

Self Disclosure and Psychological Symptom in Adolescent Sampling: Regression Analysis

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Abstract

The aim of this study is to investigate the relationship between self-disclosure and psychological determinants with regression analysis. The research was conducted on 294 high school students. The participants were given a self-disclosure scale and a short symptom inventory. The results of regression analysis showed a significant correlation between self-disclosure and psychological determinants. There are negative meaningful relations between self-disclosure and psychological symptom. According the results, anxiety which is one of the sub-dimensions of psychological symptom is the most powerful predictor of self-disclosure level. The findings of the study were discussed in the context of the literature.

Keywords: Self Disclosure, Psychological Symptom, Regression.

Introduction

Self-disclosure has an important role on developing close links and continuing psychological well-being (Collins & Miller, 1994). Individual's self-disclosure about the stressful experiences has a positive effect on psychological well-being by stimulating the positive feelings (Kennedy-Moore & Watson, 2001). Self-disclosure provides to escape from negative thoughts, struggle with negative feelings and thoughts, being a more compatible person (Frattaroli, 2006). Feelings are the most important experiences of a person. It can be said that feelings have an important role on interpersonal relations and mental health (Tutarel-Kışlak & Göztepe, 2012). Improvements on feeling adjustment theories (Gross, 1998a, 1998b) and benefits of expressing the feeling on mental health (Lepore & Smyth, 2002; Pennebaker, 1995), reveal the importance of individual differences on expressing one's feelings. Expression forms of people who grow up together with the same culture and learn the same social rules can differentiate each other and some people feel comfortable while expressing their feelings, some people can behave timidly while expressing their feelings in social environments. Clinical theory on expressing feelings eases the psychological issues according to Freud (Kahn, Barr & Schneider, 2008). Freud argues that suppression can cause the problems like anxiety and depression (Corey, 2005). Similarly, theoreticians in psychology reveal that suppression or concealing feelings are harmful for both psychological and physical health. Unvoiced feelings were thought as deficient works and these were determined as negative feelings like anger, grudge and indignation. One of the most dangerous unvoiced feelings is keeping indignation dark in Gestalt approach. This can cause guilt feelings. There are unfinished business and self-recrimination under the psychological illnesses (Kuzgun, 2016). Besides, psychodynamic and humanistic oriented theoreticians emphasize the role of expressing feelings on protecting physical and psychological health and because of this reason they consider self-disclosure and assisting to express feelings as a treatment instrument (Whelton, 2004). Also, well-being levels of the people who have a tendency to

talk with their feelings benefit more than the people who have a tendency to conceal their feelings, and they have a more positive attitude towards psychological counselor (Kahn & Garrison, 2009).

Suppression affects biological changes in short term and the health in long term; inhibition of feelings can show itself with biological changes. Suppression cause stress over time and form a basis physical and psychological problems (Pennebaker, 1997). When the literature is researched, there are studies on the effect of expressing feelings on psychological symptom. Social anxiety and depression symptom increase as the expression of feelings decreases (Turk, Heimberg, Luterek, Mennin, & Fresco, 2005; Gross & John, 2003). In a similar manner, tendency level of depression, anxiety, low self-esteem and shyness are higher for the people who have a high level of suppression (Ichiyama et al., 1993; Larson & Chastain, 1990). Some studies to increase the level of self-disclosure should be done by parents and schools. By this way, students can be supported to form a strong self-sufficiency (Wei, Russell & Zakalik, 2005).

Psychological Symptom

Individuals have sometimes difficulties in various environmental situations and have adaptation problems. This type of problems affect the individuals' all the living conditions and efficiency. These revealers of psychological symptom are the physical, psychological and behavioral symptoms that generated as a result of a general anxiety (Kerimova, 2000). Psychological symptoms were classified as somatization, depression, anxiety, hostility and negative individuality in related literature. Somatization is defined as a disorder that reveals with bodily complaints and symptom cannot be explained with physical reasons (Özenli et al., 2009). The common trait of the people who have somatization symptom is that they give bodily stress answers and sensory stimulus rather than emotional and cognitive. Somatization is expression of depression and psychosocial stress with physical symptom (Kesebir, 2004: 14). Depression: It is characterized with collapse in affectivity, listlessness, reluctance and anhedonia, hypo kinesis, pessimism, valuelessness, guiltiness, regret and also disorder at psychophysiological functions such as sleep, appetite and sexual anorexia (Küey, 1998: 5). Anxiety is the defining characteristic of generalized anxiety disorder (Sevinçok, 2001). People who have generalized anxiety disorder always have anxiety for their future, now, possible disasters for their beloved ones and related to the other aspects of the life. The person who has generalized anxiety disorder is anxious even if everything is all right. These people have a limitless imagination for sorrowful things; when a source of distress ends a new one is found and people around them lose their patience at last (Geçtan, 2003: 189). Hostility reveals in the situations like inhibition (anger), getting a raw deal, criticism, being underrated. Anger sometimes can be short term, moderate and even useful for the person, sometimes can be severe, intense, continuous and ruinous (Balkaya and Sahin, 2003). Researchers stated that anger is pressed in the situations of expressing of the anger and it is not accepted and then it replaces with depression and anxiety feelings (Erdem et al., 2008). All the feelings and thoughts that individual describes as individuality (Rosenberg, 1986). Negative individuality is the irrational beliefs and automatic negative thoughts. Researches show that family, social circle and teachers have an important effect on teenagers' sense of self. According to Erikson (1968) if children have feeling of inadequacy at schools, where they become skillful for adulthood, they have inferiority complex and develop a negative sense of self. Being happy of a person is depend on not only physical health but also mental health. If a person have mental health, the person try to have positive relations with the other people and establish normal relations generally. In this context, researching the situations which have positive affect on mental health is a necessity. It is detected by researches that self-disclosure develop new friendships and have a positive effect on communication and it decreases breakoff phenomenon and depression (Wei, Russell & Zakalik, 2005). For this reason, it was thought that self-disclosure has a positive

effect on mental health, and with this study, it is aimed to search which sub-dimensions in short symptom inventory are affected by self-disclosure level.

Methodology

Participants

The research was applied with the attendance of 294 high school students. 166 (%56) of the participants are female and 128 (%44) of the participant are male. The students distribution according to classroom level are 85 students are 9th grade (%28, 9) 82 students are 10th grade (%27, 9) 74 students are 11th grade (%25, 2) 53 students are 12th grade (%18).

Measuring Instruments

Self-Disclosure Scale

Turkish adaptation study of self-disclosure scale that was developed by Kahn, Hessling ve Robert (2001) was performed by Arslan (2017). Turkish form of the scale was applied to 333 high school students. Within the scope of scale adaptation study, reliability was analyzed with corrected item analysis total item correlation and confirmatory factor analysis. It is seen that one dimensional model have a good adaptation in the confirmatory factor analyze, which was done for the scale, ($\chi^2=116.05$, $sd=50$, $p=0.00$, $RMSEA=.063$, $NFI=.97$, $NNFI=.97$, $CFI=.98$, $IFI=.98$, $RFI=.95$, $GFI=.94$, and $SRMR=.45$). Reliability co-efficient of the scale was detected as .86. As a result of the analyze, it is detected that the Turkish form of The Self-Disclosure Scale has validity and reliability for the sample group.

Psychological Symptom Scale

Short symptom inventory (CSR) is a frequently used scale for psychopathological evaluation. The adaptation studies of this scale were carried out by Şahin, Durak and Uğurtaş (2002) on a sample on 559 adolescent group. 5 factors were obtained as a result of the applied factor analysis. The reliability coefficients of these sub-scales vary between .70 (depression) and .88 (somatization). Correlation coefficients of sub-scales with other scales vary between .45 and .71. The study also included findings on demographic variables, subscales, and the mean and standard deviation of scores from three global indices.

Results

Table 1. Descriptive statistics and correlations

Variables	1	2	3	4	5	6
Depression	1					
Somatization	,708**	1				
Hostility	,560**	,466**	1			
Negative sense of self	,746**	,588**	,535**	1		
Anxiety	,780**	,638**	,600**	,775**	1	
Self Disclosure	-,164**	-,139*	-,181**	-,234**	-,306**	1
** $p < 0.01$						

It is seen in Table 1 that there are negative meaningful relations between self-disclosure and psychological symptom. As subscales of psychological symptom; depression ($r=-.164$), somatization ($r=-.139$), hostility ($r=-.181$), negative ego ($r=-.234$), anxiety ($r=-.306$). There are the conclusions of multiple regression analysis in Table 2.

Table 2. Summary of Stepwise Multiple Regression Analysis for Variable Predicting Self disclosure

Variables	<i>B</i>	<i>SE_B</i>	β	<i>T</i>	<i>p</i>	<i>R</i>	<i>R</i> ²	<i>F</i>	<i>p</i>
Step 1									
Depression	-.12	.04	-.164	-2.83	.005	.16	.02	8.05	.00
Step 2									
Dep	-.09	.06	-.13	-1.6	.11	.16	.02	.31	.57
Som	-.06	.11	-.04	-.56	.57				
Step 3									
Depression	-.05	.06	-.07	-.82	.40	.19	.03	3.29	.07
Som	-.03	.11	-.02	-.34	.72				
Host	-.18	.10	-.12	-1.8	.07				
Step 4									
Depression	.04	.07	.06	.60	.54	.24	.06	6.71	.01
Som	-.00	.11	-.00	-.07	.94	.33	.11	16.17	
Host	-.13	.10	-.09	-1.27	.20	.00			
Negative sense	-.21	.08	-.22	-2.59	.01				
Step 5									
Dep	.14	.07	.20	1.92	.05				
Som	.05	.11	.03	.47	.63				
Hos	-.03	.10	-.02	-.31	.75				
Negative sense									
Ans	-.40	.10	-.42	-4.02	.00				

As a result of multiple regression analyses, depression get into analyze at first. Depression explains %2 variance of self-disclosure analyze at a meaningful level statistically. At the second step of regression analyze, depression and somatization are analyzed together. As a result of the analyze, %2 variance rate is not change and there is no meaningful difference statistically. At the third step, depression, somatization and hostility are analyzed together. Variance rate is detected as %3 and there is no meaningful difference statistically. At the fourth step, depression, somatization, hostility and negative sense of self analyzed together. As a result of the analyze, it is seen that variance rate of the self-disclosure level is %6. %3 part of the increase is because of negative sense of self and there is a meaningful difference. A the last step of the multiple regression analyze, depression, somatization, hostility, negative sense of self and anxiety analyzed together and it is seen that the variance rate of self-disclosure level is %11. %5 variance rate is from anxiety and there is a meaningful difference. According the results, anxiety, which is one of the sub-dimensions of psychological symptom, is the most powerful predictor of self –disclosure level.

Discussion and Conclusion

At the end of the study, negative relation was found between self-disclosure level and psychological symptom. As self-disclosure level decreases somatization, depression, anxiety, hostility and negative sense of self increase. When an individual does not reveal himself and keep a straight face, an increase can be seen in somatic symptoms. Not expressing of feelings can cause depression, increase in anxiety level, and increase of anger level. Similarly, not expressing of feelings can cause contortion of the individual's sense of self. In the literature review, results that

support the conclusion of the study were encountered. The finding that suppressing of the feelings and thoughts' damage to psychical and mental health is supported by other studies (Mendes et al., 2003; Pennebaker, 1997). As people do not express their feelings, the unexpressed feelings reveal as physical symptom. Low self-disclosure level can cause somatization (King & Emmons, 1990; Traue & Pennebaker, 1993).

If self-disclosure level is low, depression level is high (Wei, Russell & Zakalik, 2005; Turk, Heimberg, Luterek, Mennin, & Fresco, 2005; Gross & John, 1998; Sloan, Strauss & Wisner, 2001). Self-disclosure level was found as related to negative sense of self; as self-disclosure level decreases, negative sense of self increases. Individuals, who have negative sense of self, get the feeling that there is no one to help them. Individuals, who suppress their feelings, get less contact with their peers (Gross and John, 2003). As a result of the study, anxiety which is one of the sub-dimensions of psychological symptom is found as the most powerful predictor of self-disclosure level. It was seen that as self-disclosure level decreases, anxiety level increases. There are researches that support the strong finding in literature (Larson & Chastain, 1990; Turner, Hewstone & Voci, 2007; Kahn & Garrison, 2009). Individuals who express their feeling and have emotional expression are happier and have lower anxiety level (King and Emmons, 1990). Also, individuals who express their feelings have less difficulty in understanding the others' feelings have strong communication skills and high self-confidence and with these characteristics, they have less stress (King, 1998).

Consequently, if self-relevance level is low, psychological symptom level is high. In this context, encouraging individuals to express and show their feelings is quite important. It is thought that this study provides an insight for psychologists and educationists. School counsellors and clinic psychologists can organize activities that provide clients to express their feelings. Interfering when there is a problem is important but doing prevention activities before the problems reveal is more important. In this sense, in guidance services in schools, talking on feelings, organizing guidance activities related to self-relevance, group counselling can assist to prevent psychological disorders. Meanwhile doing activities with parents on expressing feelings is important. This study is done with teenagers. Further studies can be done with different samples. Experimental studies directed to psychoeducation program on expressing feelings can be done. By this way, this study's findings can be more effective with an experimental study.

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