30*(8), 1041–1057.
- Berger, R., Abu-Raiya, H., & Benatov, J. (2016). Reducing primary and secondary traumatic stress symptoms among educators by training them to deliver a resiliency program (ERASE-Stress) following the Christchurch earthquake in New Zealand. *The American Journal of Orthopsychiatry, 86*(2), 236–251. <https://doi.org/10.1037/ort0000153>.
- Birks, M., & Mills, J. (2014). Quality in qualitative research. *Qualitative methodology: A practical guide*, 221–236.
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3*(2), 77–101.
- Brown, E. C., Freedle, A., Hurless, N. L., Miller, R. D., Martin, C., and Paul, Z. A. (2020). Preparing teacher candidates for trauma-informed practices. *Urban Educ. (Beverly Hills, Calif.) 4*, 662–685. doi: 10.1177/0042085920974084
- Brown, S. M., Baker, C. N., & Wilcox, P. (2012). Risking connection trauma training: A pathway toward trauma-informed care in child congregate care settings. *Psychological Trauma: Theory, Research, Practice, and Policy, 4*, 507–514. <https://doi.org/10.1037/a0025269>
- Buckley, H., Holt, S., & Whelan, S. (2007). Listen to me! Children's experiences of domestic violence. *Child Abuse Review, 16*(5), 296–310. <https://doi.org/10.1002/car.995>
- Cole, S. F., Eisner, A., Gregory, M., & Ristuccia, J. (2013). Creating and advocating for trauma-sensitive schools. Massachusetts Advocates for Children. Retrieved from <http://www.traumasensitiveschools.com>
- Courtois, C. A., & Ford, J. D. (Eds.). (2009). *Treating complex stress disorders: An evidence-based guide*. The Guilford Press
- Cronholm, P. F., Forke, C. M., Wade, R., Bair-Merritt, M. H., Davis, M., Harkins-Schwarz, M., Pachter, L. M., & Fein, J. A. (2015). Adverse childhood experiences: Expanding the concept of adversity. *American Journal of Preventive Medicine, 49*(3), 354–361. <https://doi.org/10.1016/j.amepre.2015.02.001>
- Derluyn, I., Mels, C., & Broekaert, E. (2009). Mental health problems in separated refugee adolescents. *Journal of Adolescent Health, 44*(3), 291–297.
- Dünya Sağlık Örgütü (2022), The Effects of Trauma and Violence on Children and Adolescents. <https://www.afro.who.int/news/trauma-among-children-who-are-victims-violence>
- Dyregrov, K. (2009). The important role of the school following suicide in Norway. What support do young people think that school could provide? *Omega (Westerport), 59*(2), 147–161. <https://doi.org/10.2190/om.59.2.d>
- Eddy, C. L., Huang, F. L., Cohen, D. R., Baker, K. M., Edwards, K. D., Herman, K. C., & Reinke, W. M. (2020). Does teacher emotional exhaustion and efficacy predict student discipline sanctions? *School Psychology Review, 49*(3), 239–255.
- Felitti, V. J., & Anda, R. F. (2010). *The relationship of adverse childhood experiences to adult medical disease, psychiatric disorders and sexual behavior: Implications for healthcare*. In R. A. Lanius, E. Vermetten,

- & C. Pain (Eds.), *The impact of early life trauma on health and disease: The hidden epidemic* (pp. 77–87). Cambridge: Cambridge University Press
- Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. *American Journal of Preventive Medicine*, *14*(4), 245–258.
- Fu, C., & Underwood, C. (2015). A meta-review of school-based disaster interventions for child and adolescent survivors. *Journal of Child and Adolescent Mental Health*, *27*(3), 161–171. <https://doi.org/10.2989/17280583.2015.1117978>
- Goldenson, J., Kitollari, I., & Lehman, F. (2021). The relationship between ACEs, trauma-related psychopathology and resilience in vulnerable youth: Implications for screening and treatment. *Journal of Child & Adolescent Trauma*, *14*, 151-160.
- Green, B. L., Saunders, P. A., Power, E., Dass-Brailsford, P., Schelbert, K. B., Giller, E., et al. (2015). Trauma-informed medical care: A CME communication training for primary care providers. *Family Medicine*, *47*, 7.
- Hamre, B. K., & Pianta, R. C. (2001). Early teacher-child relationships and the trajectory of children's school outcomes through eighth grade. *Child Development*, *72*, 625–638. <https://doi.org/10.1111/1467-8624.00301>
- <https://doi.org/10.1007/s12310-016-9174-3>
- Jaycox, L. H., Langley, A. K., Stein, B. D., Wong, M., Sharma, P., Scott, M., et al. (2009). Support for students exposed to trauma: A pilot study. *School Mental Health*, *1*(2), 49–60. <https://doi.org/10.1007/s12310-009-9007-8>.
- Kataoka, S., Jaycox, L. H., Wong, M., Nadeem, E., Langley, A., Tang, L., & Stein, B. D. (2011). Effects on school outcomes in low-income minority youth: Preliminary findings from a community-partnered study of a school trauma intervention. *Ethnicity & Disease*, *21*(3).
- Kessler, R. C., McLaughlin, K. A., Green, J. G., Gruber, M. J., Sampson, N. A., Zaslavsky, A. M., ... Williams, D. R. (2010). Childhood adversities and adult psychopathology in the WHO World Mental Health Surveys. *British Journal of Psychiatry*, *197*, 378–385. <http://dx.doi.org/10.1192/bjp.bp.110.080499>
- Kira, I. A., Templin, T., Lewandowski, L., Ramaswamy, V., Ozkan, B., Abou-Mediane, S., ... & Alamia, H. (2011). Cumulative tertiary appraisals of traumatic events across cultures: Two studies. *Journal of Loss and Trauma*, *16*(1), 43-66.
- Leiter, M. P., & Maslach, C. (2017). *Burnout and engagement: Contributions to a new vision* [Editorial]. *Burnout Research*, *5*, 55–57. <https://doi.org/10.1016/j.burn.2017.04.003>
- McClain, M. P. (2021). *Teacher candidates' perceptions of preparedness of teaching students who experience trauma*. *J. Teach. Educ. Educ.* *10*, 5–23.
- McLaughlin, K. A., Koenen, K. C., Friedman, M. J., Ruscio, A. M., Karam, E. G., Shahly, V., & Kessler, R. D. (2014). Subthreshold posttraumatic stress disorder in the World Mental Health (WMH) surveys. *Biological Psychiatry*, *77*(4), 375–384. <https://doi.org/10.1016/j.biopsych.2014.03.028>
- Mendelson, T., Tandon, S. D., O'Brennan, L., Leaf, P. J., & Ialongo, N. S. (2015). Brief report: Moving prevention into schools: The effect of a trauma-informed school-based intervention. *Journal of Adolescence*, *43*, 142–147. <https://doi.org/10.1016/j.adolescence.2015.05.017>
- Morrow, S. L. (2005). Quality and trustworthiness in qualitative research in counseling psychology. *Journal of counseling psychology*, *52*(2), 250.
- Mueser, K. T., & Taub, J. (2008). *Trauma and PTSD among adolescents with severe emotional disorders involved in multiple service systems*. *Psychiatric Services* (Washington, D.C.), *59*(6), 627–634. <https://doi.org/10.1176/ps.2008.59.6.627>
- Nagasa, K. (2014). Perspectives of Elementary Teachers on Refugee Parent-Teacher Relations and the Education of Their Children. *Journal of Educational Research and Innovation*, *3*(1). <http://digscholarship.unco.edu/jeri/vol3/iss1/1>
- Norris, F. H., & Sloan, L. B. (2014). *Epidemiology or trauma and PTSD*. In M. J. Friedman, T. M. Keane, & P. A. Resick (Eds.), *Handbook of PTSD: science and practice* (2nd ed., pp. 100–120). New York: Guilford.
- Olf, M. (2013). *The post-traumatic stress disorder*. *Nederlands Tijdschrift Voor Geneeskunde*, *157*(26), A5818-A5818.

- Overstreet, S., & Chafouleas, S. M. (2016). Trauma-informed schools: Introduction to the special issue. *School Mental Health, 8*, 1-6. <https://doi.org/10.1007/s12310-016-9184-1>
- Papadatou, D., Metallinou, O., Hatzichristou, C., & Pavlidi, L. (2002). Supporting the bereaved child: Teacher's perceptions and experiences in Greece. *Mortality, 7*(3), 324-339. <https://doi.org/10.1080/1357627021000025478>
- Patton, M. Q. (1990). *Qualitative evaluation and research methods*. SAGE Publications, inc.
- Pelayo, E. (2020). *Trauma-informed school libraries: A space for all*. *Knowledge Quest* 48, 50-55.
- Perfect, M., Turley, M., Carlson, J. S., Yohannan, J., & Gilles, M. S. (2016). School-related outcomes of traumatic event exposure and traumatic stress symptoms in students: A systematic review of research from 1990 to 2015. *School Mental Health*. <https://doi.org/10.1007/s12310-016-9175-2>
- Phifer, L. W., & Hull, R. (2016). Helping students heal: Observations of trauma-informed practices in the schools. *School Mental Health, 8*(1), 201-205. <https://doi.org/10.1007/s12310-016-9183-2>
- Porche, M. V., Costello, D. M., & Rosen-Reynoso, M. (2016). Adverse family experiences, child mental health, and educational outcomes for a national sample of students. *School Mental Health*.
- Prinstein, M. J., La Greca, A. M., Vernberg, E. M., & Silverman, W. K. (1996). Children's coping assistance: How parents, teachers, and friends help children cope after a natural disaster. *Journal of Clinical Child Psychology, 25*, 463-475
- Reed, R., Fazel, M., Jones, L., Panter-Brick, C., & Stein, A. (2012). *Mental health of displaced and refugee children resettled in low-income and middle-income countries: Risk and protective factors*. *The Lancet, 379*(9812), 250-265.
- Reinke, W. M., Stormont, M., Herman, K. C., Puri, R., & Goel, N. (2011). Supporting children's mental health in schools: Teacher perceptions of needs, roles, and barriers. *School Psychology Quarterly, 26*, 1-13. <https://doi.org/10.1037/a0022714>
- Rodger, S., Bird, R., Hibbert, K., Johnson, A. M., Specht, J., and Wathen, C. N. (2020). Initial teacher education and trauma and violence informed care in the classroom: Preliminary results from an online teacher education course. *Psychol. Sch. 57*, 1798-1814. <https://doi.org/10.1002/pits.22373>
- Rolfsnes, E. S., & Idsoe, T. (2011). School-based intervention programs for PTSD symptoms: A review and meta-analysis. *Journal of Traumatic Stress, 24*, 155-165. <https://doi.org/10.1002/jts.20622>
- Rothi, D. M., Leavey, G., & Best, R. (2008). On the front-line: Teachers as active observers of pupils' mental health. *Teaching and Teacher Education, 24*(5), 1217-1231. <https://doi.org/10.1016/j.tate.2007.09.011>
- Rumsey, A. D., McCullough, R., & Chang, C. Y. (2020). Understanding the secondary exposure to trauma and professional quality of life of school counselors. *Professional School Counseling, 24*(1), 2156759X20973643.
- Skaalvik, E. M., & Skaalvik, S. (2010). Teacher self-efficacy and teacher burnout: A study of relations. *Teaching and Teacher Education, 26*(4), 1059-1069. <https://doi.org/10.1016/j.tate.2009.11.001>
- Stein, B. D., Jaycox, L. H., Kataoake, S. H., Wong, M., Elliott, M. N., & Fink, A. (2003). A mental health intervention for school children exposed to violence: A randomized controlled trial. *Journal of the American Medical Association, 290* (5), 603-611. <https://doi.org/10.1001/jama.290.5.603>
- Sullivan, A. L., & Simonson, G. R. (2016). A systematic review of school-based social- emotional interventions for refugee and war-traumatized youth. *Review of Educational Research, 86*(2), 503-530. <https://doi.org/10.3102/0034654315609419>
- Szente, J., Hoot, J., & Taylor, D. (2006). Responding to the special needs of refugee children: Practical ideas for teachers. *Early Childhood Education Journal, 34*(1), 15-20. <https://doi.org/10.1007/s10643-006-0082-2>
- Tashakkori, A., & Teddlie, C. (2003). *Handbook on mixed methods in the behavioral and social sciences*.
- Terr, L. C. (1991). Childhood traumas: An outline and overview. *American Journal of Psychiatry, 148*(1), 10-20. <https://doi.org/10.1176/ajp.148.1.10>
- Weems, C. F., Scott, B. G., Taylor, L. K., Cannon, M. F., Romano, D. M., & Perry, A. M. (2013). A theoretical model for continuity in anxiety and links to academic achievement in disaster-exposed school children. *Development and Psychopathology, 25*(3), 729-737. <https://doi.org/10.1017/S0954579413000138>

Erratum Note

It has been declared by the corresponding author that in the footnote explanation of the article titled "Öztürk, N. & Kutlu, M. (2017). Turkish Adaptation of the Friendship Quality Scale: Validity and Reliability Study," published in Volume 7, Issue 48 of the Turkish Psychological Counseling and Guidance Journal in 2017 [<https://dergipark.org.tr/tr/pub/tpdrd/issue/41239/498117>], it was inadvertently omitted to include the text stating that the study is a part of the first author's doctoral thesis. The authors apologize to the readers for this mistake. The correction made in the footnote explanation of the mentioned article is presented below.

Correction:

Footnote: This article is a part of a doctoral thesis accepted by the Institute of Educational Sciences at İnönü University in February 2016.

Türk Psikolojik Danışma ve Rehberlik Dergisinin 2017 yılı 7 cilt 48. sayısında yer alan Öztürk, N. ve Kutlu, M. (2017). Arkadaşlık niteliği ölçeği'nin Türkçe uyarlaması: Geçerlik ve güvenirlik çalışması, Türk Psikolojik Danışma ve Rehberlik Dergisi, 7(48),127-144. <https://dergipark.org.tr/tr/pub/tpdrd/issue/41239/498117> referanslı makalenin dipnot açıklamasında çalışmanın 1. yazarın doktora tezinin bir kısmından oluşmaktadır metninin yazılmasının sehven unutulduğu sorumlu yazar tarafından beyan edilmiştir. Yapılan bu hatadan ötürü yazarlar, okuyuculardan özür dilemektedir. İlgili makalenin dipnot açıklamasında yapılan düzeltme aşağıda sunulmuştur.

Düzeltilme:

Dipnot: Bu makale İnönü Üniversitesi Eğitim Bilimleri Enstitüsü Şubat, 2016 tarihinde kabul edilen doktora tezinin bir kısmından oluşmaktadır.

Türk Psikolojik Danışma ve Rehberlik Dergisi Editörlüğüne



Türk Psikolojik Danışma ve Rehberlik Dergisinin 2017 yılı 7 cilt 3. sayısında yer alan Nilgün Öztürk ve Mustafa Kutlu tarafından yazılan “Arkadaşlık Niteliği Ölçeği’nin Türkçe Uyarlaması: Geçerlik ve Güvenirlik Çalışması” başlıklı makalenin dipnot açıklamasında 1. yazarın doktora tezinin bir kısmından oluşmaktadır metninin yazılması sehven unutulmuştur.

Düzeltilme metninin ekteki şekliyle makaleye dahil edilmesi ve bahsi geçen düzeltmenin yapılması konusunda gereğini arz ederim.

16.08.2023

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