RELATIONSHIP BETWEEN EMOTIONAL DISCLOSURE, TYPE D PERSONALITY, AND PSYCHOLOGICAL WELL-BEING AMONG YOUNG ADULTS

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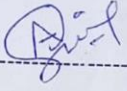
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CERTIFICATE OF APPROVAL

It is certified that the research thesis titled "**Relationship of Emotional Disclosure, Type D-Personality and Psychological Well-Being among Young Adults**" carried out by **Mahak Ali , Reg. No. BSP201039,** under the supervision of **Ms. Asima Munawar,** Capital University of Science and Technology, Islamabad, is fully adequate, in scope and in equality, as research thesis for the degree of BS Psychology.

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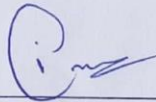
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DECLARATION

It is declared that this is an original piece of my own work, except where otherwise acknowledged in text and references. This work has not been submitted in education and shall not be submitted by me in future for obtaining any degree from this or any other University or Institution.

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ABSTRACT

This cross-sectional study aims to examine the potential advantages of emotional disclosure for individuals with Type D personality traits and their psychological well-being. The study investigated that there is significant positive relationship between emotional disclosure and psychological well-being as well in among a sample of 250 young adults residing in Rawalpindi/Islamabad. The proposed hypotheses were analyzed using the statistical software SPSS. Findings from the study indicated that emotional disclosure was associated with favorable outcomes for individuals with Type D personality, suggesting potential benefits for their psychological well-being. Mental health professionals can consider incorporating emotional disclosure as an effective strategy within their interventions. It is important to note that the cross-sectional design limits the ability to establish causality. Further research utilizing longitudinal designs is warranted to explore the mechanisms underlying these relationships. The results highlight the relevance of emotional disclosure as a valuable tool in promoting psychological well-being for young adults with Type D personality traits.

Keywords : Emotional disclosure , Type D personality , Psychological wellbeing , cross sectional design ,Causality , Mental health professionals ,Potential benefits and potential advantages.

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Chapter 1

INTRODUCTION

"Emotional disclosure, the act of sharing emotions, thoughts, and feelings regarding distressing incidents, has been extensively studied. Research indicates its potential to enhance psychological well-being, particularly noted in individuals exhibiting Type D personality traits (Yazdanfar et al., 2015)." Emotional disclosure (ED) is a term used to describe the therapeutic expression of emotions. This flexible therapy holds potential to be harnessed as a relatively low-cost, simple intervention in certain formats, such as expressive writing (EW) Smyth JM et al. (2002). Its flexibility also means it could be adapted to the specific needs of patients at a palliative stage of disease, for example, by modifying the method used to generate emotional expression (eg, typing or spoken disclosure). ED has long been a critical concept associated with the talk-based psychotherapies pioneered by Freud in the early 1900s. Lepore SJ et al.(2002).

Tasks to induce ED have included writing about positive emotions or future goals, or spoken disclosure. Smyth JM, Pennebaker JW et al.(2008). Moreover, ED is recognised as a fundamental part of other forms of psychotherapy, such as music therapy. Baker FA et al.(2018). In recent times, patients and family members are increasingly turning to blogging, social media and chatroom sites to disclose emotions around their experiences of their illness. Taubert M, Watts G, Boland J, et al.(2014).

High degrees of negative affectivity and social inhibition are traits of the type D personality, and they have been linked to a number of detrimental health effects. However, in patients with chronic heart failure and Chinese people with Type D personalities, respectively, Pedersen et al. (2013) and Jiang et al. (2018) found that

emotional disclosure was related to reduced symptoms of depression and anxiety and increased positive affect.

The impact of emotional disclosure on psychological health, especially in those with Type D personalities, was studied by Denollet et al. in 2006. According to the study, Type D personalities who wrote expressively (a method of expressing their emotions) had lower anxiety levels and higher psychological well-being than a control group. This shows that therapies for emotional disclosure may be helpful for those with Type D personalities.

Emotional suppression, which entails preventing the expression of emotions, is a common trait in type D people. According to Williams et al. (2012), those with Type D personalities who repress their emotions have worse psychological well-being. Individuals with Type D may benefit from emotional disclosure therapies, such as expressive writing or talking about emotions, to interrupt the cycle of emotional repression and improve psychological well-being.

Different mediating variables may have an impact on the link between emotional disclosure, Type D personality, and psychological well-being. Pedersen et al. (2016) investigated the mediating function of self-compassion in this connection and discovered that in people with Type D personalities, self-compassion partially moderated the association between emotional disclosure and psychological well-being. This shows that self-compassion could strengthen the beneficial benefits of emotional disclosure on this population's psychological well-being.

Additionally, contextual circumstances may affect how well emotional disclosure therapies work for people with Type D personalities. Power et al. (2010) looked at how social support affected the link between emotional disclosure and psychological health in Type D diabetics. According to the findings, emotional

openness was linked to increased psychological well-being, especially when people got social support from others. This shows that Type D people may benefit more from emotional disclosure in a supportive social Situation. Porter et al. (2019) also discovered that expressive writing interventions increased psychological wellbeing for up to six months after the session, particularly for Type D personality patients with gastrointestinal cancer and their careers. These findings imply that emotional disclosure might enhance psychological health over time, especially in people with Type D personality features.

Emotional disclosure can be communicated in a variety of ways and take many different shapes. It includes not just spoken communication but also written expression or any other means of expressing one's feelings and views. The success of emotional disclosure can also depend on its quality, including the appropriateness of the expression, the goal, and the intensity of the emotions transmitted, as well as its quantity, including the time, duration, and depth of the disclosure (Cosy, 2003).

Positive and negative indications can also be included in the idea of psychological well-being. Self-esteem, social well-being, and life satisfaction are all positive psychological well-being markers, whereas depression, loneliness, and anxiety are all negative ones. While psychological well-being includes cognitive assessments of one's life, hedonic well-being focuses on the presence of positive emotionality and the absence of negative emotion. In particular for those with Type D personality characteristics, emotional disclosure whether it takes the form of expressive writing or another method of expressing feelings and thoughts can have a major positive impact on psychological well-being. It can lessen the cycle of emotional repression, lessen depressive and anxiety symptoms, boost positive effect, and enhance general wellbeing.

Literature Review

The research will be started by conducting a comprehensive review of literature from different domains relevant to young adults . The aim is to acquire a deep comprehension of emotional disclosure , type D personality and psychological well being among young adults . Further on this literature review will help us in conducting us in our study .

Emotional disclosure

Adolescence is a difficult stage of development, marked by an overwhelming emotional reactivity Adolescents are required to negotiate the developmental milestones, such as emotion understanding and knowledge of socio-cultural norms, in a healthy way as these developmental acquisitions are imperative for the adaptive progression of adolescents' development (Cole, 2014; Spinrad et al., 2006). Deficits in emotion regulation threaten individuals' psychological functioning and make them susceptible to negative sequelae (Gross & Jazaieri, 2014). Impulsive behavior, and increased risk-taking (Kemp et al., 2019; Steinberg, 2005, 2008).

Emotional expression within Muslim culture is a complex interplay of religious beliefs, societal norms, and individual practices. Studies have highlighted the significance of cultural context in shaping emotional disclosure among Muslims (Ahmed & Rahman, 2016; Khan,2018).

Ahmed and Rahman (2016) emphasized the diverse modes of emotional disclosure prevalent in Muslim societies, ranging from communal expressions in religious gatherings to private acts like personal supplication or journaling. This diversity reflects the multifaceted nature of emotional release within these cultures.

In recent times, patients and family members are increasingly turning to blogging, social media and chatroom sites to disclose emotions around their experiences of their illness. (Taubert M & Watts G, 2014).

The existence of numerous formats of ED-based therapies and behaviours complicates the process of exploring if and how such interventions might work. Yet, a clear understanding of the mechanisms linking cause and effect is considered fundamental to the development and study of complex interventions. (Craig P, Dieppe P, Macintyre S, et al., 2019).

In the case of ED, there is unlikely to be a single underlying process, rather a framework of interacting mechanisms (Nicholls S et al., 2009). Mirroring the unclear processes underlying ED, the efficacy of ED-based therapies remains uncertain. In general populations, a metanalysis of 146 studies identified a small but significant positive effect of ED-based interventions on both physical and psychological health outcomes in healthy populations. (Frattaroli J et al., 2006).

It has been suggested that moderators, such as demographic, personality and existing emotional support, are also likely to influence the efficacy of ED-based therapies, highlighting the importance of targeting and tailoring such interventions. (Frattaroli J et al., 2006).

Data from the Behavioral Risk Factor Surveillance System (BRFSS) found that individuals who reported high levels of perceived emotional support were 87% less likely to report current depression (Brinker & Cheruvu, 2017). Moreover, emotionally sustaining relationship experiences in early life impact an individual's health throughout the lifespan (Umberson et al., 2010).

According to social penetration theory, one's emotional disclosure is positively associated with reciprocal emotional disclosure and perceived intimacy with a

conversational partner (Carpenter & Greene, 2016). Based on the computers are social actors (CASA) paradigm, this study argues that social rules in human–human interactions can be applied to human-chatbot interactions (Nass & Moon, 2000) suggesting that the norm of reciprocity would also be valid for artificially generated emotional disclosures. (Reeves & Nass, 1996).

Emotional disclosure is critical to interpersonal communication and is an important strategy in mental health counseling. Effective and timely emotional responses are key to increasing user satisfaction and positively impacting mental health and offer mental health counselors the ability to exchange feelings and meanings with a client (Clark, 2010). Moreover, for counselees with mental health issues, failing to provide emotional support in the early stage can significantly reduce user satisfaction and future help-seeking behavior (Miner et al., 2017).

The interplay between emotional disclosure and psychological well-being has been explored within Muslim contexts. Khan (2018) suggested that utilizing culturally specific methods of emotional expression, such as seeking solace through religious practices, might positively impact mental health among Muslims.

Gender roles significantly influence emotional expression among Muslims. Research by Mustafa (2017) indicated that gender norms often dictate different avenues for emotional disclosure for men and women within Muslim communities. Women might have more socially acceptable opportunities for emotional expression compared to men, who may face greater pressure to maintain emotional restraint in public settings.

Developing effective mental health interventions for Muslim populations requires an understanding of cultural nuances in emotional expression. Ahmed and Rahman (2016) highlighted the need for culturally sensitive approaches that integrate

religious and cultural beliefs when addressing emotional disclosure in mental health interventions. Emotional disclosure, the act of expressing emotions, thoughts, and feelings related to a stressful event, has been found to have positive effects on mental health, as demonstrated in a study by Lepore and Smyth (2002). However, it is important to note that women tend to engage in more emotional disclosure than men, and they also experience more psychological distress, as highlighted by Drapeau et al., (2012).

According to Pennebaker's idea, expressing one's emotions might facilitate the cognitive and emotional processing of upsetting events and hence enhance psychological wellbeing. This idea proposes that individuals make meaning of their experiences and lessen the emotional weight connected with them by expressing and reflecting on their feelings through disclosure. (Pennebaker, 2007)

Emotions (Gross & Levenson, 2002) and the suppression of thoughts leads to heightened physiological arousal, negative mood, and impaired cognition. In contrast, accessing, expressing, and processing inhibited emotions is thought to be adaptive. (Wenzlaff & Wegner, 2000)

Perhaps the clearest demonstration of this stems from the written emotional disclosure or expressive writing paradigm (Pennebaker & Beall, 2003). In the standard version of this paradigm, participants are randomized to write for 15 to 20 minutes daily for several days about either stressful experiences (disclosure) or non-emotional topics (control). Changes in health and adjustment from baseline to follow-up several months later are compared between groups to determine the effects of disclosure. (Wenzlaff & Wegner, 2002)

Studies of emotional disclosure have been conducted on three types of participants (Harris, 2006). Many of the early studies were conducted on unselected,

healthy young adults, and a meta-analysis indicated that these studies often showed moderate sized effects across a range of outcomes (Smyth, 2001).

More recent studies have been conducted on people with medical disorders, such as asthma, rheumatoid arthritis, cancer, or fibromyalgia, and the results of these studies have been mixed, with weaker effects than found in healthy young adults (Frisina, Borod, & Lepore, 2004). Finally, a third set of disclosure studies has examined people who were selected because they had experienced a stressor or had unresolved stress problems.

Although no benefits have been reported for people who are bereaved (Kovac & Marion, 2000), studies of people who report other unresolved stressors have shown benefits of written disclosure (Sloan, Marx, & Epstein, 2005).

As the conversational abilities of chatbots quickly improve (Zhang et al., 2018) and public interest grows (Markoff & Romeo, 2016), it is critical to understand the emotional, relational, and psychological outcomes of disclosing to a chatbot. Extant research provides three theoretical frameworks that suggest different potential outcomes. First, a theoretical emphasis on perceived understanding suggests that disclosure will only have a beneficial impact when the partner is believed to have sufficient emotional capacity to truly understand the discloser, which chatbots inherently cannot. We refer to this as the perceived understanding framework. Second, research on conversational agents and disclosure intimacy, in contrast, suggests that disclosure will be even more beneficial with a chatbot than a human partner, because chatbots encourage more intimate disclosure. (Schut, Zech, & van den Bout, 2002),

Self-Determination Theory emphasizes people's innate drive and demand for competence, relatedness, and autonomy. According to this hypothesis, people who express their emotions in a self-initiated and genuine way are more likely to feel

psychologically wellbeing because their fundamental psychological requirements are being. (Ryan, & R. M. 2000).

The transactional model, proposed by Lazarus and Folkman, emphasizes the dynamic interaction between individuals and their environment in the stress and coping process. Studies (Lazarus & Folkman, 1984) suggest that one's perception and appraisal of stressors significantly influence psychological well-being.

Research by Lazarus and Folkman (2000) highlights how individuals actively engage in cognitive appraisal to assess the significance of stressors, impacting emotional responses and overall well-being. Additionally, studies (Lazarus, 1999,2002) indicate that effective coping strategies contribute to better psychological outcomes.

In the context of the transactional model, ongoing investigations (e.g., Lazarus & Folkman, 1984; Lazarus, 2003) reveal the importance of coping mechanisms and individual differences in shaping psychological well-being. Understanding these dynamics is crucial for developing interventions that enhance adaptive coping and promote mental health. (Stroebe, Stroebe, & Schut, 2012),

According to a study by Yoo, Lee, and Park (2016), cultural factors such as gender and social norms can influence emotional disclosure and its impact on psychological wellbeing. The study found that, in Korean culture, women were more likely to engage in emotional disclosure, while men were expected to suppress their emotions. Additionally, the study highlighted the importance of considering cultural norms around seeking help for mental health issues, as individuals from cultures that stigmatize mental health may be less likely to engage in emotional disclosure and may experience decreased psychological wellbeing as a result.

Research has also shown that emotional disclosure can have varying effects depending on cultural factors. A study by Kim and colleagues (2017) found that individuals from collectivistic cultures, where the emphasis is on group harmony and emotional restraint, may not experience the same benefits of emotional disclosure as individuals from individualistic cultures.

Overall, cultural studies on emotional disclosure and psychological well-being emphasize the need to consider cultural factors when understanding the role of emotional expression in mental health (Yoo, Lee, & Park, 2016; Kim et al., 2017).

This significant investigation looked at the results of writing about one's emotions. On four consecutive days, participants were told to write for 15 minutes on a painful or emotionally meaningful incident. According to the findings, individuals who disclosed their emotions had better physical health and made fewer doctor visits than those in the control groups'(W. Pennebaker & S. K. Beall, 2002).

A randomised study investigated the relationship between baseline levels and changes in experiential avoidance and mindfulness, as well as whether narrative emotional disclosure enhances this behaviours.(Wiley Periodicals, 2009).

In this study, college students' rumination and depressive symptoms were examined in relation to the impacts of expressive writing. Either an emotional disclosure writing condition or a control writing condition was assigned to participants at random. The results showed that compared to the control group, participants in the emotional disclosure group reported decreased levels of rumination and depressed symptoms. (Gortner, Rude, & Pennebaker, 2013)

Contextual factors, such as the presence of a safe and supportive environment, can significantly impact the effectiveness of emotional disclosure in promoting psychological well being. Research suggests that emotional disclosure is more

effective for women with Type D personality traits compared to men, as indicated by Mols and Denollet (2013). It has also been associated with greater positive affect and less negative effect, contributing to overall psychological well-being, as outlined by Frattaroli (2006). Consequently, emotional disclosure can serve as a valuable tool for improving the psychological well-being of individuals, particularly women with Type D personality traits who are at risk for negative health outcomes. (Range & Kovac,2002).

Emotional or self-disclosure plays a significant role not only in psychotherapy but also in the formation of personal relationships and coping with stress and traumatic experiences (Frattaroli, 2006; Stiles, 1995; Farber, 2006). It is considered a crucial part of the therapeutic process, where clients disclose their innermost feelings, conflicts, and emotions. Furthermore, in the context of friendships, a study conducted by Davis and Thompson (2020) found that individuals who expressed their feelings to their friends reported higher levels of friendship satisfaction.

Peterson and Roberts (2021) looked at how emotional disclosure affected partners' communication styles, they discovered that honest emotional expression encouraged more helpful and understanding dialogue, which ultimately increased relationship happiness.

The results of emotional disclosure research were looked at by Frattaroli (2006). Studies that looked at both verbal and written modes of emotional disclosure were included in the evaluation. Studies have shown that emotional disclosure therapies can enhance a variety of psychological well-being factors, including anxiety reduction, an increase in positive effects, better social interactions, and improvements in cognitive performance.

In their 2011 study, Pennebaker and Chung concentrated on the ways in which emotional disclosure influences psychological well-being. The review focused on the putative   processes of cognitive processing, mood control, and social support. According to research,   emotional disclosure improves well-being outcomes by encouraging cognitive restructuring, emotional release, and integration of traumatic events. The flourishing idea places a strong emphasis on an individual's growth and best   functioning. Positive emotions, involvement, connections, purpose, and accomplishment are all taken into account as elements of psychological well-being and thriving. (Keyes, 2002).

The subjective assessments of people's life satisfaction, positive effect, and negative affect are the main topics of subjectivist well-being theory. It implies that both internal elements (such as personality qualities) and external factors (such as social support, living circumstances), have an impact on subjective well-being (Kluck, & Henry, 2004) looked at how emotional disclosure differs among cultures and how it affects wellbeing. According to the review, the association between emotional disclosure and psychological well-being may be moderated by cultural norms and   beliefs around self-disclosure and emotional expression. To fully comprehend the influencing cultural variables, more study is necessary

Lepore and Smyth (2002) investigated the outcomes of several disclosure techniques, including speaking with others, writing, and taking part in group therapy. According to the review, various disclosure methods may have varying results on psychological wellbeing.   Some people may respond better to writing-based disclosure therapies, while others may benefit from interpersonal forms of disclosure. The persistence of the results of treatments for emotion detection was explored by Baikie and Wilhelm in 2005. According to the review, continual processes of self-

reflection and meaning-making can help people's psychological well-being benefit from emotion disclosure therapies over a longer period of time.

Type D personality

Type D personality, also called distressed personality, is defined as the interaction of high levels of negative affectivity and social inhibition (Denollet et al., 2010). Type D personality has been associated with 19%–51% of patients with CHD (Enatescu et al., 2021) and is an established psychosocial risk factor affecting CHD prognosis.

According to early estimations, the general population contains 20% Type D personalities (Denollet, 2005). But more recent studies have found prevalence rates as high as 42.8% (Booth & Williams, 2015), underscoring the need of researching the effects of Type D personality on health. Given prior research linking Type D personality to a variety of health outcomes, including increased physical symptoms (Smith et al., 2018; Williams & Wingate, 2012), poor prognosis in heart disease patients (Kupper & Denollet, 2007), cancer survivors (Mols, Denollet, & Thong, 2012), and other clinical populations, it is important to evaluate the degree to which Type D personality predicts physical health over time.

A growing body of literature suggests that Type D personality is a psychosocial factor associated with negative health outcomes. The Type D personality, or the "distressed personality", is characterised by two global personality traits: negative affectivity (NA) and social inhibition (SI). For clinical use, this personality type has been associated with a variety of emotional and social difficulties and increased morbidity and mortality in patients with established cardiovascular disease. (Schiffer & pedersen SS et al. 2005).

There was a difference depending on sex, where 10.4% among boys and 14.6% among girls (p = < 0.001) were defined as Type D personality. Boys and girls with a Type D personality had an approximately 2-fold increased odds of musculoskeletal pain and 5-fold increased odds of psychosomatic symptoms. The subscale NA explained most of the relationship between Type D personality and psychosomatic symptoms and musculoskeletal pain. No interaction effect of NA and SI was found. (McBeth J & Jones K et al. (2007).

Merlijn showed that adolescents with chronic functional somatic complaints scored higher on neuroticism (a scale with many resemblances to the Type D personality) compared with their peers devoid of any chronic complaints (Merlijn VP, Henfield JA et al., 2003). This implies that personality characteristics may be associated with somatic complaints even in younger age groups. There is a strong association between self-reported somatic complaints and poorer psychological well-being in adolescents. (Zwaigenbaum & Szatmari P et al. (2002).

Denollet et al.,(2004) suggest that personality might be linked to health outcome either directly through psychophysiological mechanisms, such as those above, or indirectly through poor health behaviours or psychological factors, such as a lack of social support that may arise from the personal behaviour Type D personality results (Denollet, 2006) .The behavioral strategies of withdrawal and avoidance independent from their motives are probably related to a smaller number of peer relationships and less social support . It has been reported that 13-24% of individuals in a healthy adult population can be classified as a Type D personality (Aquarius AE, Smolderen KG et.al 2009). A previous study on young people has shown a similar pattern (Jellesma FC et al., 2008) .The present study showed a lower prevalence of Type D personality among adolescents. Although both boys and girls scored relatively

high on both subscales (i.e. 35% of the girls had a score above cut-off on the NA subscale) relatively few met the cut-off for Type D personality. Jellesma suggested that Denollet's criteria may be too sensitive for adolescents with scores around the median, because the characteristics of Type D personality become more stable during adolescence and manifest themselves around the age of 20. (Jaarsma T et al., (2011).

It has been suggested that type D personality may be better represented as a dimensional construct , and should be analyzed as the interaction between negative affectivity and social inhibition . Williams L et al. (2012). Barnett showed that Type D personality and its two subscales demonstrate strong internal consistency among chronic pain patients. (Barnett MD & Ledoux T et al.(2009).

One alternative explanation needed to be considered is whether adolescents with Type D personality report more symptoms than others. Often there are no real differences between individuals with high degrees of neuroticism and those with low levels when objective health measurements are made. This demonstrates the powerful force of "self-perceived health" (an individual's perception of their own health), which has been linked with both health status and health consequences. (Goodwin R & Engstrom G et al, (2002).

Few previous studies regarding this personality type have highlighted differences between the sexes and least of all, regarding adolescents. Kupper et al.(2009) found that the prevalence of Type D personality was higher among women.

As the subscales of Type D personality differed in strength of correlations in relation to the outcome variables, we chose to further investigate the importance of each subscale. In the present study, the association between Type D personality, psychosomatic symptoms, and musculoskeletal pain was primarily explained, among both sexes, by the NA subscale. The association between the SI subscale and the

studied symptoms was weak. NA denotes a stable tendency to experience negative emotions. (Watson D, & Pennebaker JW et al., 2007).

Accounting for this general propensity to psychological distress offers the opportunity to flag high-risk patients that may benefit from a more personalized approach to cardiac care. The "distressed" or Type D personality (Razzini C, Bianchi F, Leo R et al .(2008) , refers to a chronic, more covert form of distress that is distinct from depression. Type D patients are inclined to experience negative emotions (negative affectivity) and to inhibit self-expression in social interaction (social inhibition).

Denollet J et al.,(2005) Several studies from our research group have examined the notion that Type D personality is a general propensity to psychological distress that affects cardiovascular outcomes. Pedersen SS, Denollet J et al., (2006). The determinants of psychological distress as a cardiac risk marker. Ladwig KH, Baumert J, Marten-Mittag B et al .(2008) are still unclear; hence, a number of these studies also focused on the role of Type D as predictor of distress.

Roest AM and his colleagues (2010) conducted a Quantitative analyses of prospective studies that included a total of 6121 patients with a cardiovascular condition indicated that Type D personality was associated with a more than 3-fold increased risk of adverse events (9 studies) and long-term psychological distress (11 studies). In addition, a narrative review of 29 studies showed that Type D personality and depression are distinct manifestations of psychological distress, with different and independent cardiovascular effects. There are also plausible biological and behavioral pathways that may explain this adverse effect of Type D personality.

Patients with negative affectivity (the tendency to experience negative mood states across situations and one of the components of type D personality, see below)

are reported to show lower health satisfaction scores. Hagglund KJ, Haley WE et al .(2003). Type D personality refers to patients who frequently experience negative emotions across situations (are high in negative affectivity) in combination with a tendency not to express affect to others (termed social inhibition) . A sample of 195 undergraduate students (138 female) participated in this observational study, where they completed measures assessing Type D personality (DS14), social support, and perceptions of negative social relationships (National Institute of Health social relationship scales), before undergoing a traditional cardiovascular reactivity protocol. (Gallagher, & 2020).

The Type D construct was originally researched in cardiac patients, but growing data indicates that Type D may also be a substantial risk factor for disease in other sickness groups and in otherwise healthy people (Mols & Denollet, 2010; Smith et al., 2018; Williams & Wingate, 2012). According to Ekselius and Slund (2013), type D personality is now understood to be a risk factor for worse physical health, including an increase in somatic symptoms, general health issues, and immune-related illnesses.

According to several studies (Michal & Beutel, 2011; Habra, Linden, Anderson, & Weinberg, 2003; Williams & Wingate, 2012; Booth & Williams, 2015; Howard, 2011), type D personality has been linked to a number of unfavorable outcomes, including anxiety, depression, somatization, maladaptive stress reactivity, dysfunctional coping strategies, lower social support, and unfavorable health behavior in the general population. According to Howard (2011), these elements might potentially buffer the link between Type D and physical health.

According to recent studies, anxiety and perceived stress modulate the association between Type D and health in the general population (Smother et al., 2018). To fully comprehend the processes behind this well-established association, further prospective research are necessary.

While Type D was a significant predictor of poor psychological well-being in both groups of cardiac patients, according to a study by Denollet and colleagues (2010), the prevalence of Type D was greater in the Italian group. The study made the case that cultural variables, including variations in coping strategies and social support, may be to blame for the increased frequency of Type D in the Italian population.

Similar findings were made by Yu and colleagues (2016), who looked into Type D personality in Chinese university students and discovered that it was linked to higher levels of anxiety and depression. The study also revealed that cultural variables, such as the emphasis on social peace and the repression of unpleasant emotions in Chinese culture, may contribute to the formation and maintenance of Type D personality.

Overall, studies on the relationship between Type D personality and psychological health point to the possibility that cultural factors may affect the prevalence and consequences of this personality trait, emphasizing the significance of taking cultural context into account when diagnosing and treating people who have this personality type (Denollet et al., 2010; Yu et al., 2016).

In addition, compared with patients with no type D personality, patients with type D personality who undergo percutaneous coronary intervention face 3.7-fold and 2.7-fold higher risks of depression and anxiety, respectively, during follow-up (AL-Qezweny et al., 2016). Having a type D personality may also worsen the effects of

other psychosocial risk factors such as depression, negatively affecting well-being and further impairing quality of life (Jo et al., 2019).

Moreover, women are more likely to exhibit Type D personality traits, which increase the risk of various health conditions such as cardiovascular diseases, chronic pain, gastrointestinal disorders, and poorer prognosis for patients with coronary artery disease and cancer, as discussed in studies by Hou et al. (2017) and Pedersen et al. (2019).

Kupper, Pelle and Denollet (2013) suggest that the autonomic nervous system in individuals classed as Type D may be affected which may cause coronary issues. Additionally, it is stated by Horwood, Anglim and Tooley (2016) that Type D is associated with poor health, in particular, cardiovascular issues, with individuals classed as Type D also experiencing more somatic issues (van den Tooren & Rutte, 2016). conducted a cross-sectional investigation with a focus on Type D and poor health, using a sample of 646 participants, who all completed the DS14 scale.

Higher heart rate reactivity was found in Type D individuals during a speech performance in a study by Gramer, Haar and Mitteregger (2018), with Bibbey et al. (2015) finding that there were higher heart rates for those classed as Type D personality, when the stress task involved social evaluation. Nasirzadeh and Keraskian (2017) further suggest that Type D may be linked to psychosocial stressors, with O'Riordan, Howard and Gallagher (2019) stating that those who are likely to have Type D personality will be more vulnerable to social stressors.

Aluja, Malas, Lucas, Worner and Bascompte (2019) propose that neuroticism has strong associations with Type D personality with further strong positive correlations found between the negative affectivity (NA) aspect of Type D personality and neuroticism (Horwood & Anglim, 2017). Neuroticism has also been found to be

associated with trait anxiety (Heeren, Bernstein & McNally, 2018), suggesting further similarities between shyness, trait anxiety and Type D personality.

The answer to the question "What does it mean to feel well psychologically?" needs to be sought in literature on humanistic psychology, including developmental and health psychology (Ryff, 1989). Ryff created a multidimensional construct of well-being, building on such concepts as basic life tendencies of Buhler (1935), psychosocial stages of Erikson (1959), personality changes of Neugarten (1973), positive criteria of mental health of Jahoda (1958), account of individuation of Jung (1933), formulation of maturity of Allport (1961), depiction of the fully-functioning person of Rogers (1961), and notion of self-actualization of Maslow (2008).

Psychological well being

Psychological well-being has been defined within the eudaimonic perspective as the development of one's true potential. This is in contrast to the subjective well-being view (Ryff 1995) . Psychological well-being is viewed as the result of a life well-lived and is an important factor in students successfully adapting to college/university life. For this reason, this construct usually includes dimensions such as self-acceptance, positive relationships, autonomy, environmental mastery, personal growth and purpose-in-life (Sandoval, S & colleagues 2017) conducted Several studies have reported lower levels of psychological well-being in students attending university.

Overall, cultural studies on emotional disclosure and psychological well-being emphasize the need to consider cultural factors when understanding the role of emotional expression in mental health (Yoo, Lee, & Park, 2016; Kim et al., 2017). Contextual factors, such as the presence of a safe and supportive environment, can significantly impact the effectiveness of emotional disclosure in promoting

psychological well being. Research suggests that emotional disclosure is more effective for women with Type D personality traits compared to men, as indicated by Mols and Denollet (2013). It has also been associated with greater positive affect and less negative effect, contributing to overall psychological wellbeing, as outlined by Frattaroli (2006). Consequently, emotional disclosure can serve as a valuable tool for improving the psychological well-being of individuals, particularly women with Type D personality traits who are at risk for negative health outcomes.

Studies consistently demonstrate that emotional disclosure is linked to improved psychological well-being. When individuals openly express their emotions, they often experience psychological benefits such as reduced distress, increased self-awareness, and enhanced emotional regulation. Emotional disclosure has been associated with lower levels of stress, anxiety, and depressive symptoms, as well as Type D personality traits, while also being connected to higher levels of psychological well-being (Tamir, 2016).

The aim of this paper is to explore the measurement and some correlates of psychological well-being. This is a somewhat malleable concept which is to do with people's feelings about their everyday-life activities. War & Wall (2002). Some studies argue that even for social network sites that have been found to promote psychological well-being this benefit differs across age groups: old adults benefit more from directed communication activities and less from having a large network, compared to young adults. Kim C et al.(2020).

Diener et al. (2018) found a number of crucial factors that influence psychological well being, such as joyful feelings, involvement in worthwhile activities, fulfilling relationships, autonomy, self-acceptance, and personal

development. The review emphasized the significance of these elements in fostering and sustaining psychological health across cultures and stages of life. Some studies argue that even for social network sites that have been found to promote psychological well-being this benefit differs across age groups: old adults benefit more from directed communication activities and less from having a large network, compared to young adults. (Kim et al.,2020) .

A longitudinal study conducted by Szabo et al., 2019) concluded three purposes of internet use (social, instrumental, and informational) in promoting well-being. Social use of the internet can indirectly impact well-being via decreased feelings of loneliness and increased social engagement. Informational and instrumental uses indirectly impacted well-being through engagement in a wider range of activities. Comput Human et al. (2020).

Bolier et al. (2013) investigated the efficacy of treatments meant to improve psychological wellbeing. They discovered that a variety of therapies, including cognitive behavioral therapy, mindfulness-based programmers, and positive psychology interventions, had favorable benefits on psychological well-being outcomes. The assessment also emphasized the need for more research to ascertain these treatments' long-term impacts and the most effective ways to provide them. Ryff and Singer (2008) evaluated the research showing a link between psychological health and a lower risk of chronic disease, a speedier recovery from illness, and a longer life expectancy. The study made a point of highlighting how important it is to include psychological health when increasing overall health and wellness.

Joshanloo and Weijers (2014) investigated cultural differences in well-being conceptualizations and assessments. The review emphasized the need of comprehending various cultural viewpoints and the demand for culturally sensitive

methods to the research and development of psychological well-being. The results of emotional disclosure research were looked at by Frattaroli (2006). Studies that looked at both verbal and written modes of emotional disclosure were included in the evaluation. Studies have shown that emotional disclosure therapies can enhance a variety of psychological well-being factors, including anxiety reduction, an increase in positive effects, better social interactions, and improvements in cognitive performance. In their 2011 study, Pennebaker and Chung concentrated on the ways in which emotional disclosure influences psychological well-being. The review focused on the putative processes of cognitive processing, mood control, and social support. According to research,   emotional disclosure improves well-being outcomes by encouraging cognitive restructuring, emotional release, and integration of traumatic events. The flourishing idea places a strong emphasis on an individual's growth and best   functioning. Positive emotions, involvement, connections, purpose, and accomplishment are all taken into account as elements of psychological well-being and thriving. C. L. M. Keyes (2002).

The subjective assessments of people's life satisfaction, positive effect, and negative affect are the main topics of subjectivist well-being theory. It implies that both internal elements (such as personality qualities) and external factors (such as social support, living circumstances), have an impact on subjective well-being.

(Kluck, & Henry, 2004) looked at how emotional disclosure differs among cultures and how it affects wellbeing. According to the review, the association between emotional disclosure and psychological well-being may be moderated by cultural norms and beliefs around self-disclosure and emotional expression. To fully comprehend the influencing cultural variables, more study is necessary

Lepore & Smyth (2002) investigated the outcomes of several disclosure techniques, including speaking with others, writing, and taking part in group therapy. According to the review, various disclosure methods may have varying results on psychological wellbeing.   Some people may respond better to writing-based disclosure therapies, while others may benefit from interpersonal forms of disclosure. The persistence of the results of treatments for emotion detection was explored by Baikie and Wilhelm in 2005. According to the review, continual processes of self-reflection and meaning-making can help people's psychological well-being benefit from emotion disclosure therapies over a longer period of time.

Denollet et al. (2006) examined the effects of emotional disclosure on psychological well-being in individuals with Type D personalities. The study found that individuals with Type D personalities who engaged in expressive writing (a form of emotional disclosure)   experienced reduced levels of anxiety and improved psychological well-being compared to controls group. This suggests that emotional disclosure interventions may be beneficial for individuals with Type D personalities. In the 2008 study by de Ridder et al., older Dutch people with Type D personalities participated in a writing activity in which they revealed their private thoughts and feelings over a traumatic occurrence. Writing exercises that required factual, expressive or no writing was randomly assigned to participants. In contrast to expressive writing, the results revealed that factual writing and no writing conditions resulted in greater psychological well-being and decreased worry and sadness.

Theoretical framework

The relationship of emotional disclosure , Type D personality and psychological wellbeing among young adults can be explain by several theories but

this research is explained by Transactional model .According to the Transactional Model, individuals engage in a dynamic process of appraisal and coping in response to stressors. Stressful events or experiences, such as emotional challenges, can trigger cognitive and emotional appraisals, which in turn influence coping strategies and ultimately impact psychological well-being. Lazarus, R. S., & Folkman, S. (1984).

Emotional disclosure refers to the act of expressing one's emotions, thoughts, and experiences to others. The theory of emotional disclosure suggests that sharing emotions with others can have therapeutic effects, leading to emotional relief and enhanced psychological well-being. This process allows individuals to gain new perspectives, validate their experiences, and receive social support, which can buffer the negative impact of stressors. (Suls, J., & Fletcher, B. (1985).

Type D personality refers to a personality trait characterized by the tendency to experience negative emotions (e.g., anxiety, depression) and social inhibition (e.g., avoiding social interactions). Type D individuals are prone to internalizing emotions and tend to inhibit emotional expression. This personality type has been associated with increased psychological distress and reduced psychological well-being. Type D individuals may struggle with disclosing their emotions and seeking social support due to their fear of rejection or negative evaluation. (Pennebaker, 1997).

Psychological well-being refers to an individual's overall state of mental health and happiness. It encompasses various dimensions, such as positive effect, life satisfaction, self esteem, and the absence of psychological distress. Psychological well-being is influenced by various factors, including personality traits, coping strategies, and social support.

The Transactional Model suggests that emotional disclosure can play a role in promoting psychological well-being, especially among individuals with Type D

personality   traits. Emotional disclosure provides an opportunity for Type D individuals to confront and process their negative emotions, facilitating emotional regulation and reducing psychological distress (Denollet, 2005).By expressing their emotions and receiving social support, individuals with Type D personality may experience increased self-esteem, reduced anxiety and depression, and improved overall psychological wellbeing.

Transactional Model provides a theoretical framework for understanding the relationship between emotional disclosure, Type D personality, and psychological wellbeing, individual differences and contextual factors can also influence these relationships. Other theories and models, such as social support theory or cognitive-behavioral theories, may offer additional insights into this complex interplay.

Rationale

This study aims to investigate the relationship between Type D personality, emotional disclosure, and young people' psychological wellbeing. According to earlier studies (Haber et al., 2017), emotional disclosure can be a powerful coping mechanism that improves psychological well-being. The act of expressing and sharing one's feelings, ideas, and experiences with others is referred to as emotional disclosure. This can be accomplished in a number of ways, including keeping a journal, speaking with friends or therapists, or partaking in artistic or musical expression.

Additionally, studies have shown that Type D personality is associated with poorer psychological well-being (Haber et al., 2017). Type D personality is characterized by a combination of two personality traits: negative affectivity (experiencing negative emotions such as anxiety, irritability, and depression) and social inhibition (tendency to inhibit self expression and avoid social interactions).

Individuals with a D personality are more prone to psychological distress and are at higher risk of developing mental health problems. While the individual effects of emotional disclosure and Type D personality on psychological wellbeing have been examined separately in previous studies, there is a gap in the literature regarding their combined impact on psychological well-being in young adults. Understanding how emotional exposure and Type D personality interact to influence psychological wellbeing in this specific population is critical for mental health professionals working with young adults."By investigating the correlation between emotional disclosure, Type D personality, and psychological well-being, this study aims to offer crucial insights into effective coping strategies and potential risk factors affecting the mental health of young adults (Haber et al., 2017). The outcomes of this research could hold practical significance for mental health professionals, empowering them to design personalized interventions and therapies that foster emotional well-being and counteract the adverse effects associated with Type D personality traits."

The objective of this study is to investigate the correlation between emotional disclosure, Type D personality, and psychological well-being among young adults. Previous research has demonstrated that emotional disclosure can be an effective coping mechanism that enhances psychological well-being (Haber et al., 2017).

Emotional disclosure involves expressing and sharing one's emotions, thoughts, and experiences with others. It can be accomplished through various means such as journaling, confiding in friends or therapists, or engaging in expressive activities like art or music. Furthermore, studies have indicated that Type D personality is linked to poorer psychological well-being (Haber et al., 2017).

Type D personality is characterized by a combination of two personality traits Negative affectivity (experiencing negative emotions such as anxiety, irritability, and

depression) and social inhibition (tendency to inhibit self-expression and avoid social interactions). Individuals with a Type D personality are more susceptible to psychological distress and have a higher risk of developing mental health problems. While previous studies have separately examined the individual effects of emotional disclosure and Type D personality on psychological well-being, there is a research gap regarding their combined influence on psychological well-being in young adults.

Understanding how emotional disclosure and Type D personality combine to effect psychological well-being in this particular group is critical for mental health providers dealing with young adults. This study intends to offer useful insights into efficient coping mechanisms and potential risk factors for mental health among young adults by examining the association between emotional disclosure, Type D personality, and psychological wellbeing. It may be possible for mental health practitioners to create specialized treatments and therapies based on the research's conclusions in order to increase emotional wellbeing and lessen the negative effects of Type D personality features.

This study's importance lies in its capacity to inform mental health professionals and policymakers in Pakistan. Through an examination of the interplay between emotional disclosure, Type D personality, and psychological well-being within the local cultural context, the study holds the potential to offer practical implications. These implications can aid in the development of culturally sensitive interventions and therapies tailored to meet the mental health needs of Pakistani young adults. The implementation of such interventions could potentially mitigate the negative impact of Type D personality traits and foster emotional well-being among this demographic, thus contributing significantly to improved mental health outcomes in Pakistan (Haber et al., 2017).

Objectives

Followings are objectives of this study and they are representing the relationship of the variables.

1. To examine the relationship between emotional disclosure, psychological wellbeing and Type D Personality among young adults.

2. To study the impact of gender differences on emotional disclosure, psychological wellbeing and Type D personality.

Hypotheses

Following are the hypothesis of this study

1. There would be a significant positive relationship between emotional disclosure, type D personality and psychological well-being among young adults.

2. There would be gender differences among emotional disclosure, psychological well being and Type D personality.

Chapter 2

METHOD

This chapter looks into the methodological decisions made in this research the research was based on quantitative research data was collected by 250 participants and further analysis was done by using SPSS . In this section ,the selected methodological approaches are argued for and the choices made in this research are justified.

Research design

Correlation study design was used in the present study.

Population and sample

The sample size was calculated through G-Power. G-Power provides a user-friendly interface and offers a wide range of statistical tests and methods for power analysis. It allow researchers to specify various parameters such as the type of statistical test, desired power level significance level, effect size, and sample size. For this study sample was selected from the general population of Rawalpindi and Islamabad. Sample size selected was 250 young adults age range 18-30. Convenient sampling technique was used.

Sampling technique

Convenient sampling technique was used.

Inclusion criteria

1. Participants who were willing and able to provide informed consent.

2. Educated young adults were included in the study

Exclusion criteria

1. Individual with any disability that hinders their participation in the study.

Instruments

Demographic Sheet

A demographic sheet is a form or document used to gather basic demographic data from participants in a study or research project. It is sometimes referred to as a demographic questionnaire or survey. In most cases, it asks a series of questions about the participants' backgrounds and personal traits. The demographic sheet for this study was created taking into account factors including age, marital status, degree of education, type of family— nuclear or joint—income level, and occupation.

Emotional disclosure scale

The Emotional Disclosure Scale (EDS) is a psychological assessment tool used to measure an individual's willingness and ability to disclose their emotions. It assesses the extent to which individuals feel comfortable expressing their emotions and sharing them with others. Scoring the EDS involves assigning numerical values to the responses provided by the individual and then calculating a total score. However, since the specific scoring criteria may vary slightly depending on the version of the EDS used, it's essential to refer to the specific instructions and guidelines provided by the test developer or researcher who administered the scale. The Scale was developed by Penne baker, Mayne, & Francis (1997). The scale consists of 20 items to evaluate the extent of emotional disclosure in individual's writing. The scale has shown good reliability (0.64-0.76).

It's important to note that this is a general overview of the scoring process for the

Emotional Disclosure Scale. To obtain accurate and meaningful results, it is recommended to refer to the specific scoring criteria and guidelines provided by the test developer or researcher who administered the scale.

Psychological well-being scale

The Scale was developed Ryff, C. D. (1989), the scale measures 6 dimensions of psychological well-being: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life and self-acceptance. The scale has shown good reliability (0.69-0.86). The scale normally has a range of 1 to 7, with higher scores indicating better psychological well-being. The results are explained as follows: 1-2: Extremely poor psychological health. The person can be going through a lot of pain and be having problems in many areas of their life. 3–4: Low to moderate levels of psychological health. There can be some aspects of the person's life that are upsetting or unsatisfying. 5–6: A moderate to high level of psychological health. Despite the fact that some aspects of their life may still need work, the person typically feels happy and content with their lot in life. 7: Very high levels of psychological health. The person is in excellent mental health, is content, and is working well in many areas of their life.

Type D personality scale DS 14

The Type D Personality Scale DS-14 is a psychological assessment tool used to measure Type D personality, which is characterized by the tendency to experience negative emotions (e.g., anxiety, depression) and inhibit the expression of these emotions in social situations. The DS-14 consists of 14 items that assess two subscales: Negative Affectivity (NA) and Social Inhibition (SI). (Denollet, J.,2005)

Scoring the Type D Personality Scale DS-14 involves assigning numerical values to the responses provided by the individual for each item and the calculating subscale scores and a total Type D score. Here is a general description of how the scoring might be done: The Scale was developed by Denollet, J. (1998),. The scale consists of 14 items to determine type D (distressed) personality traits. Participants answer questions in a 5-point Likert scale ranging from 0 to 4 to indicate the level of agreement. The scale has shown good reliability (0.82-0.87).

Procedure

Participants were selected from different areas of Rawalpindi/Islamabad. The selection process varied based on the nature of the study and the target population. It involved convenient sampling, specific inclusion criteria. Prior to participating, individuals were fully informed about the study's objective, purpose, and procedure.

They received a detailed explanation, either verbally or in written form, of what is expected from them. Participants were provided with an informed consent form that includes information about the study, potential risks and benefits, confidentiality measures, and their rights. The form emphasized that participation is voluntary and that they can withdraw at any time without consequences.

Participants were given a demographic sheet to collect basic information about them, such as age, gender, educational background, occupation, and any other relevant demographic details. This information helps to characterize the sample and understand potential biases in the data.

Participants received three different questionnaires: Emotional Disclosure, Type D Personality, and Psychological Well-being. Each questionnaire had a specific set of questions designed to assess different aspects of the participant's emotional experiences, personality traits, and overall well-being. Participants were assured of

the confidentiality of their responses. They were informed that their personal information will be kept strictly confidential, and data was reported in an aggregated and anonymized manner. To protect participant confidentiality, data was stored securely, either in password protected electronic files, accessible only to authorized researcher involved in the study.

Participants were explicitly informed of their right to withdraw from the study at any point, without providing a reason or facing any negative consequences. They were reassured that their decision to withdraw will not affect their relationship with the researchers. Participants were informed that the entire procedure, including reading the informed consent, completing the demographic sheet, and responding to the questionnaires, was estimated to take approximately 15-20 minutes. By following this detailed procedure, researchers ensured that data collection was conducted in an ethical manner while respecting the rights and autonomy of the participants.

Ethical consideration

Anonymity and confidentiality were assured of the participants. Participants were asked to sign consent form for their willingness to participate. Scales that were used for this study were obtained by the author's knowledge and permission. APA guidelines were followed to conduct this research. Participants were briefed about the purpose of the study, and they received their rightful benefits. Any personal information received was kept hidden, unless it was deemed necessary to be shared solely for research purposes. No information gathered through this research was used for personal benefits.

Statistical analysis

Data analysis was done by using SPSS. Correlation analysis was used to investigate relationship between variables. T-test was used to find out the role of demographic variables.

Chapter 3

RESULTS

The present study aimed to find out the relationship between emotional disclosure, Type D personality, and psychological well-being among young adults, sample of the participant include 250 young adults of age range 18 to 30 years. The data of young adults has been collected from the Islamabad and Rawalpindi. The participants were recruited through convenient sampling technique and was analyzed through descriptive includes mean , median , mode and frequency statistics for demographics variables and also calculate the reliability and spearman correlation of all variables (emotional disclosure) , (Type D personality) and (psychological well-being) and in order to check the differences between the two groups of gender male and female, and also Mann -Whitney analysis was used . The demographic characteristics of sample are as follows:

Table 1

Table 1 presents the demographic characteristics of Young Adults

Demographic characteristics of the participants

Categories		*f*	*%*
Gender	Male	73	29.2
	Female	177	70.8
Education	Fsc	49	19.6
	Bachelors	190	76.0
	Masters	8	3.2
	Ms./M.Phil	1	.4
	Phd	2	.8
Family system	Joint	179	71.6
	Nuclear	71	21.4
Socio-economic status	Lower class	4	1.6
	Middle class	217	86.8
	Upper-class	29	11.6
Marital status	Married	31	12.4
	Unmarried	217	86.8

This table shows demographic characteristics of a young adults with a total size of 250 individuals. The demographics includes qualification. Socio-economic status and family system. The Majority of participant have Fsc and bachelor degree. A small percentage have MS/M.phils. ,and phD degree most of the sample fall under the middle class (86.8%) and very less participant came from lower socio - economic status . Majority of the participants were female (70.8%) and (29.2%) were male.

Table 2

Cronbach's alpha reliabilities of the

Scale	N	M	SD	α	Range	
					Actual	potential
ED	25	125.48	19.25	.88	53-200	40-200
TDP	250	144.50	31.89	.89	14-64	14-70
PWB	250	42.27	8.30	.760	63-236	41-287

Note: M = mean*, SD* = standard deviation*, α* = alpha reliability*, QOL* = Quality of life*, MPVS=* Multidimensional peer victimization scale

Table-2 shows alpha reliability, mean standard deviation, range in study variable. The alpha reliability of ED is .88 which shows that tool is good ($α=0.88$) , The reliability of the TDP is .89 which shows that scale is good ($α=0.89$) ,The reliability of the PWB is .760 which shows that scale is considered reliable ($α=0.760$).The means score of ED is 125.48 , TDP is 144.50 , and PWB is 42.27 . The actual range of scores (53-200) and potential range (40-200) highlight the diversity in emotional disclosure .The actual range of scores (14-64) and potential range (14-70) highlight the negative personality characteristics of young adults. The actual range of scores (63-236) and potential range (41-287) highlight the psychological well-being among both groups of gender.

Table 3

Mean, Median, Mode, Standard deviation, skewness, Kurtosis, and

Kolmogorov-Smirnov test statistics of the Emotional disclosure , Type D personality

and Psychological well being

Scales	*M*	*Median*	*Mode*	*SD*	Skewness	Kurtosis	K-S	*P*
ED	250	124.0	117.0	19.25	.104	1.643	.60	0.30
TDP	250	42.50	43.00	8.30	-.407	1.244	.63	0.17
PWB	250	144.00	128.00	31.86	-.153	-.192	.37	.200*

Table-3 presents various descriptive statistics, including mean (M), median, mode, standard deviation (SD) , skewness , kurtosis , and Komlogorov-Smirnov (K-S) test statistics for the for the Emotional Disclosure (ED) , Type D personality (TDP) ,and Psychological WellBeing (PWB) scale based on a sample of 250 . The positive skewness (0.104) indicates a slightly skewed distribution to the right, meaning that there may be a few individuals with very high scores. The kurtosis (1.643) indicates that the distribution has slightly heavier tails and a more peaked shape than a normal distribution. The K-S test p-value of 0.30 suggests that the distribution is not significantly different from a normal distribution. The scores for emotional disclosure are relatively normally distributed, with a slight right skew. The negative skewness suggests a slight left skew, meaning there may be a few individuals with lower scores. The kurtosis (1.244) suggests a distribution with moderately heavy tails and a more peaked shape than a normal distribution. The K-S test p-value of 0.17 indicates that the distribution is not significantly different from a normal distribution. The scores for Type D Personality are relatively normally distributed with a slight left skew. The negative skewness indicates a slight left skew, meaning there may be a few individuals with lower scores. The kurtosis (-0.192) suggests a distribution with lighter tails than

a normal distribution. The K-S test p-value of 0.200* is close to the significance level of 0.05, indicating a potential deviation from a normal distribution, although it is not strongly significant. The scores for Psychological Well-Being have a distribution that is somewhat skewed to the left.

Table 4

Relationship between Emotional disclosure, Type D personality, and Psychological well being among young adults

Variables	N	1	2	3
ED	250	--	.288**	.005
TDP	250	.288**	--	.118
PWB	250	.005	.118	--

The correlation coefficient between ED and TDP is .288 (marked with " indicating statistical significance). This positive correlation suggests that there is a moderate positive relationship between emotional disclosure and having a Type D personality. The correlation coefficient between ED and PWB is .005, which is close to zero. This indicates a very weak relationship between emotional disclosure and psychological well-being among the young adults in the sample. The correlation is not statistically significant. The correlation coefficient between TDP and PWB is .118. This positive correlation suggests a weak to moderate positive relationship between having a Type D personality and experiencing higher psychological wellbeing. However, the correlation is not very strong.

Table 5

Mann-Whitney U- Test values for scales in both groups Male and Female

	MALE		FEMALE		U	P
	N	M	N	M		
ED	73	127.99	177	124.47	6279.00	.727
TDS	73	126.84	177	124.95	6362.50	.850
PWB	73	130.91	177	123.27	6065.50	.447

Note: *M=* Mean, *SD=* Standard Deviation, *U=* Mann-Whitney, *p=* Significance value

Table 5 shows that Emotional Disclosure (ED) U = 6279.00, p = 0.727 The MannWhitney U-Test for ED between males and females shows a p-value of 0.727, which is greater than the typical significance level of 0.05. This suggests that there is no significant difference in emotional disclosure between males and females in the sample. Type D Personality (TDS) (U = 6362.50) (p = 0.850) the Mann-Whitney U-Test for TDS between males and females shows a p-value of 0.850, which is greater than 0.05. This indicates that there is no significant difference in Type D personality between males and females in the sample. Psychological Well-Being (PWB) U = 6065.50, p = 0.447 the Mann-Whitney U-Test for PWB between males and females shows a p-value of 0.447, which is greater than 0.05. This implies that there is no significant difference in psychological well-being between males and females in the sample.

Chapter 4

Discussion

The present study explores the relationship of emotional disclosure, Type D personality, and psychological well-being among young adults age ranging from 18 to 30 both male and female. The relationship was statistically analyzed in SPSS by using spearmen correlation as the data was not normally distributed. Furthermore , differences among groups were also analyzed by using a Mannwhitney U-test and Kruskal-walis test for numerous comprasion in demographics among both groups .

This chapter of the study discussed reliabilities of scales and demographic characteristics of young adults. The present study explores the relationship of emotional disclosure, Type D personality, and psychological well-being among young adults age ranging from 18 to 30 both male and female. The study also highlighted that among two genders male and female, emotional disclosure had a positive significant relation with psychological wellbeing. To conduct the present study a sample of 250 young adults was taken age ranging from 18 to 30 years, from Pakistan's two major cities (Islamabad and Rawalpindi). The sample was appropriate by random sampling technique. The sample under study was administered with the Emotional Disclosure Scale a 40-item scale, Psychological Wellbeing (PWB) 41-items and Type D Personality (TDP), 14 items all of which have good reliability to gather the required data. After collecting the data, the results were analysed by using descriptive and inferential statistics through SPSS-21 software.

As stated in hypothesis 1 there will be a significant difference between emotional disclosure, type D personality and psychological wellbeing among young adults. The study found a moderate positive relationship ($r = .288$, $p < .05$) between

emotional disclosure (ED) and having a Type D personality (TDP). This suggests that individuals who are more open in expressing their emotions tend to exhibit more characteristics associated with a Type D personality. This finding aligns with the idea that the way people disclose their emotions may be linked to specific personality traits.

The correlation between emotional disclosure (ED) and psychological well-being (PWB) was very weak (r = .005) and not statistically significant. This implies that, in this sample, the act of disclosing emotions does not appear to have a direct and meaningful impact on overall psychological well-being. This result may prompt further exploration into the nuances of emotional disclosure and its varying effects on different aspects of mental wellbeing. The study also revealed a weak to moderate positive correlation (r = .118) between having a Type D personality (TDP) and experiencing higher psychological well-being (PWB). While this correlation is not particularly strong, it suggests that individuals with Type D personalities may still derive some positive benefits in terms of psychological well-being. This finding emphasizes the importance of considering personality traits when assessing mental well-being.

The study hinted that there might be other factors influencing the connections between emotional expression, personality traits, and mental well-being. It mentioned a study by Pedersen and colleagues in 2016, which looked into how being kind to oneself, known as selfcompassion, might play a role. The study suggested that self-compassion could partially make a difference in how openly expressing emotions relates to feeling good mentally, especially for people with certain personality traits. This shows that these relationships are not straightforward, and we need to look into more things that might make talking about our feelings affect our mental well-being

in different ways, In the second hypothesis it is stated that there is no significant difference in both Type D personality and psychological well-being between males and females in the sample. Table 5 also indicates that there is no significant difference between males and females in emotional disclosure (ED) (U = 6279.00, p = 0.727), Type D personality (TDS) (U = 6362.50, p = 0.850), and psychological well-being (PWB) (U = 6065.50, p = 0.447). The Mann-Whitney U-Tests for ED, TDS, and PWB all show p-values greater than the typical significance level of 0.05, suggesting that gender does not have a significant impact on these factors in the sample.

Gender roles significantly influence emotional expression among Muslims. Research by Mustafa (2017) indicated that gender norms often dictate different avenues for emotional disclosure for men and women within Muslim communities. Women might have more socially acceptable opportunities for emotional expression compared to men, who may face greater pressure to maintain emotional restraint in public settings.Research has also shown that emotional disclosure can have varying effects depending on cultural factors. A study by Kim and colleagues (2017) found that individuals from collectivistic cultures, where the emphasis is on group harmony and emotional restraint, may not experience the same benefits of emotional disclosure as individuals from individualistic cultures. Overall, cultural studies on emotional disclosure and psychological well-being emphasize the need to consider cultural factors when understanding the role of emotional expression in mental health (Yoo, Lee, & Park, 2016; Kim et al., 2017).

Conclusion

In this study, the relationship among emotional disclosure, Type D personality, and psychological well-being among young adults in Pakistan was explored. The

analysis revealed a moderate positive correlation between emotional disclosure and Type D personality, indicating that individuals who engaged in emotional disclosure tended to exhibit traits associated with Type D personality. However, the correlation between emotional disclosure and psychological well-being was weak and statistically insignificant. The study also investigated gender differences, finding no significant impact of gender on emotional disclosure, Type D personality, and psychological well-being in the sample. This aligns with broader cultural research indicating that gender roles significantly influence emotional expression within Muslim communities. The study underscores the importance of considering cultural factors, such as collectivism, gender norms, and societal expectations, when examining the interplay between emotional disclosure, personality traits, and psychological well-being in diverse populations. The findings contribute to the understanding of how cultural nuances shape emotional experiences and their psychological implications among young adults in Pakistan.

Limitations

The study was conducted in Pakistan, specifically in Islamabad and Rawalpindi. Therefore, caution should be exercised when generalizing the findings to other cultures or regions, as cultural norms and attitudes toward emotional disclosure can vary significantly.

The study focused on young adults aged 18 to 30. This limited age range might not capture potential differences in emotional disclosure, Type D personality, and psychological well-being among older age groups. Additionally, the study's sample might not be representative of the entire population in terms of socioeconomic status, education level, or other demographic factors. The study used a random sampling

technique, but the representativeness of the sample could be influenced by factors such as accessibility and willingness to participate. For instance, young adults who are more open to emotional disclosure might have been more likely to participate, potentially affecting the generalizability of the findings.

The data collected relied on self-report measures for emotional disclosure, Type D personality, and psychological well-being. Self-report measures are subject to social desirability bias, where participants might respond in a way they perceive as socially acceptable rather than providing accurate reflections of their experiences. The study utilized a cross-sectional design, providing a snapshot of relationships at a specific point in time. Longitudinal studies would be more suitable for establishing causal relationships and understanding how these variables may change over time. While the study acknowledged the potential influence of mediating variables, it did not extensively explore them. Future research can study deeper into factors like self-compassion and other cultural or contextual variables that may moderate or mediate the relationships between emotional disclosure, Type D personality, and psychological well-being.

The study shows that how men and women express emotions in Muslim communities can be influenced by cultural expectations. However, the research didn't fully explore how these cultural factors affect the link between sharing emotions and mental well-being. Future studies could take a closer look at the specific cultural aspects that play a role in shaping how expressing emotions relates to overall mental well-being.

Suggestions

An investigation of the similarities and variations in this correlation between emotional disclosure, Type D personality, and psychological well-being in young people and older persons would be quite instructive.

According to Charles and Christensen (2010), people with various developmental stages and life experiences may demonstrate unique coping mechanisms that might affect the relationship between emotional disclosure and psychological well-being. A high level of negative affectivity and social inhibition are characteristics of the Type D personality, according to Penne baker (1997) and Décolleté (2005), who contends that emotional disclosure is communicating one's feelings, thoughts, and experiences to others.

Researchers can determine whether the relationship between emotional disclosure and psychological well-being varies across different life stages by comparing the frequency and depth of emotional disclosure, prevalence of Type D personality traits, and measures of psychological well-being in both age groups. The impact of emotional expression on mental health and well-being over the lifespan may be better understood if age-related changes are taken into account (Sols & Fletcher, 2005; Riff, 2014).

Future implications

The findings of a comparative study examining the relationship between emotional disclosure, Type D personality, and psychological well-being between young adults and older adults had significant implications for mental health professionals working with individuals who exhibit Type D personality traits. Study concluded that emotional disclosure is beneficial for individuals with Type D

personalities; mental health professionals may be able to incorporate this strategy into their interventions. Kupper, N,

&Booms, D. I. (2007)

Mental health professionals often use a variety of therapeutic techniques and interventions to address the unique needs of individuals with Type D personality traits. If study results suggest that emotion disclosure is beneficial for individuals with Type D personalities, mental health professionals may consider incorporating interventions that specifically support and facilitate emotional expression into their treatment plans. This may include incorporating techniques such as expressive writing exercises, group therapy discussions, or individual counseling sessions aimed at promoting emotional disclosure.

Understanding the potential benefits of emotional disclosure for individuals with Type D personalities may contribute to improved treatment outcomes. By encouraging emotional expression and providing a safe and supportive environment for individuals to reveal their emotions, mental health professionals can help clients with D personality traits develop more adaptive coping strategies, reduce emotional distress, and improve their overall psychological well-being. Emotional disclosure can promote self-awareness and insight, allowing individuals with D personalities to gain a deeper understanding of their emotions, thoughts, and behaviors. Mental health professionals can use emotional disclosure techniques to help clients with Type D personality traits explore and reflect on their internal experiences, identify patterns of negative affectivity and social inhibition, and develop strategies for managing these tendencies in their daily lives.

The study results suggest that emotional disclosure is beneficial for individuals with Type D personalities, and mental health professionals can also incorporate this information into preventive interventions. By focusing on early intervention strategies that promote emotional disclosure and address the unique challenges faced by individuals with Type D personality traits, mental health professionals can potentially reduce the risk of developing more serious mental health problems in the long term.

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Appendix's

Informed Consent

I am a B.S psychology student in Capital University of Science and Technology. I am currently doing a research on Relationship of emotional disclosure, Type D personality and psychological well-being among young adults Which is requirement of my degree. I invite you to take part in this study. If you volunteer to participate in this research. Please fill the questionnaire. Your identity will be kept confidential. Your name will not be used in report. When the study is completed, findings will be presented in summary form and the list will be destroyed. Your participation in this study is voluntary. You have right to say no, but it would be a great contribution and help to this research if you participate and give your honest responses.

Please contact if you have questions about the study

Email: mekiali116@gmail.com

Signature:………..

Demographic Information Sheet

Age

18-22

23-26

27-30

Gender

Male ☐ female   Family system: ☐ nuclear ☐ joint

Educational Qualification

- Fcs
- Bachelors
- Masters
- MS/M-Phil
- PhD

Social economic class: ☐ Poor class ☐ middle class ☐ upper class

Marital status: ☐ married ☐ unmarried

Number of siblings…….

APPENDIX A

Read each statement carefully and choose which one of five possible response. There are no right and wrong answers.

Strongly disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5

Sr.no	Items	1	2		3	4	5
1	Times when you felt depressed						
2	Times when you felt happy						
3	Times when you felt jealous						
4	Times when you felt anxious						
5	Times when you felt angry						
6	Times when you felt calm						
7	Times when you felt apathetic						
8	Times when you felt afraid						
9	Times when you felt discouraged						
10	Times when you felt cheerful						
11	Times when you felt possessive						
12	Times when you felt troubled						
13	Times when you felt infuriated						
14	Times when you felt quiet						
15	Times when you felt indifferent						
16	Times when you felt fearful						
17	Times when you felt pessimistic						
18	Times when you felt joyous						
19	Times when you felt envious						
20	Times when you felt worried						
21	Times when you felt irritated						
22	Times when you felt serene						
23	Times when you felt numb						
24	Times when you felt frightened						
25	Times when you felt sad						
26	Times when you felt delighted						
27	Times when you felt suspicious						
28	Times when you felt uneasy						
29	Times when you felt hostile						
30	Times when you felt tranquil						
31	Times when you felt unfeeling						
32	Times when you felt scared						
33	Times when you felt unhappy						
34	Times when you felt pleased						

35	Times when you felt resentful						
36	Times when you felt flustered						
37	Times when you felt enraged						
38	Times when you felt relaxed						
39	Times when you felt detached						
40	Times when you felt alarmed						

APPENDIX 2

1	2	3	4	5	6	7
Strongly agree	Somewhat agree	A little agree	Neither agree not disagree	A little disagree	Somewhat disagree	Strongly disagree

|	Items	1	2	3	4	5	6	7
1	I am not afraid to voice my opinions, even when they are in opposition to the opinions of most people							
2	For me, life has been a continuous process of learning, changing and growth							
3	In general, I feel I am in charge of a situation in which I live							
4	People would describe me as a giving person willing to share my time with others.							
5	I am not interested in activities that will expand my horizons							
6	I enjoy making plans for the future and working to make them a reality							
7	Most people see me as loving and affectionate							
8	In many ways I feel disappointed about my achievement in life							
9	I live life one day at a time and don't really think about the future							
10	I tend to worry about that other people think of me							
11	When I look at the story of my life, I am pleased with how things have							
12	I have difficulty arranging my life in a way that is satisfying to me							
13	My decisions are not usually influenced by what everyone else is doing							
14	I gave up trying to make big improvements or changes in my life often get me down							
15	I have not experienced many warm and trusting relationship with others.							
16	I think it is important to have new experiences that challenges how you think about yourself and the world							
17	I think it is important to have new experiences that challenge how you think about yourself and the world							

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18	Maintaining close relationship has been difficult and frustrating for me							

19	My attitude about my self is probably not as most people feel about them self							
20	I have a sense of direction and purpose in life.							
21	I judge myself by what i think is important, not by the values of what others think is important							
22	In general, I feel confident and positive about myself							
23	I have been able to build a living environment and a life style for myself that is much to my liking							
24	I tend to be influenced by people with strong opinions							
25	I do not enjoy being in a new situation that require me to change my old familiar ways of doing things							
26	I don't fit very well with the people and the community around me							
27	I know that i can trust my friends and they know they can trust me.							
28	When i think about it i haven't really improved much as a person over the years.							
29	Some people wonder aimlessly through life but i am not one of them							
30	I often feel lonely because i have few close friends with whom to share							
31	When I compare myself to friends and acquaintances it makes me feel good about who i am							
32	I don't have a good sense of what it is I'm trying to accomplish in life							
33	I sometimes feel as I have done all there is to do in life							
34	I feel like many of the people I know have gotten more out of life than i have							
35	I have confidence in my opinions, even if they are contrary to the general consensus							
36	I am quite good in managing the many responsibilities of my daily life							
37	I have the sense that I have developed a lit as a person overtime							

38	I enjoy personal and mutual conversations with family members and friends							
39	My daily activities often seem trivial and unimportant to me.							
40	I like most parts of my personality							
41	It's difficult for me to voice my own opinions on controversial matters							
42	I often feel overwhelmed by my responsibilities							

APPENDIX 3

Strongly Disagree 1	Disagree 2	Neutral 3	Agree 4	Strongly Agree 5

Sr.no	Items	1	2	3	4	5
1	I make contact easily when i meet people					
2	I often make a fuss about unimportant things					
3	I often talk to strangers					
4	I often feel unhappy					
5	I am often irritated					
6	I often feel inhibited in social interactions					
7	I take a gloomy view of things					
8	I find it hard to start a conversation					
9	I am often in a bad mood					
10	I am a closed kind of a person					
11	I would rather keep other people at a distance					
12	I often find myself worrying about something					
13	I am often down in the dumbs					
14	When socializing. I don't find the right things to talk about.					
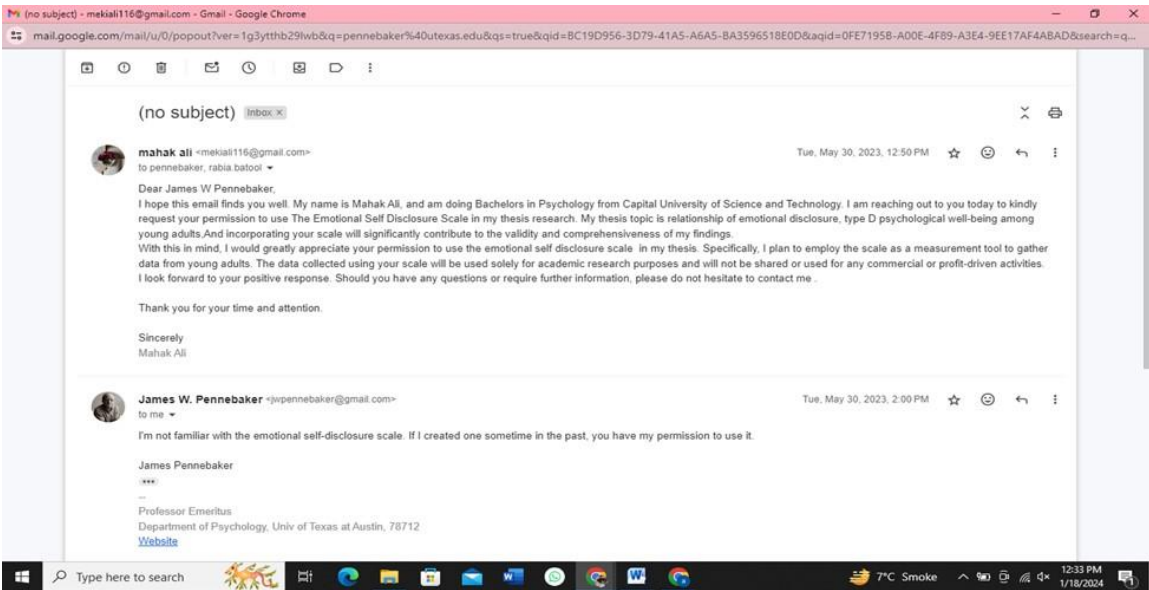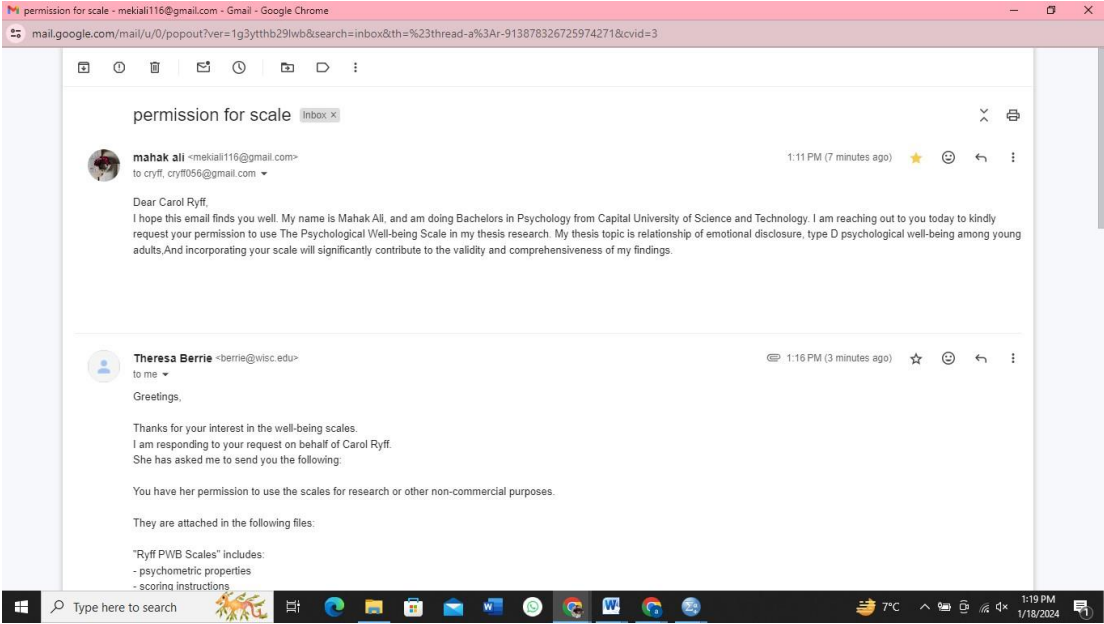
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August 7, 2023

TO WHOM IT MAY CONCERN

Capital University of Science and Technology (CUST) is a federally chartered university. The university is authorized by the Federal Government to award degrees at Bachelor's, Master's and Doctorate level for a wide variety of programs.

Ms. Mahak Ali, registration number **BSP201039** is a bona fide student in BS Psychology program at this University from Spring 2020 till date. In partial fulfillment of the degree, she is conducting research on "Relationship between emotional disclosure, type D personality and psychological well-being among young adults". In this continuation, the student is required to collect data from your institute.

Considering the forgoing, kindly allow the student to collect the requisite data from your institute. Your cooperation in this regard will be highly appreciated.

Please feel free to contact undersigned, if you have any query in this regard.

Best Wishes,

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