Research Paper: A Cross-Cultural Study of the Relationship of Emotional Self-Regulation With Phobia in Iranian and Indian Students

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ABSTRACT

Objective: The purpose of this study was to investigate the relationship of emotion self-regulation with phobia in students of the University of Sistan and Baluchestan, Iran, and University of Delhi, India.

Methods: We used a cross-sectional design for this study. In this study, 686 students (400 students of the University of Sistan and Baluchestan and 286 students of University of Delhi of India) were selected via Convenience sampling method. Data collection tools were Miller and Brown's emotional self-regulation questionnaire and Marks and Mathews Phobia Questionnaire. This study was analyzed by the use of Pearson's correlation coefficient as well as stepwise regression. SPSS version 21 was used for measuring the variables.

Results: The results of this study in students of Delhi University indicated that subscales of searching for options and Assessing the plan's effectiveness are negatively correlated with a phobia of blood/injection/physical damage, and the subscale of formulating a plan is negatively correlated with social phobia. According to regression analysis, data showed that the subscale searching for options (Beta=-0.21) was the best predictors of phobia of blood/injection/physical damage, and alone accounted for 4% of the variance. Also, the subscale of formulating a plan (Beta=-0.146) was the best predictors of social phobia and alone accounted for 2.1% of the variance. Compared to the students of the University of Delhi, the results of students of University of Sistan and Baluchestan showed that the subscale of evaluating the information and comparing it to norms and assessing the plan's effectiveness is positively correlated with a phobia of blood/injection/physical damage, and the total score of phobia. According to regression analysis, data demonstrated that the subscales of evaluating the information and comparing it to norms (Beta=0.147) and assessing the plan's effectiveness were the best predictors of phobia of blood/injection/physical damage, and together accounted for 4.6% of the variance. In addition, the subscale of assessing the plan's effectiveness (Beta=0.113) was the best predictors of total phobia score and alone accounted for 1.3% of the variance.

Conclusion: Therefore, we concluded that culture and society play effective roles in the form of response and expressing emotions. Depending on the culture of each country, both emotional regulation and phobia are different among the members of that society.

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1. Introduction

Culture has always been important in the different fields of psychology, especially in personality, its development, and its formation. Various psychological studies have reported that cultural features of a society create notable personality differences among the members of different societies (Taras, Rowney and Steel, 2009). Kitayama, Karasawa and Mesquita (2004) mentioned that the same way as the personality of individuals becomes influenced by the culture of that region, society, or class, it delicately and complicatedly affects their culture as well. Therefore, the person may get challenged with cultural changes. When the culture of society changes under the influence of different reasons such as social, economic, and political forces, either intentionally, or unintentionally, the individual gets placed in a culture different from his own.

According to various views, reactions of people against these changes are usually mixed and influenced by their individual features or personalities. Some people accept these changes smoothly and create changes in their lives, some people strongly resist these changes, and some others experience anxieties and problems. Some of these cultural changes occur delicately without full awareness of the individual, and naturally, they create slow and delicate changes in the personality of the individual. Some personalities are more flexible against cultural changes; of course, this flexibility is also observable as a personality feature in other aspects of their lives as well (Mesquita & Lou, 2007).

Therefore, ethnic and cultural backgrounds are influential on our personalities. Different studies showed that the way of expressing emotions and feelings in the ethnic and cultural groups has a lot of similarities and differences (Mesquita & Albert, 2007). Some cultures form emotionality as a personality trait in their members, and some other cultures, form calmness and farness from thrill-seeking; some cultures grow up more emotional personalities and some cultures limit and control emotionality of their members (De Leersnyder, Boiger & Mesquita, 2013).

One of the most controversial issues in contemporary psychology is emotional self-regulation. It is one of the psychological aspects affected by social and cultural factors. Gross & Thompson (2007) reported that emotion regulation is the process of initiating, maintaining, modifying or changing the occurrence, intensity or continuation of internal feeling; and emotion is related to social, psychological, and physical processes in fulfilling personal goals. According to Ridder and Wit (2006), emotional self-regulation means a tendency to control internal modes, control momentums, and behaviors, and adapt them to criteria to achieve the goal. Emotional self-regulation includes processes by which people influence their emotions as well as the ways of expression. According to Hofmann and Kashdan (2010), one of the top essential capabilities of human beings is the ability to regulate and adapt their emotions by necessities of specific situations. Hofmann and Kashdan (2010) reported that the individuals who have the capability of managing emotions have better mental health and intellectual welfare. This has different consequences in their lives especially in social and compatibility issues (Gross, Richard & John, 2006).

Human beings face a collection of mixed emotions and feelings in their lives, and if they manage these feelings and emotions very well, they can have healthier lives, as well as healthier personal and social relationships. Most individuals face difficulties in controlling negative emotions, and the main problems appear in expressing these kinds of emotions. Proper use of emotions also has essential roles in life, education, career, and success of human beings (Schutte, Malouff, Thorsteinsson, Bhullar & Rooke, 2007; Jacob et al., 2008). Rothbart and Bitz have introduced regulation of attention and behavior as one of the effective factors on social skills (Corapsi, 2008).

Anxiety disorders are some of the most common medical disorders in the general public which specifically affect mental and social performance as well as individual's quality of life quality. These disorders are along with lots of side effects; they are mostly chronic and resistant to treatment. Anxiety disorders could be considered as a group of distinct mental disorders which, in the meantime, are related to one another. In the fifth version of Diagnosis and Statistical Manuel of mental disorders (DSM-5), adults' anxiety disorders include only generalized anxiety disorder, panic disorder, and phobias.

One of the most critical anxiety disorders is a phobia. The term phobia means extreme phobia of some subject, conditions, or a specific situation. Specifically speaking, phobia means "extreme and permanent phobia of a certain object or situation". Diagnosis of particular phobia requires expression of severe anxiety when exposed to the phobic object. People with particular phobia think that they will suffer some damage. Specific phobia is the most common mental disorder among women and the second mental disorder among men (after disorders related to drugs). The outbreak of particular phobia within

six months is 5% to 10%. The ratio of women to men is 2 to 1 (Sadock & Sadock, 2011).

Studies showed that, because of unawareness of their emotions, people with an anxiety disorder are unable to regulate and control their emotions (Turk, Heimberg, Luterek, Mennin & Fresco, 2005). It is because of the existence of problems in the way emotions are expressed, which has roots in unawareness of the individuals' emotional modes that they have led to the appearance of problems in regulating emotions and have laid the bed for the occurrence of psychological disorders. Weeks, Heimberg & Rodebaugh (2008) believe that problem in the regulation of emotions make people apt to anxiety disorders.

According to Jacobsen et al. (2008), appropriate use of positive emotions reduces the level of individual's anxiety and phobia in the face of stressful situations. According to Werner, Goldin, Ball, Heimberg, and Gross (2011), anxious and timid people instead of expressing appropriate emotions with that situation, because of defect in cognitive evaluating the information and comparing it to norms of situations, suppress it more or express extreme emotions, and this creates problems in proper responding of the individuals (Goldin, Manber, Hakimi, Canli, & Gross, 2009; Carthy, Horesh, Apter, Edge & Gross, 2010).

According to some viewpoints, anxiety disorders such as phobias and phobias with high emotional clarity lead to emotional disorders. Too much expression of emotions clearly and openly will create negative social consequences, thus negative internal reactions and emotional disorders in people with negative feelings and emotional turmoil; therefore, from this perspective, it is considered as an incompatible behavior (Amstadter, 2008). Therefore, when people try to hold back or hide clear signs of their negative emotional and internal modes, contrarily, there is a leap observed in their emotions which they try to avoid (Hayes, Luoma, Bond, Masuda, & Lillis, 2006). Amstadter (2008) emphasizes the crucial role of emotion regulation on the decrease of anxiety disorders and believes that response to treatment in the patients who can regulate emotions, compared to other patients with anxiety disorders, is more. Also, Martin and Dahlen (2005) showed that the existence of a problem in adjusting the emotion makes the individual vulnerable to anxiety disorders, stress, and depression. They emphasize the role of emotion regulation on decrease and control of anxiety.

A lot of intercultural surveys on psychology have considered the way of expressing and controlling emotions generally and globally, and they have counted characteristics which are not limited to a specific culture. Mesquita (2001) and Mesquita & Walker (2003) reported that expression and control of different emotions are different according to the culture, and like beliefs and behaviors, emotions are also formed on the cultural foundation. In addition, these emotions empower the cultural issues which are considered as cultural behaviors and lead to the propagation of important cultural beliefs. In cultures where populism is dominant, compared to individualist cultures, most of the emotion regulations are ongoing. Considering this self-regulation, members of that culture have better psychological reactions to life events and stressful events such as anxiety and phobia. In the populist cultures, by controlling their emotions, individuals pay more attention to social values and social relationships (Gökçen, Furnham, Mavroveli, & Petrides, 2014).

Vivian Kraaij (2016) in the study of emotional anxiety and depression among 1553 individuals in the northern European countries (Germany, Netherlands), southeastern European countries (Spain, Italy, Portugal, and Hungary) concluded that there is significant difference both in the regulation of emotions and in anxiety and depression between these countries. The most important difference is the difference in the form of cognitive and emotional process related to mental symptoms. Generally, the advanced northern European countries (Germany and Netherlands) make lesser use of emotional solutions like disaster and blame; this leads to a decrease of anxiety and depression. Therefore, applying solutions of emotion regulation in response to the stressful events of life differs in different countries. Therefore, this survey was conducted an intercultural study of the relationship of emotion self-regulation with phobia in the students of the University of Sistan and Baluchestan, Iran, and students of University of Delhi, India.

2. Methods

The present study is a cross-sectional study. The study sample consisted of 686 students (400 students from University of Sistan and Baluchestan, and 286 students from University of Delhi of India) in the year 2015-2016. Convenience sampling method was used for selecting samples. Being a student at university was considered as the criterion for selecting samples, and in case the students presented incomplete or invalid replies, they were removed from the sample size. Objectives, as well as procedures, of the study were explained to the participants, and they were given full freedom to leave any time in case they did not like the study. All participants who were eager to know about the research find-

ings were asked to insert their email addresses at the top of the questionnaires so that they could be informed about the results. They were not obliged to express their names, and their personal details were kept confidential. Data were collected from these questionnaires: Miller and Brown's Self-Regulation Questionnaire; and Marks and Mathews Phobia Questionnaire (1979).

Miller and Brown's Self-Regulation Questionnaire has been designed by Miller and Brown for assessing the plan's effectiveness of self-regulation elements and includes subscales (receiving relevant information, evaluating the information and comparing it to norms, triggering change, searching for options, planning, execution, and assessing the plan's effectiveness). Its scoring method is based on the Likert scale from 1 to 5. In this questionnaire, the score beyond 239 shows high self-regulation, between 214-239 shows medium, and the score lower 213 shows low self-regulation (Miller & Brown, 1991). The validity of retesting for the total SQR is 0.94, and its internal equality was reported as 0.91. Reliability of the SRQ appears to be excellent. In present study was high Test-retest reliability for the total SRQ score (r=0.83, P<0.0001). Internal consistency of the scale was also quite high (α=0.81).

Marks and Mathews Phobia Questionnaire (1979) was developed by Marks and Mathews (1979) for measuring phobia, and it has 23 items. Items 1 to 15 identify the level the individual avoids scary situation according to Likert 0-8 (from "I don't avoid" to "I always avoid"). Also, items 13 to 23 identify the level of individual's problems and feelings against the situation according to Likert scale from 0-8 (from "I have no problem" to "I suffer from it always and a lot"). With a total score, the Phobia Questionnaire measures three types of phobia, i.e. phobia of phobic passing, phobia of blood/injection/physical damage, and social phobia. In this survey, to evaluate the validity of the questionnaire, Cronbach's alpha coefficient was used (Mavissakalian, 1986). On this basis, Cronbach's alpha for the subscale of phobic passing was 0.42, for phobia of blood/injection/physical damage was 0.42, for social phobia was 0.47, and for total scale, was 0.77. In present study test-retest reliability for the total Phobia Questionnaire score was high (r=0.72, P<0.0001). Internal consistency of the scale was also quite high (α=0.69).

3. Results

Considering the demographic features, 400 samples are from University of Sistan and Baluchestan, Iran, and 286 students are from University of Delhi, India. Out of this population, 215 Iranian students (53.8%) were male, and 185 students (46.2%) were females. Also, 151

Table 1. Descriptive indices of emotional self-regulation subscales in the students

Subscales	University	M	SD	Min	Max
Emotional Self-Regulation (Variable Indices)					
Receiving relevant information	Sistan and Baluchestan	25.70	3.46	14	35
	Delhi	28.24	4.65	16	44
Evaluating the information and comparing it to norms	Sistan and Baluchestan	24.82	4.32	11	37
	Delhi	29.38	4.55	15	40
Triggering change	Sistan and Baluchestan	25.69	3.89	11	37
	Delhi	27.46	4.03	15	40
Searching for options	Sistan and Baluchestan	22.41	4.84	10	37
	Delhi	30.74	4.78	20	41
Formulating a plan	Sistan and Baluchestan	23.90	3.25	11	37
	Delhi	26.43	3.49	19	36
Implementing the plan	Sistan and Baluchestan	25.49	3.48	14	33
	Delhi	27.08	3.30	19	36
Assessing the plan's effectiveness	Sistan and Baluchestan	23.99	4.12	12	37
	Delhi	28.72	4.61	16	39

Table 2. Descriptive indices of the subscales of phobia in the students

Subscales	University	M	SD	Min	Max
Phobia (Variable Indices)					
Phobia of blood/injection/physical damage	Sistan and Baluchestan	10.68	5.37	0	34
	Delhi	17.89	6.2	1	39
Social phobia	Sistan and Baluchestan	11.88	6.21	0	33
	Delhi	17.86	7.03	1	35
Agoraphobia	Sistan and Baluchestan	13.35	6.39	0	37
	Delhi	17.31	6.47	0	34
Total phobia score	Sistan and Baluchestan	35.9	14.62	2	87
	Delhi	62.77	15.61	22	102

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Indian students (52.8%) were male, and 135 students (47.2%) were female. Out of the students of University of Sistan and Baluchistan in Iran, 260 students (65%) were at the undergraduate level, and 140 students (35%) were at the postgraduate level. Also out of University of Delhi students, 204 students (71.3%) were undergraduate students, and 82 students (28.7%) were postgraduate students. Table 1, shows descriptive indices of data achieved by emotional Self-Regulation Questionnaire as well as anger expression and anger control distinguished separately in the two groups.

Results of Table 1 show that the mean value of the scores related to subscales of emotional self-regulation in the students of University of Delhi, compared to stu-

Table 3. Correlation coefficient of relationship between emotional self-regulation and anger in the students of University of Delhi (UD) and University of Sistan and Baluchestan (USD)

Variables	Phobia								
	Statistic	Phobia of Blood/ Injection/Physical Damage		Social Phobia		Agoraphobia		Total Phobia Score	
Variables	**Statistic**	**UD**	**USD**	**UD**	**USD**	**UD**	**USD**	**UD**	**USD**
Receiving relevant information	r	0.055	0.021	0.076	-0.002	0.074	-0.02	-0.05	-0.002
	Sig.	0.358	0.672	0.204	0.963	0.215	0.686	0.54	0.968
Evaluating the information and comparing it to norms	r	-0.08	0.18**	0.1	0.09	0.04	0.004	-0.03	0.11*
	Sig.	0.18	0.001	0.093	0.06	0.055	0.93	0.05	0.03
Triggering change	r	-0.08	0.04	0.03	0.02	-0.05	-0.02	-0.12	0.01
	Sig.	0.15	0.43	0.61	0.76	0.38	0.65	0.102	0.83
Searching for options	r	-0.2**	0.08	0.09	0.08	0.08	0.03	-0.14	0.08
	Sig.	0.001	0.011	0.135	0.079	0.148	0.47	0.05	0.09
Formulating a plan	r	0.07	-0.06	-0.14*	0.046	-0.06	0.05	0.036	0.021
	Sig.	0.28	0.26	0.014	0.035	0.435	0.03	0.05	0.67
Implementing the plan	r	0.03	-0.03	-0.04	0.08	0.006	0.067	0.033	0.055
	Sig.	0.57	0.61	0.028	0.099	0.092	0.18	0.65	0.28
Assessing the plan's effectiveness	r	-0.13*	0.16**	0.11	0.09	0.07	0.03	0.13	0.133*
	Sig.	0.03	0.001	0.061	0.062	0.203	0.544	0.083	0.023

*Significant in the level of 0.05; **Significant at the level of 0.01

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Table 4. Step-by-step/stepwise regression for predicting phobia from the subscales of emotional self-regulation

University Students	Pattern	Subscale	B	SD	β	t	R^2 Change	P
Delhi	Phobia of blood	Searching for options	-0.299	0.087	-0.20	-3.42	0.04	0.001
	Social phobia	Formulating a plan	-0.261	0.105	-0.146	-2.48	0.021	0.001
Sistan and Baluchestan	Phobia of blood	Evaluating the information and comparing it to norms	0.182	0.064	0.147	2.85	0.033	0.005
		Assessing the plan's effectiveness	0.158	0.067	0.121	2.35	0.013	0.019
	Total phobia score	Assessing the plan's effectiveness	0.403	0.175	0.113	2.27	0.013	0.023

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dents of University of Sistan and Baluchestan, is at a higher level. Among the students of University of Delhi, the highest mean value score belongs to the subscale searching for options (30.74), and the lowest mean value score belongs to the subscale planning (26.43). Whereas, in the students of University of Sistan and Baluchestan, the highest mean value score belongs to the subscale receiving relevant information (25.70), and the lowest mean value subscale belongs to the subscale searching for options (22.41). Table 2 shows the indices related to the variable specific phobia among the students of University of Sistan and Baluchestan and students of University of Delhi.

Results of Table 2 showed that the mean value related to the scores of phobia subscales in the students of University of Delhi was at a higher level compared to that of the students of University of Sistan and Baluchestan. In the students of University of Delhi, the highest mean value of score belongs to the subscale phobia of blood/injection/physical damage (17.89), and the lowest mean value of score belongs to the subscale agoraphobia (17.31). Whereas in the students of University of Sistan and Baluchestan, the highest mean value of score belongs to the subscale agoraphobia (13.35) and the lowest value belongs to the phobia of blood/injection/physical damages (10.68).

Results of Table 3 showed that among the students of University of Delhi, out of the different emotional self-regulative subscales, only the subscales of searching for options and planning have a negative and significant relationship with a phobia of blood/injection/physical damage and social phobia respectively. They also showed that the subscale of assessing the plan's effectiveness too has a negative and significant relationship with a phobia of blood/injection/physical damage ($P<0.05$). Compared to the students of University of Delhi, the results of students of University of Sistan and Baluchestan showed that out of the different subscales of emotional self-regulation, only the subscale of retrieval and assessing the plan's effectiveness have positive and significant relationship with phobia of blood/injection/physical damage, and also with the total score of phobia ($P<0.05$).

The results of Table 4 show the summary of stepwise regression analysis. Subscales of phobia (Phobia of blood/injection/physical damage, social phobia, agoraphobia, and total phobia score) were included as the dependent variable. Self-regulation subscales were inserted as independent variables. These subscales included: receiving relevant information, evaluating the information and comparing it to norms, triggering change, searching for options, formulating a plan, implementing the plan, as well as assessing the plan's effectiveness.

The results showed that one out of seven domains of the emotional self-regulative variable, searching for options could significantly predict phobia of blood and one out of seven domains of emotional self-regulative variable, formulating a plan could significantly predict social phobia in students of Delhi University. The results showed that the subscale searching for options (Beta=-0.21) was the best predictors of phobia of blood/injection/physical damage, and alone accounted for 4% of the variance. Also, the subscale of formulating a plan (Beta=-0.146) was the best predictors of social phobia and alone accounted for 2.1% of the variance. Also, the results showed that two out of seven domains of emotional self-regulative variable, evaluating the information and comparing it to norms and assessing the plan's effectiveness could significantly predict Phobia of blood and also one out of seven domains of emotional self-regulative variable, assessing the plan's effectiveness

could significantly predict total phobia score in students of University of Sistan and Baluchestan.

The results showed that the subscales of evaluating the information and comparing it to norms (Beta=0.147) and assessing the plan's effectiveness were the best predictors of phobia of blood/injection/physical damage, and together accounted for 4.6% of the variance. Also, the subscale of assessing the plan's effectiveness (Beta=0.113) was the best predictors of total phobia score and alone accounted for 1.3% of the variance.

4. Discussion

The current study was the cross-cultural study to investigate the relationship of emotion self-regulation with phobia in students of the University of Sistan and Baluchestan, Iran, and Students of University of Delhi, India. The results of students of the University of Delhi indicated that subscales of searching for options and assessing the plan's effectiveness are correlated negatively with a phobia of blood/injection/physical damage, and the subscale of formulating a plan is correlated negatively with social phobia.

According to regression analysis, findings showed that the subscale searching for options was the best predictors of phobia of blood/injection/physical damage. Also, the subscale of formulating a plan was the best predictor of social phobia. In addition, the results of students of the University of Sistan and Baluchestan showed that the subscale of Evaluating the information and comparing it to norms and Assessing the plan's effectiveness is positively correlated with a phobia of blood/injection/physical damage, and the total score of phobia. According to regression analysis, findings showed that the subscales of evaluating the information and comparing it to norms and assessing the plan's effectiveness were the best predictors of phobia of blood/injection/physical damage. The subscale of determining the plan's effectiveness was the best predictors of total phobia score.

The results of this survey are compatible with the results of the surveys of Martin and Dahlen (2005), Turk et al. (2005), Hayes et al. (2006), Jacobsen et al. (2008), Werner et al. (2011), Goldin et al. (2009), Carthy et al. (2010), Amstadter (2008). The difference in emotional self-regulation depends on its growing conditions and its activation in the different social-cultural environments. Such conditions make it different in various cultural fields. The experience of severe anxiety or phobia exists about every situation (Mesquita and Fridge, 1992).

Emotion regulation is different in every culture and phobia is one of the reactions of emotions that can be affected by emotions of that culture, with regard to expressing phobia in every culture and everybody can be different. Furthermore, the showing of different type of phobia can be varied in relation to culture. Therefore, it can be concluded that by management and regulation of their emotions, individuals can lay the foundation for the advent of affirmative and facilitating emotions; and they can improve the social relationship, flexibility in consideration, and decision-making in the conditions of complexities. On the other hand, emotional exasperation is one of the factors which increasingly affect different educational or professional performances of individuals, so much so that students with high exasperated emotions report more negative self-evaluating the information and comparing it to norms. This is destructive and predictive and creates more anxiety and phobia in them (Asadzadeh, Makvandi, & Mobaraki, 2015).

In illustrating the effect of self-regulation on phobia disorders, it can be implied that considering the interactions between cognition, emotion, and behavior, regulating emotions along with controlling cognitive processes are efficient on memory, consideration, consciousness, and thinking (Abdi, Babapoor, & Fathi, 2011). Emotional self-regulation, by coordinating mental, biological and stimulant processes in the individual, brings about the compatibility of individual and management in giving an appropriate response to the environment (Levenson, 1999). It eventually brings about the physical, psychological, and social survival of the individual.

Therefore, considering the cultural and social principles dominant on both countries, because of emotional self-regulation factors, the phobia prediction is different in the two groups. This study has some limitations. First, this study was not by direct observation and was relied on the report of students, which could have had an impact on the results obtained. Regarding the generalizability of findings, it was cross-sectional study due to which we cannot make any causal claims. Given the findings and limitations, further studies with wider samples and longitudinal designs are required. Future studies can also take into account the other essential aspects of the cross-cultural study. This study showed that culture and society play an important role in expressing feelings, and with regard to the rule of culture in each country. Therefore, emotional and panic disorders are different in the individuals of different cultures.

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Conflict of Interest

The authors declared no conflicts of interest.

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